

APPENDICES
for
Evaluation Report to the
Centers for Medicare and Medicaid Services

Wisconsin Comprehensive Systems Change Grant

No. 11-P-92498/5-01

December 2008

Submitted by

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Wisconsin Comprehensive Systems Change Grant

Appendices

Table of Contents

Appendix A: Grant Proposal Work Plan

Appendix B: Conceptual Framework and Research Questions of the Evaluation Study

Appendix C: Family Care Expansion Counties Survey

Appendix D: Family Care Pilot Counties Survey

Appendix E: ADRC-Only Counties Survey

Appendix F: Consumer Survey Cover Letter – First Mailing

Appendix G: Consumer Survey Cover Letter – Second Mailing

Appendix H: APS E-mail Message Announcing Online Stakeholder Survey

Appendix I: Online Stakeholder Survey

Appendix J: Individual and Group Interview Guide

Appendix K: Respect Guiding Principles

Appendix L: Quality Framework

Appendix M: Grant 4-Year Budget Actuals as of 7-16-08

Appendix N: Acronyms

Appendix A: Grant Proposal Work Plan

Major Activities	Specific Tasks	Products	
<p>Goal 1: Strategic Planning for Statewide Implementation (Judith Frye)</p> <p><i>Objective 1-1: Build consensus among key stakeholders and partners on an implementation plan for statewide reform</i></p>			
Support the State Council on Long-Term Care Reform	Identify and frame implementation issues for the Council and assist the Council to solicit public input through surveys, town meetings, focus groups, etc.	Documentation of issues and Public Input Plan	
	Establish a stakeholder sub-committee of the council to obtain broad and meaningful consumer input, provide effective citizen oversight of reform efforts and recommend strategies to strengthen the role of local LTC governing bodies.	Public and stakeholder input	
	Select vendor, develop curriculum and deliver statewide consumer trainings regarding long-term care reform	Consumer Training Corps	
<p><i>Objective 1-2: Assist local long-term care governing bodies to design and develop more effective local long-term care systems.</i></p>			

Major Activities	Specific Tasks	Products	
Provide training and technical assistance to local long-term support governing bodies	Develop training tools and templates for thinking about local system redesign, including how to explore local or regional partnerships.	Training / Resource Guide for members of local long-term support governing bodies.	
	Work with local UW Extension agents to build capacity in local governing bodies to engage in strategic planning.	Facilitated local strategic planning processes.	
<i>Objective 1-3: Provide support to plan, design and begin to implement local county or multi-county reform efforts...</i>			
Support local partnerships to undertake a one-year planning process for local reform.	Disseminate lessons learned from managed LTC pilots to local and regional partnerships.	Lessons Learned documents	
	Solicit, evaluate and select concept papers outlining a proposed local strategic planning process for local LTC reform. Provide grants	Concepts (papers) for local reform	

Major Activities	Specific Tasks	Products	
	Provide second grants to successful local and regional planning partnerships.	Reform at local level	
	Provide support and ongoing monitoring to selected proposals to design the details of, develop systems and resources and begin implementing local LTC reform	Reform at local level	
	Provide technical expertise in the form of consultants regarding DD services & systems, tribal services and ADRC development to local and regional partnerships.	Reform at local level	
Goal 2: Improving Citizen Access to Information			
<i>Objective 2-1: The State will create a “virtual resource center”...</i>			
Create content for readily available consumer links to information and assistance and other service systems	Survey existing ADRC staff, analyze ADRC client contact data, survey consumers, review other leading I&A providers	Content for web	
Use consumer information to trigger a similar “consumer’s” story.	Develop “consumer’s” stories and clinical logic to link consumer-entered information with appropriate stories.	Consumer stories	

Major Activities	Specific Tasks	Products	
Objective 2-2: Provide information statewide to assist consumers, families and health professionals to understand LTC choices			
Develop web site	Contract for web site development	Virtual web site	
Design an effective LTC multimedia campaign	Solicit marketing industry expertise.	Professional design	
	Produce multimedia tools	Multimedia tools	
	Multimedia materials adapted and implemented locally	Local multimedia campaign	
	Implement statewide campaign	Local multimedia campaign	
Objective 2-3: Make full service aging and disability resource centers available statewide for all target groups			

Major Activities	Specific Tasks	Products	
Use the State Council on LTC Reform task force on Resource Center Expansion and current ADRCs to plan for more local ADRCs	Develop standards for target groups, certain core services, and quality for ADRCs	ADRC Standards	
	Develop a work plan and budget initiative for disseminating the tools and training needed at the local level to create full service ADRCs.	ADRC Expansion Work Plan	
<i>Objective 2-4: Implement successful evidence-based prevention and early intervention strategies...</i>			
Promote successful prevention and early intervention activities.	Build on the “Add LIFE to Your Years” information campaign.	Prevention Tools	
	Pilot a dementia screening process in an existing ADRC	Lessons Learned Documents and Implementation Tools	

Major Activities	Specific Tasks	Products	
	Work with ADRCs, ILCs, and other agencies to develop other prevention, intervention and disease management strategies.	Prevention Tools	
Goal 3: Managing Access to the Long-Term Care System... <i>Objective 3-1: The State will improve the long-term care functional screen capabilities...</i>			
Develop improvements to the functional screen.	Develop clinical logic for pre-admission consultation.	Inc LTC FS capability	
	Rewrite statutory language on pre-admission counseling.	Statutory language change	
	Contract for preadmission consultation IT development.	Inc LTC FS capability	
	Develop clinical logic for personal care service prior authorization.	Inc LTC FS capability	
	Contract for functional screen IT development.	Inc LTC FS capability	

Major Activities	Specific Tasks	Products	
	Develop clinical logic for nursing home level of care determination (Activity changed to establish acuity-based NH rates).	Inc LTC FS capability	
	Contract for nursing home level of care IT development.	Inc LTC FS capability	
	Develop clinical logic to incorporate PASAAR screening in functional screen.	Inc LTC FS capability	
	Contract for PASAAR screening IT development.	Inc LTC FS capability	
Develop tools and supports for local use.	Develop clinical functional screen logic for children & mental health.	Inc LTC FS capability	
	Contract for children and mental health screening IT development.	Inc LTC FS capability	

Major Activities	Specific Tasks	Products	
Create eligibility policies that are as consistent and fair across all LTC programs and settings as possible	Convene an internal DHFS team to review LTC eligibility policies.	Remove any barriers to consumers choosing the most appropriate program and setting.	
Goal 4. Develop systems and processes that will enhance the availability of service options (Chuck Wilhelm)			
<i>Objective 4-1: Continue to develop and implement money-follow-the-person strategies...</i>			
Use available funding to support the entire range of LTC options consumers need from home to community residential to institutional care.	Seek input from the Council on Long-term Care Reform to address the barriers to a more balanced long-term care system.	Consensus on barriers and strategies	
	Initiate a proposal for Wisconsin's 2006-07 Biennial Budget for a specific relocation initiative		

Major Activities	Specific Tasks	Products	
	Develop a detailed budget plan for financing, tracking, and allocating fiscal resources related to a major initiative to relocate individuals from institutional LTC settings		
	Develop a systematic relocation plan, related policy, staffing and oversight for a major initiative to relocate individuals from institutional LTC settings		
	Implement comprehensive relocation plan		
	Evaluate applicable federal options for enhanced funding through DRA and seek approval		
<i>Objective 4-2: Assist local LTC service systems to identify service gaps and develop and enrich the pool of providers and services (Wilhelm).</i>			
Provide grant funds to local service systems to develop expanded provider capacity.	Develop local expertise in resource development and provider recruitment.	Prototype for resource development	
	Develop local provider subcontracts for purchasing quality and outcomes.	Prototype for contracts	

Major Activities	Specific Tasks	Products	
	DHFS will develop consistent guidelines for consumer direction statewide and provide training and technical assistance to both county and provider staff and consumers.	Written guidelines, training and technical assistance tools.	
	Selected local service systems will expand consumer-directed options.	Increased system capacity for consumer directed options and technical assistance tools	
<i>Objective 4-3: Develop and implement strategies to reposition Wisconsin's nursing home industry (Hayden).</i>			
Facilitate private sector restructuring.	Consider proposals that will allow qualifying facilities to reduce nursing facility beds while developing affordable assisted living.	Lessons Learned and model for policy and procedure	
	DHFS allocate some waiver funds for services that will enable low-income persons to live in these new facilities.	Increased community capacity	

Major Activities	Specific Tasks	Products	
Develop new approach to purchase quality in nursing facilities.	Redesign the level of care rate structure to more accurately reflect patient acuity and cost.	Redesigned nursing facility rate structure	
	Develop initiatives to reward and support quality.	Increase in indicators of quality	
Develop facility reimbursement incentives.	Promote creation of more private rooms.	Reformed nursing home industry	
	Promote orderly downsizing or facility phase-outs.	Reformed nursing home industry	
	Add needed specialty services.	Reformed nursing home industry	
Improve State capacity to provide technical assistance to nursing facilities	Provide technical assistance for downsizing and patient relocation, especially for facilities at risk of failure due to financial circumstances or quality concerns.	Reformed nursing home industry	

Major Activities	Specific Tasks	Products	
Inform interested parties on the relative access to and need for long-term care residential options across the state.	Identify areas that are over- or under-bedded using demographic analysis, and existing facility data.	Reformed nursing home industry	
Facilitate downsizing and development of regional specialty facilities.	Identify funding/policy incentives to coordinate downsizing with development of regional specialty facilities	Reformed nursing home industry	
<i>Objective 4-4: Develop strategies to coordinate the LTC system with the acute, primary, and MH system (Wilhelm).</i>			
Promote coordination of health care with long-term care.	Ensure that health care providers are included in local planning for long-term care systems redesign	Interdisciplinary care management	
Promote interdisciplinary care management that addresses consumers' long-term care <u>and</u> health care needs.	Assist all local service systems to incorporate nurses into their care management teams.	Interdisciplinary care management	

Major Activities	Specific Tasks	Products	
	Provide training on effective interdisciplinary care management.	Interdisciplinary care management	
Enable consumers to simultaneously participate in managed long-term care programs and managed acute and primary care programs.	Identify the boundaries between programs and build edits into the reimbursement system to prevent duplicate benefits or payments.	Technical tools to prevent duplication of benefits or payment	
Objective 4-5: Ensure that consumer-directed supports are consistently available in LTC programs statewide.			
Develop technical assistance content on consumer direction.	Work with consumers and other partners to identify needed information and assistance.	Training and technical assistance resources and tools	
Develop a website with access to consumer direction information.	Write up content and design website.	Website	
Objective 4-6: Build on current workforce development efforts and identify barriers to creative deployment of workers (SDS).			

Major Activities	Specific Tasks	Products	
With the help of the Council on LTC Reform Workforce Task Force promote long-term care workforce development.	Encourage nursing homes to establish alternative business ventures to use trained and dedicated workers in community settings.	Workforce Retention	
	Identify and eliminate licensing or regulatory barriers to cross-setting use of workers.	Workforce Retention	
	Re-examine certification / licensing requirements for direct care workers.	Workforce Retention	
	Provide flexibility and support to consumers to individualize training for direct care workers.	Workforce Retention	
	Support creation of career ladders for direct care workers by recognizing the expense of nurse training in the nursing home reimbursement formula.	Workforce Retention	

Major Activities	Specific Tasks	Products	
	Encourage workers and/or participants to organize networks that provide support for workers and facilitate back-up arrangements for persons who direct independent workers.	Workforce Retention	
	Examine options to provide health insurance to direct care workers who currently lack coverage.	Workforce Retention	
Implement recommendations of the Council's Direct Care Workforce Issues Committee	Work with service providers, DHFS and Stakeholder Cmte to achieve consensus on principles related to the direct care workforce drafted by the Workforce Cmte.	Improved LTC Workforce	
	Develop workforce related quality assurance and improvement strategies	Improved LTC Workforce	
	Develop reimbursement strategies that improve wages, benefits, training, quality, retention rates, job satisfaction and staffing levels among direct care workers.	Improved LTC Workforce	

Major Activities	Specific Tasks	Products	
	Develop strategies to improve the public image of direct care work.	Improved LTC Workforce	
	Develop strategies for improving direct care worker supports and safety.	Improved LTC Workforce	
	Develop strategies for consumer-directed workforce.	Improved LTC Workforce	
	Collect and managed data essential to formulate strategies and implement recommendations of the Cmte (other grant funding)	Improved LTC Workforce	
Goal 5: Develop strategies to improve the quality, consistency and cost-effectiveness of LTC services in Wisconsin.			
<i>Objective 5-1: Develop clinical standards, guidelines, training and technical assistance to improve ADRC quality.</i>			
Develop a training curriculum for options counseling workers.	Work with the Wisconsin Council on Long Term Care Reform Task Force on Resource Center Expansion and current ADRCs to identify and develop needed training.	Needs Assessment	

Major Activities	Specific Tasks	Products	
	Develop clinical and training standards for staff performing options counseling.	Options counseling staff qualification standards	
	Develop the curriculum and coursework for options counseling.	Options counseling curriculum and coursework	
	Make courses available on the University of Wisconsin School of Nursing website, with academic credits for completion.	Web-based options counseling courses	
<i>Objective 5-2: Develop clinical standards, guidelines, training and technical assistance to improve ADRC quality (McKim)</i>			
Develop a comprehensive curriculum on consumer-centered care management for long-term care nurses and social workers.	Develop curriculum and coursework in conjunction with UW School of Nursing and School of Social Work.	Consumer-centered curriculum and coursework	

Major Activities	Specific Tasks	Products	
	Make courses available on the University of Wisconsin School of Nursing website, with academic credits for completion.	Web-based consumer-centered courses	
Objective 5-3: Provide support for local advisory groups to participate in local QA/QI and in peer review (McKim).			
Make training available for consumers and other members of local long-term care advisory bodies.	Develop a curriculum on quality assurance and improvement.	Quality assurance and improvement curriculum	
	Provide the training curriculum to consumers and other members of local long-term care advisory bodies.	Interdisciplinary local QA/QI and peer review	
Objective 5-4: Implement statewide performance monitoring of consumer outcomes in all LTC settings (McKim)			
Develop processes for and comprehensively implement tool	Coordinate implementation of tool in all waiver programs and testing of tool in institutional settings	Uniform performance monitoring	

Major Activities	Specific Tasks	Products	
	Compile and analyze results and disseminate to local entities	Uniform performance monitoring	
Objective 5-5: Support local LTC systems to improve capacity to collect & use info to improve services (Robbins)			
Encounter reporting	Research and document program data requirements	Data requirements	
	Analyze data reporting requirements to establish and configure encounter reporting edits and data quality routines	Reporting edits and data quality routines	
	Develop technical requirements for pilot counties	Technical requirements	
	Develop pilot implementation plans	Implementation plans	
	Provide technical assistance to pilot counties in developing report extracts from their operational systems and modifications to their data collection processes	Technical Tools	
	Implement pilots	Operational pilots	

Major Activities	Specific Tasks	Products	
	Complete post implementation analysis	Strategic and tactical plans for expansion of encounter reporting	
Data access (delayed due to MMIS project delays).	Research and document business, data and functional requirements for a) current production and ad hoc reports b) local data and information requirements data sharing requirements and protocols	Business, data and functional requirements	
	Develop technical requirements for security	Security requirements	
	Design warehouse, universe and dataset technical requirements	Technical requirements	
	Research and evaluate data manipulation, analysis and decision-making tools	Data tools	
	Develop evaluation prototypes to be used for completion of business requirements	Evaluation prototypes	

Major Activities	Specific Tasks	Products	
	Develop project implementation plans	Implementation plan	
	Execute project development and implementation plans	Implementation plan	
	Implement state-wide training and access to external partners	Implementation training	
	Post implementation evaluation and maintenance	Project evaluation and ongoing project maintenance (technical)	

Appendix B: Objectives and Research Questions for the CSCGE Study

Objective 1: Develop and make significant progress in implementing a comprehensive plan for statewide expansion of long-term care reform.
Research Questions
○ What structure and processes were developed by the State to administer the long-term care reform effort?
○ What financial and technical support was provided by the State to plan, design, and implement local reform?
○ What governing structures were developed at the local level to implement long-term care reform?
○ What are the major challenges and lessons learned in transitioning counties to a long-term care managed care system?
Objective 2: Engage consumers and other stakeholders in the long-term care planning process.
Research Questions
○ What outreach was employed by the State to engage consumers in the long-term care reform effort?
○ How were consumers involved in the planning process?
○ How were counties involved in the planning process?
○ What are the major challenges and lessons learned in engaging consumers and other stakeholders in the long-term care planning process?
Objective 3: Improve consumer access to long-term care information.

Research Questions
<ul style="list-style-type: none"> ○ What infrastructure was developed to make information available to consumers, especially as it relates to the aging and disability resource centers?
<ul style="list-style-type: none"> ○ What information was developed to assist consumers to understand their long-term care choices?
<ul style="list-style-type: none"> ○ What were the major challenges and lessons learned in the development of the aging and disability resource centers?
Objective 4: More effectively manage access to the long-term care system.
Research Questions
<ul style="list-style-type: none"> ○ What tools and supports were developed to ensure consistency of eligibility to the long-term care system across counties, especially as it relates to the long-
<ul style="list-style-type: none"> ○ term care functional screen and options counseling?
<ul style="list-style-type: none"> ○ What and how were self-directed supports incorporated into grant efforts?
<ul style="list-style-type: none"> ○ What policies and procedures were developed to address the balance between institutional and community care?
<ul style="list-style-type: none"> ○ What strategies were developed to address nursing home access, payment, and quality?
Objective 5: Develop strategies to improve quality and cost-effectiveness of long-term care services.
Research Questions
<ul style="list-style-type: none"> ○ What training and technical assistance was made available for options counselors and care teams?
<ul style="list-style-type: none"> ○ What data systems were developed by the State and by the counties to improve capacity to collect and use information?

- What were the major challenges and lessons learned in terms of developing IT systems during the duration of the grant?

Appendix C: Family Care Expansion Counties survey

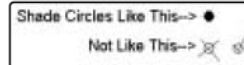
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Long-Term Care Consumer Survey

During the past 30 years, many Wisconsin citizens received their long-term care services through the Community Options Program (COP) or Community Integration Program (CIP). In recent years, Wisconsin has begun to offer information and assistance through "Resource Centers," and provide services through the "Managed Care Organizations" of "Family Care" or "Partnership." This survey asks about your experience with these changes in the long-term care system of Wisconsin.

Please answer the questions that apply to you by filling in the circle to the left of the answer that is most true for you. Please fill out the entire survey - it's short and shouldn't take much time. Sometimes you will be asked to skip over questions in the survey. When this happens, you will see a note that tells you what question to answer next. Thank you for your participation.



I. You and the Resource Centers

Aging and Disability Resource Centers, or ADRCs, are being opened in many Wisconsin counties as places to call or visit to get information about long-term care services. The questions below ask about your experience with getting information about long-term care services from a resource center.

1. Whom would you contact or where would you go if you had a question about getting care or support for living with a disability or long-lasting health problem? (Choose any that apply.)
 - Aging and Disability Resource Center
 - Doctor or nurse
 - Care manager or social worker
 - Senior center or aging office
 - Family or friend
 - Personal care attendant
 - Other, please specify _____
2. Had you heard of the Aging and Disability Resource Centers before receiving this survey?
 - Yes
 - No (Go to Part II, You and Your Managed Care Organization)
3. Do you have an Aging and Disability Resource Center in your county?
 - Yes
 - No
 - Not sure
4. Have you or a family member ever contacted an Aging and Disability Resource Center?
 - Yes
 - No (Go to Part II, You and Your Managed Care Organization)
 - Not sure (Go to Part II, You and Your Managed Care Organization)

Please continue to next page

Page 1

5. Why did you or your family member contact the Aging and Disability Resource Center?
(Choose any that apply.)
- To get information or assistance
 - To talk to someone about my long-term care options
 - To talk to someone about my disability benefits
 - To apply for benefits
 - To learn more about mental health or substance abuse services
 - Other, please specify _____
6. When you or your family member spoke with the Aging and Disability Resource Center staff, did you feel that they listened carefully to you? (Choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Did not listen | | | Listened carefully |
7. Was the information you received from the Aging and Disability Resource Center helpful?
(Please choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Not helpful | | | Very helpful |
8. Would you recommend this Aging and Disability Resource Center to a friend or relative who has a question about help for living with a disability or long-lasting health problems?
- Yes No

II. You and Your Managed Care Organization (Family Care or Partnership)

The questions below ask about your experience with your Managed Care Organization (Family Care or Partnership), the management of your care, and your care plan.

9. Whether you are in COP, CIP, Family Care, Partnership, or any other long-term care program, how would you rate your long-term care of the past six months. (Choose a number from 1 to 4.)
- | | | | |
|-------------------------------|-------------------------|-------------------------|------------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Worst long-term care possible | | | Best long-term care possible |
10. Had you heard of Family Care or Partnership before receiving this survey?
- Yes
- No (Go to Part III, The IRIS Program)

Please continue to next page

11. How did you hear about Family Care or Partnership? (Choose any that apply.)
- Aging and Disability Resource Center Personal care attendant
 Doctor or nurse Newspaper, radio or television
 Care manager or social worker Advocate for long-term care consumers
 Family member or friend Information or listening session
 Family Care or Aging and Disability Resource Center web site
 Other, please specify _____
12. Are you a member of a Family Care or Partnership managed care organization (MCO)?
- Yes
 No *(Go to Part III, The IRIS Program)*
 Not sure *(Go to Part III, The IRIS Program)*
13. Typically in Family Care or Partnership, members work with a team to manage their care. The team includes a service coordinator, social worker, care manager, and nurse. Are you part of a team like this?
- Yes No Not sure
14. The care management team helps you create a service plan or care plan. The plan is based on your thoughts about what is most important to you (your outcomes), and helps determine which services you receive. Are you satisfied with the amount of input you had in creating your service/care plan?
- Yes No I don't have a plan
15. Are you aware that you have the choice to manage some of your own care in the Family Care or Partnership program through the Self-Directed Supports (SDS) option?
- Yes No
16. How would you rate the effect of Family Care or Partnership membership on your quality of care? (Choose a number from 1 to 4.)
- 1 2 3 4
 Negative effect Positive effect
17. Would you recommend your Family Care or Partnership managed care organization to a friend or relative who needs long-term care services?
- Yes No

Please continue to next page

Page 3

III. The IRIS Program

The State of Wisconsin is sponsoring a program known as IRIS. The IRIS program allows you to control your long-term care supports and services. The program is for people who are not in Family Care or Partnership. The following questions are about the IRIS program.

18. Are you aware that you have the option to direct your care supports and services through the IRIS Program?
- Yes
 - No *(Go to section IV, Planning for the Long-Term Care Changes)*
19. How did you find out about the IRIS Program? (Choose any that apply.)
- Letter from the Wisconsin Department of Health Services (DHS)
 - Aging and Disability Resource Center
 - Doctor or nurse
 - Care manager or social worker
 - Personal care attendant
 - Family Care or Aging and Disability Resource Center web site
 - Other, please specify _____
 - Advocate for long-term care consumers
 - Newspaper, radio, or television
 - Family member or friend
 - Information or listening session

IV. Planning for the Long-Term Care Changes

While planning the changes from COP or CIP to Family Care or Partnership, the State held public meetings. These meetings were referred to as "listening sessions," "focus groups," or "planning meetings." This section asks about those meetings.

20. Were you aware of the long-term care planning meetings before receiving this survey?
- Yes *(Go to next question)*
 - No *(Thank you for participating, your survey is complete.)*
21. How did you hear about the long-term care planning meetings? (Choose all that apply.)
- Doctor or nurse
 - Care manager or social worker
 - Family member or friend
 - Personal care attendant
 - Other, please specify _____
 - Advocate for long-term care consumers
 - Newspaper, radio or television
 - Wisconsin Department of Health Services
 - County agency

Please continue to next page

22. Did you attend any long-term care planning meetings?

- Yes (Go to next question)
- No (Go to question 25)

23. How frequently did you participate in long-term care planning meetings?

- Once or twice
- More than twice, but not more than five times a year
- Six to twelve times a year
- More than 12 times a year

24. Do you feel that people from the State listened to what you had to say in the meetings you attended? (Choose a number from 1 to 4.)

- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Did not listen | | | Listened very carefully |

25. If you did not attend any of the meetings above, please tell us why. (Choose any that apply.)

- I was not interested in attending
- I knew my views would be represented by others
- I did not have time
- The meetings were too far away
- I did not know when the meetings were being held
- I did not have transportation

END OF SURVEY

Thank you for your participation!

Please fold the completed survey in half, place in the business reply envelope, and mail today.

Appendix D: Family Care Pilot Counties survey

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Long-Term Care Consumer Survey

During the past 30 years, many Wisconsin citizens received their long-term care services through the Community Options Program (COP) or Community Integration Program (CIP). In recent years, Wisconsin has begun to offer information and assistance through "Resource Centers," and provide services through the "Managed Care Organizations" of "Family Care" or "Partnership." This survey asks about your experience with these changes in the long-term care system of Wisconsin.

Please answer the questions that apply to you by filling in the circle to the left of the answer that is most true for you. Please fill out the entire survey - it's short and shouldn't take much time. Sometimes you will be asked to skip over questions in the survey. When this happens, you will see a note that tells you what question to answer next. Thank you for your participation.

Shade Circles Like This--> ●
Not Like This--> ☒

I. You and the Resource Centers

Aging and Disability Resource Centers, or ADRCs, are being opened in many Wisconsin counties as places to call or visit to get information about long-term care services. The questions below ask about your experience with getting information about long-term care services from a resource center.

1. Whom would you contact or where would you go if you had a question about getting care or support for living with a disability or long-lasting health problem? (Choose any that apply.)

- Aging and Disability Resource Center
- Doctor or nurse
- Care manager or social worker
- Senior center or aging office
- Family or friend
- Personal care attendant
- Other, please specify

2. Had you heard of the Aging and Disability Resource Centers before receiving this survey?

- Yes
- No (Go to Part II, You and Your Managed Care Organization)

3. Do you have an Aging and Disability Resource Center in your county?

- Yes
- No
- Not sure

4. Have you or a family member ever contacted an Aging and Disability Resource Center?

- Yes
- No (Go to Part II, You and Your Managed Care Organization)
- Not sure (Go to Part II, You and Your Managed Care Organization)

Please continue to next page

Page 1

5. Why did you or your family member contact the Aging and Disability Resource Center?
(Choose any that apply.)
- To get information or assistance
 - To talk to someone about my long-term care options
 - To talk to someone about my disability benefits
 - To apply for benefits
 - To learn more about mental health or substance abuse services
 - Other, please specify _____
6. When you or your family member spoke with the Aging and Disability Resource Center staff, did you feel that they listened carefully to you? (Choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Did not listen | | | Listened carefully |
7. Was the information you received from the Aging and Disability Resource Center helpful?
(Please choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Not helpful | | | Very helpful |
8. Would you recommend this Aging and Disability Resource Center to a friend or relative who has a question about help for living with a disability or long-lasting health problems?
- Yes No

II. You and Your Managed Care Organization (Family Care or Partnership)

The questions below ask about your experience with your Managed Care Organization (Family Care or Partnership), the management of your care, and your care plan.

9. Whether you are in COP, CIP, Family Care, Partnership, or any other long-term care program, how would you rate your long-term care of the past six months. (Choose a number from 1 to 4.)
- | | | | |
|-------------------------------|-------------------------|-------------------------|------------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Worst long-term care possible | | | Best long-term care possible |
10. Had you heard of Family Care or Partnership before receiving this survey?
- Yes
- No (Go to Part III, The IRIS Program)

Please continue to next page

11. How did you hear about Family Care or Partnership? (Choose any that apply.)
- Aging and Disability Resource Center Personal care attendant
 Doctor or nurse Newspaper, radio or television
 Care manager or social worker Advocate for long-term care consumers
 Family member or friend Information or listening session
 Family Care or Aging and Disability Resource Center web site
 Other, please specify _____
12. Are you a member of a Family Care or Partnership managed care organization (MCO)?
- Yes
 No (Go to Part III, The IRIS Program)
 Not sure (Go to Part III, The IRIS Program)
13. Typically in Family Care or Partnership, members work with a team to manage their care. The team includes a service coordinator, social worker, care manager, and nurse. Are you part of a team like this?
- Yes No Not sure
14. The care management team helps you create a service plan or care plan. The plan is based on your thoughts about what is most important to you (your outcomes), and helps determine which services you receive. Are you satisfied with the amount of input you had in creating your service/care plan?
- Yes No I don't have a plan
15. Are you aware that you have the choice to manage some of your own care in the Family Care or Partnership program through the Self-Directed Supports (SDS) option?
- Yes No
16. How would you rate the effect of Family Care or Partnership membership on your quality of care? (Choose a number from 1 to 4.)
- 1 2 3 4
 Negative effect Positive effect
17. Would you recommend your Family Care or Partnership managed care organization to a friend or relative who needs long-term care services?
- Yes No

Please continue to next page

Page 3

III. The IRIS Program

The State of Wisconsin is sponsoring a program known as IRIS. The IRIS program allows you to control your long-term care supports and services. The program is for people who are not in Family Care or Partnership. The following questions are about the IRIS program.

18. Are you aware that you have the option to direct your care supports and services through the IRIS Program?
- Yes
 - No (*Thank you for participating, your survey is complete*)
19. How did you find out about the IRIS Program? (Choose any that apply.)
- Letter from the Wisconsin Department of Health Services (DHS)
 - Aging and Disability Resource Center
 - Advocate for long-term care consumers
 - Doctor or nurse
 - Newspaper, radio, or television
 - Care manager or social worker
 - Family member or friend
 - Personal care attendant
 - Information or listening session
 - Family Care or Aging and Disability Resource Center web site
 - Other, please specify _____

END OF SURVEY

Thank you for your participation!

Please fold the completed survey in half, place in the business reply envelope, and mail today.

Appendix E: ADRC Only Counties survey

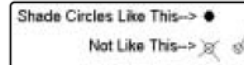
4275079701



Long-Term Care Consumer Survey

During the past 30 years, many Wisconsin citizens received their long-term care services through the Community Options Program (COP) or Community Integration Program (CIP). In recent years, Wisconsin has begun to offer information and assistance through "Resource Centers," and provide services through the "Managed Care Organizations" of "Family Care" or "Partnership." This survey asks about your experience with these changes in the long-term care system of Wisconsin.

Please answer the questions that apply to you by filling in the circle to the left of the answer that is most true for you. Please fill out the entire survey - it's short and shouldn't take much time. Sometimes you will be asked to skip over questions in the survey. When this happens, you will see a note that tells you what question to answer next. Thank you for your participation.



I. You and the Resource Centers

Aging and Disability Resource Centers, or ADRCs, are being opened in many Wisconsin counties as places to call or visit to get information about long-term care services. The questions below ask about your experience with getting information about long-term care services from a resource center.

1. Whom would you contact or where would you go if you had a question about getting care or support for living with a disability or long-lasting health problem? (Choose any that apply.)

- | | |
|--|---|
| <input type="radio"/> Aging and Disability Resource Center | <input type="radio"/> Family or friend |
| <input type="radio"/> Doctor or nurse | <input type="radio"/> Personal care attendant |
| <input type="radio"/> Care manager or social worker | <input type="radio"/> Other, please specify |
| <input type="radio"/> Senior center or aging office | |

2. Had you heard of the Aging and Disability Resource Centers before receiving this survey?

- Yes
 No (*Go to Part II, The IRIS Program*)

3. Do you have an Aging and Disability Resource Center in your county?

- Yes No Not sure

4. Have you or a family member ever contacted an Aging and Disability Resource Center?

- Yes
 No (*Go to Part II, The IRIS Program*)
 Not sure (*Go to Part II, The IRIS Program*)

Please continue to next page

Page 1

5. Why did you or your family member contact the Aging and Disability Resource Center?
(Choose any that apply.)
- To get information or assistance
 - To talk to someone about my long-term care options
 - To talk to someone about my disability benefits
 - To apply for benefits
 - To learn more about mental health or substance abuse services
 - Other, please specify _____
6. When you or your family member spoke with the Aging and Disability Resource Center staff, did you feel that they listened carefully to you? (Choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Did not listen | | | Listened carefully |
7. Was the information you received from the Aging and Disability Resource Center helpful?
(Please choose a number from 1 to 4.)
- | | | | |
|-------------------------|-------------------------|-------------------------|-------------------------|
| <input type="radio"/> 1 | <input type="radio"/> 2 | <input type="radio"/> 3 | <input type="radio"/> 4 |
| Not helpful | | | Very helpful |
8. Would you recommend this Aging and Disability Resource Center to a friend or relative who has a question about help for living with a disability or long-lasting health problems?
- Yes No

II. The IRIS Program

The State of Wisconsin is sponsoring a program known as IRIS. The IRIS program allows you to control your long-term care supports and services. The program is for people who are not in Family Care or Partnership. The following questions are about the IRIS program.

9. Are you aware that you have the option to direct your care supports and services through the IRIS Program?
- Yes
- No (Go to section III, Planning for the Long-Term Care Changes)

Please continue to next page

10. How did you find out about the IRIS Program? (Choose any that apply.)

- Letter from the Wisconsin Department of Health Services (DHS)
- Aging and Disability Resource Center
- Doctor or nurse
- Care manager or social worker
- Personal care attendant
- Family Care or Aging and Disability Resource Center web site
- Other, please specify _____
- Advocate for long-term care consumers
- Newspaper, radio, or television
- Family member or friend
- Information or listening session

III. Planning for the Long-Term Care Changes

While planning the changes from COP or CIP to Family Care or Partnership, the State held public meetings. These meetings were referred to as "listening sessions," "focus groups," or "planning meetings." This section asks about those meetings.

11. Were you aware of the long-term care planning meetings before receiving this survey?

- Yes (*Go to next question*)
- No (*Thank you for participating, your survey is complete.*)

12. How did you hear about the long-term care planning meetings? (Choose all that apply.)

- Doctor or nurse
- Care manager or social worker
- Family member or friend
- Personal care attendant
- Other, please specify _____
- Advocate for long-term care consumers
- Newspaper, radio or television
- Wisconsin Department of Health Services
- County agency

13. Did you attend any long-term care planning meetings?

- Yes (*Go to next question*)
- No (*Go to question 16*)

Please continue to next page

14. How frequently did you participate in long-term care planning meetings?

- Once or twice
- More than twice, but not more than five times a year
- Six to twelve times a year
- More than 12 times a year

15. Do you feel that people from the State listened to what you had to say in the meetings you attended? (Choose a number from 1 to 4.)

- 1
Did not listen
- 2
- 3
- 4
Listened very carefully

16. If you did not attend any of the meetings above, please tell us why. (Choose any that apply.)

- I was not interested in attending
- I knew my views would be represented by others
- I did not have time
- The meetings were too far away
- I did not know when the meetings were being held
- I did not have transportation

END OF SURVEY

Thank you for your participation!

Please fold the completed survey in half, place in the business reply envelope, and mail today.

Appendix F: Consumer Survey Cover Letter – First Mailing

Jim Doyle
Governor

Karen E. Timberlake
Secretary



State of Wisconsin
Department of Health Services

DIVISION OF LONG TERM CARE

1 WEST WILSON STREET
PO BOX 7851
MADISON WI 53707-7851

Telephone: 608-266-2000
FAX: 608-266-2579
TTY: 888-241-9432
dhs.wisconsin.gov

September 2008

«NAME»
«C_O»
«ADDRESS»
«CITY», «STATE» «ZIP»

Dear Sir/Madam:

Greetings! The State has chosen you to participate in a consumer satisfaction survey. The survey asks about changes in your long-term care services during the past few years. This is your chance to help the State evaluate these changes. We assure you that it will take only a few minutes to fill out the survey. In addition, those who participate will be eligible for a drawing of a \$50 cash card. Based on a typical response rate, the odds of winning a cash card are 1 in 90.

You should also know that what you say is confidential and will not change your benefits or support in any way. Your answers will go to APS Healthcare. APS Healthcare is the company hired by the State to do this survey. Your answers will not be shared with anyone at your county agency, Aging and Disability Resource Center, or Family Care or Partnership program.

You are welcome to ask someone to help you fill out the survey. When you are finished, please mail the survey to APS Healthcare in the enclosed postage-paid envelope.

Please send back the survey by Friday, September 19, 2008. If you have questions about this survey, please call Ruthanne at 608/283-3683. Ruthanne is available to assist you in English or in Spanish.

Thank you in advance for your participation!

Sincerely,

A handwritten signature in cursive script that reads 'Kathleen Luedtke'.

Kathleen Luedtke
Division of Long Term Care

«Pid_1»

Wisconsin.gov

Appendix G: Consumer Survey Cover Letter – Second Mailing

Jim Doyle
Governor

Karen E. Timberlake
Secretary



State of Wisconsin
Department of Health Services

DIVISION OF LONG TERM CARE

1 WEST WILSON STREET
PO BOX 7851
MADISON WI 53707-7851

Telephone: 608-266-2000
FAX: 608-266-2579
TTY: 888-241-9432
dhs.wisconsin.gov

October 2008

«NAME»
«C_O»
«ADDRESS»
«CITY», «STATE» «ZIP»

Dear Sir/Madam:

Greetings! Several weeks ago I sent you a consumer satisfaction survey asking for your participation. However, records show we have not received the survey back from you. This is a second request. The survey asks your opinion about changes in your long-term care services during the past few years. We assure you that it will only take a few minutes to fill out the survey. In addition, those who participate will be eligible for a drawing of a \$50 cash card. Based on a typical response rate, the odds of winning a cash card are 1 in 90.

You should also know that what you say is confidential and will not change your benefits or support in any way. Your answers will go to APS Healthcare. APS Healthcare is the company hired by the State to do this survey. Your answers will be combined with others, and will not be shared with anyone at your county agency, Aging and Disability Resource Center, or Family Care or Partnership managed care organization.

You are welcome to ask someone to help you fill out the survey. When you are finished, mail the survey to APS Healthcare in the enclosed postage-paid envelope.

Please send back the survey by Friday, October 10, 2008. If you have questions about this survey, call Ruthanne at 608/283-3683. Ruthanne is available to assist you in English or in Spanish.

Thank you in advance for your participation!

Sincerely,

A handwritten signature in cursive script that reads 'Kathleen Luedtke'.

Kathleen Luedtke
Division of Long Term Care

«Pid_1»

Wisconsin.gov

Appendix H: APS Email Message Announcing Online Stakeholder Survey

Dear (First name),

As a valued stakeholder in Wisconsin's long-term care system, you are invited to provide your opinion about the process used by the Department of Health Services to plan for changes to managed long-term care across our state. The link below takes you to a survey designed to gather your opinions about the process the Department used to plan for this change. This change was funded, in part, by a federal grant to Wisconsin. The Department has contracted with APS Healthcare to conduct an evaluation of planning activities funded by the grant and this survey is part of that evaluation.

APS will combine your responses to questions asked in this survey with those of others to compile a report for the Department. All responses are confidential.

The survey takes about 10 minutes to complete. You can access the survey by clicking on the link below. If you click on the link and the survey does not appear, please cut and paste the link into the address line of your browser and click on Enter. Depending on the security system of your computer system, you may receive a security alert. If so, click "yes" to bypass the alert and complete the survey.

Here is the link to the survey:

<http://doa.wi.gov/DHFSSurveys/TakeSurvey.aspx?SurveyID=n4K23796>

Please complete the survey by Friday, October 17, 2008. If you have questions, please call Renee at APS Healthcare at 608-283-3679.

Thank you in advance for your participation.

Renee Railey, MPH
APS Healthcare
Madison, WI
Phone: 608-283-3679

Appendix I: Online Stakeholder Survey

Wisconsin Long-Term Care (LTC) Stakeholder Survey

Page 1

WI LTC Comprehensive Systems Change Grant

Thank you for following the link to the Wisconsin Long-Term Care Systems Change Grant Stakeholder Survey. The survey asks questions about the Wisconsin LTC systems change planning process of the last four years. Unless otherwise indicated, please select the item for each question that is most true for you. Most survey questions require an answer. This is indicated by a red asterisk (*) at the end of the question.

The survey should take approximately 10 minutes to complete. It will time out after 30 minutes. If this occurs, it is necessary to start over.

You may have received the survey link from more than one source. This is because we are trying to reach as many people as possible. Please respond to the survey only once. Thank you for your participation.

I. Information about you

1. How did you learn about this survey?*

Mark any that apply.

State website

Family Care LISTSERV

Received a direct e-mail

Received a forwarded e-mail

Co-worker

Other, please specify

2. Have you been involved in the planning for long-term care system change or the expansion of the Family Care and Partnership program? *

Yes

No

3. In which planning consortium did you attend meetings to plan for changes in long-term care? *

Mark any that apply.

- Community Care of Central Wisconsin (Marathon, Portage, Wood)
- Dane and Rock Counties
- Family Partnership Care Management Coalition (Columbia, Dodge, Green Lake, Jefferson, Marquette, Ozaukee, Sheboygan, Walworth, Washington, Waukesha, Waushara)
- Milwaukee County
- Northeast Wisconsin Long-Term Care Consortium (Brown, Calumet, Door, Fond du Lac, Kewaunee, Manitowoc, Menominee, Oconto, Outagamie, Shawano, Waupaca, Winnebago)
- Northern Bridges (Ashland, Barron, Bayfield, Burnett, Douglas Iron, Polk, Price, Rusk, Sawyer, Washburn)
- Southeastern Wisconsin Care Management Organization (Kenosha, Racine, Ozaukee, Walworth, Washington, Waukesha)
- Southwest Wisconsin Care Management Coalition (Crawford, Grant, Green, Iowa, Juneau, Lafayette, Richland, Sauk)
- West Central Consortium for Long-Term Support and Health Care Reform (Buffalo, Clark, Jackson, La Crosse, Monroe, Pepin, Trempealeau, Vernon)
- West Central WI Care Management Collaborative (Barron, Chippewa, Dunn, Eau Claire, Pierce, St. Croix)
- Attended State meeting(s)

II. Your participation in the long-term care planning process

4. How did you learn about the LTC planning process? *

Mark any that apply.

- Mass media (television, radio, Internet, newspaper)
- Professional organization
- Job-related
- Wisconsin Department of Health Services
- County organization
- Case manager
- Advocacy group
- DHS Request for Information or Proposals
- Friend
- Other, please specify

5. Which option BEST describes your role in long-term care in Wisconsin? *
I am a(n) _____

- Guardian, family member, or friend of consumer
- Consumer of COP, CIP, Family Care or Partnership program services
- Care provider (physician, social worker, nurse, etc.)
- County manager, staff, or official
- ADRC manager or staff
- Family Care or Partnership manager or staff
- Advocate for persons with disabilities
- Advocate for elders
- County Board member
- State employee
- UW Extension employee
- Aging unit or Area Agency on Aging staff member
- Provider Agency
- Other, please specify

6. In what way(s) did you participate in the local LTC planning process? *
Mark any that apply.

- Attended a listening session
- Participated in a focus group
- Participated in planning meeting(s)
- Committee member for the local planning group/committee
- Organized or facilitated meetings
- Committee chair
- Other, please specify

7. When did your involvement with the LTC planning process begin?*

- Less than 6 months ago
- 6 months to 1 year ago
- More than 1 year but less than 2 years ago
- More than 2 years ago

8. How frequently did you participate in LTC planning meetings?*

- Once or twice
- 3 to 5 times a year
- 6 to 12 times a year
- More than 12 times a year

Wisconsin Long-Term Care (LTC) Stakeholder Survey

Page 3

III. Issues that matter to you

9. To what extent were the following INDIVIDUAL level outcomes of the LTC planning process important to you? *

Choose an option for each item.

	1 Not at all important	2 Somewhat important	3 Important	4 Very important
Options for consumers to direct their own care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of care for consumers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice between care management organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice of care providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintaining eligibility for community-based care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Continuity of care in transition to managed care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consistency of care among counties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. To what extent were the following INDIVIDUAL level issues discussed in the LTC planning meeting(s) you attended? *
Choose an option for each item.

	1 Not at all discussed	2 Somewhat discussed	3 Discussed	4 Thoroughly discussed
Options for consumers to direct their own care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of care for consumers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice between care management organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice of care providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintaining eligibility for community-based care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Continuity of care in transition to managed care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consistency of care among counties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. In your opinion, how likely will the discussions from the LTC planning meetings lead to positive outcomes of the following INDIVIDUAL level issues? *
Choose an option for each item.

	1 Not at all likely	2 Somewhat likely	3 Likely	4 Very likely	Not addressed
Options for consumers to direct their own care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of care for consumers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice between care management organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Choice of care providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintaining eligibility for community-based care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Continuity of care in transition to managed care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consistency of care among counties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

IV. Systems level issues that matter to you

12. To what extent were the following SYSTEMS level outcomes of the LTC planning process important to you? *
Choose an option for each item.

	1 Not at all important	2 Somewhat important	3 Important	4 Very important
Ending waiting lists in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintenance of local control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of county contribution of local tax dollars to LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective options counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employment of county or private agency staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to LTC information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of planning money from the State	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of funding available for LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost-effectiveness of programs in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Efficiency in provision of LTC services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. To what extent were the following SYSTEMS level issues discussed in the LTC planning meeting(s) you attended? *
Choose an option for each item.

	1 Not at all discussed	2 Somewhat discussed	3 Discussed	4 Thoroughly discussed
Ending waiting lists in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintenance of local control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of county contribution of local tax dollars to LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective options counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employment of county or private agency staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to LTC information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of planning money from the State	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of funding available for LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost-effectiveness of programs in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Efficiency in provision of LTC services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. In your opinion, how likely will the discussions from the LTC planning meetings lead to positive outcomes of the following SYSTEMS level issues?*

Choose an option for each item.

	1 Not at all likely	2 Somewhat likely	3 Likely	4 Very likely	Not addressed
Ending waiting lists in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maintenance of local control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of county contribution of local tax dollars to LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective options counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Employment of county or private agency staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to LTC information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of planning money from the State	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of funding available for LTC	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost-effectiveness of programs in Wisconsin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Efficiency in provision of LTC services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Wisconsin Long-Term Care (LTC) Stakeholder Survey

Page 5

V. Your reflections on the long-term care planning process

15. To what extent do you think the LTC planning process involved consumers in a meaningful way?*

- Not at all
- A little
- Somewhat
- Completely

16. In your opinion, how will the LTC changes discussed in your planning meeting(s) impact the overall quality of life for LTC consumers?*
- Very negatively
 - Negatively
 - No changes
 - Positively
 - Very positively
17. Were you given an opportunity to ask the questions you wanted to ask about the proposed LTC changes?*
- No opportunity at all
 - Limited opportunity
 - Some opportunity
 - Ample opportunity
 - I didn't have questions
18. To what extent did people listen to what you had to say in the planning meeting(s) you attended?*
- Not at all
 - A little
 - Somewhat
 - Completely
19. To what extent were the meeting(s) you attended run in a professional manner?*
- Not at all
 - A little
 - Somewhat
 - Completely
20. To what extent did the State provide what you needed when you asked for information or assistance during the planning process?*
- Not at all
 - A little
 - Somewhat
 - Completely

21. How would you describe the degree of direction from the State during the planning process?*

- Not enough direction
- An appropriate amount of direction
- Too much direction

22. Please share the suggestions you may have for what the State might have done differently. (2,000 character limit.)

23. Before participating in LTC planning meeting(s), how would you have described your opinion of the proposed LTC changes?*

- Very negatively
- Negatively
- Positively
- Very positively

24. Since participating in LTC planning meeting(s), how would you describe your opinion of the proposed LTC changes?*

- Very negatively
- Negatively
- Positively
- Very positively

25. After your experience with the planning process, would you choose to participate in the process again?*

- Yes
- No

26. Please share any additional thoughts or comments you may have about the LTC planning process. (2,000 character limit.)

Appendix J: Individual and Group Interview Guide

APS Healthcare has been selected to perform the federally required evaluation of the Comprehensive Systems Change Grant. Briefly stated, our task is to assess to what degree the grant achieved its goals and objectives. We are to report back to CMS the lessons learned as a result of the grant activities so that CMS in turn is in a better position to make recommendations to other states that are implementing long-term care projects.

A large portion of the grant funds went to support state and regional planning for LTC reform, i.e., the transition from COP/CIP to Family Care or Partnership. Below are a few questions about the planning process to get the conversation rolling. Our highest priority is to hear from you what you think is most important for us to know.

With your permission we would like to record this interview. The recording will only be used to supplement the notes we will be taking and will be available only to the APS staff conducting this evaluation.

- What is/was your role in the planning process?
- By its very nature, the grant required the involvement of a wide variety of stakeholders. From your experience, what issues motivated people to be involved in the LTC reform project? What issues caused people to resist the project?
- Emphasis is often placed on involving consumers in the planning process. Would you say that consumer involvement was a goal of your planning and, if so, was that goal achieved?
- Were you yourself as involved in the planning as you wanted?
- Were there any aspects of the planning that went particularly well? If so, what were they and why did you think they went well?
- Were there any aspects of the planning that were particularly challenging? If so, what were they and what do you think made them challenging?
- If you were preparing a Lessons Learned document on the Wisconsin LTC reform planning process, what would you include?
- Similar to the above, what lessons based on the Wisconsin experience do you think CMS could pass on to other states?

Appendix K: Respect Guiding Principles

RESPECT Guiding Principles of Wisconsin Long-Term Care

RELATIONSHIPS - Participants are supported to maintain and develop friendships and family relationships, and participate in their families and communities.

EMPOWERMENT TO MAKE CHOICES - Give people better choices about the services and supports available to meet their outcomes in the most cost effective way.

SERVICES TO MEET INDIVIDUAL NEED - Individuals want prompt and easy access to services tailored to their individual circumstances and outcomes.

PHYSICAL AND MENTAL HEALTH - Services are intended to help people achieve their optimal level of health and functioning.

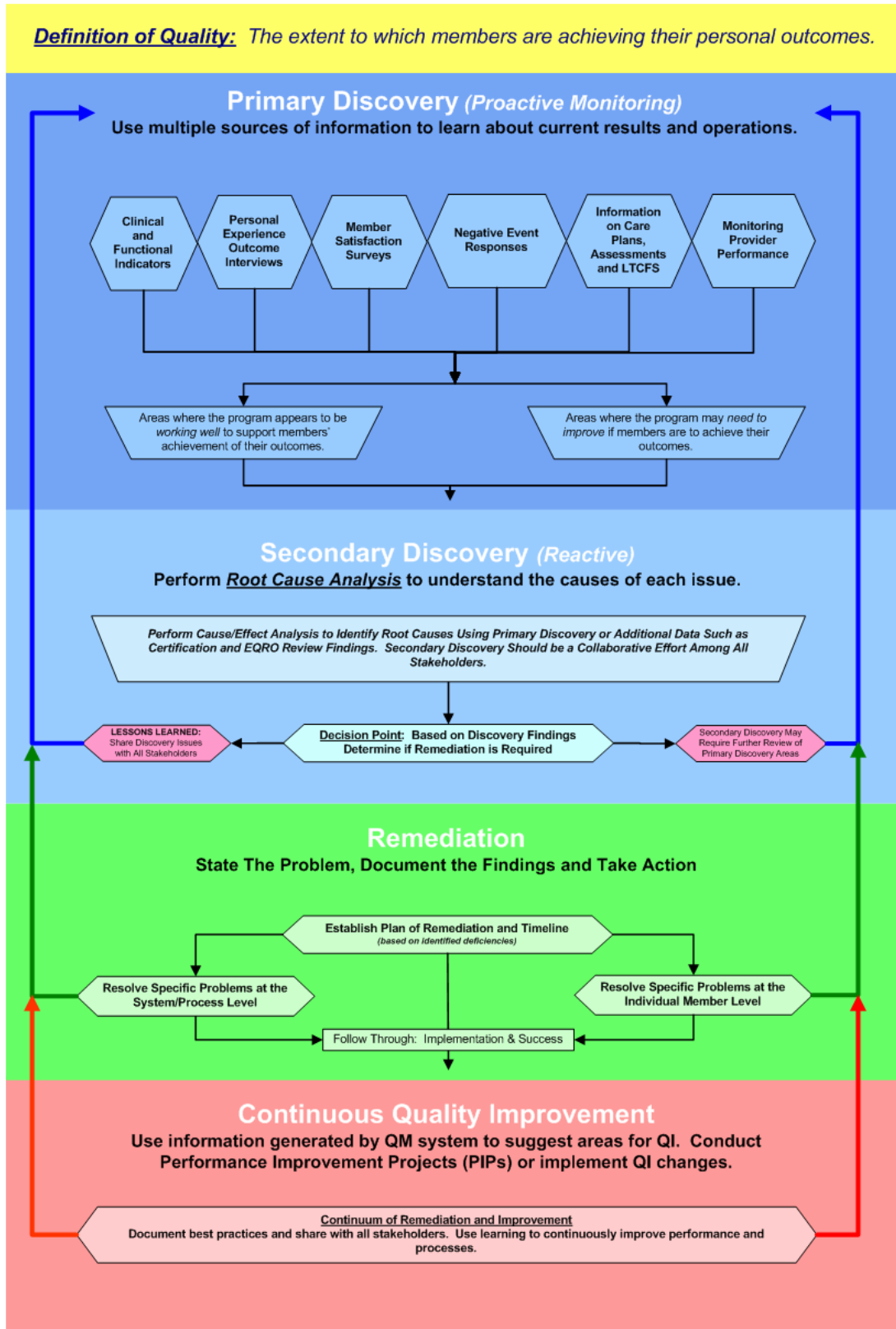
ENHANCEMENT OF PARTICIPANT REPUTATION - Services maintain and enhance participants' sense of self-worth and community recognition of their value in very way possible.

COMMUNITY AND FAMILY PARTICIPATION - Participants are supported to maintain and develop friendships and to participate in their families and communities.

TOOLS FOR INDEPENDENCE - People are supported to achieve maximum self-sufficiency and independence

Appendix L: Quality Schema

Figure 1 Home and Community Based Services (HCBS) Quality Management System



Appendix M: CSC grant 4 year budget actuals as of 7-16-08

Last Updated July 16, 2008

		Grant Award	10/04 - 9/05	10/05 - 9/06	10/06 - 9/29/07		10/07 - 9/08	
			Yr. 1	Yr. 2	Yr. 3		Yr. 4	Yr. 4 Balance
			Actual	Actual	Actual		Promised & Est	Uncommitted
A	PERSONNEL							
1	Prog & Plan Analyst (50%) SR		17,333	11,496	23,238	*	17,500	0
2	Program & Planning Data Analyst (10%) NS		794	3,177	6,855	*	7,000	7,000
3	Program & Planning Analyst (20% 1/07) SS		0	30,536	27,165	*	18,600	0
4	Contracted ADRC P & P Analysts (2) 1 month						0	0
5	FC Expansion Project Manager (Pfifer)						39,500	0
6	CMO Exp Prog & Analyst Position (Rathermel)						2,500	0
7	Nurse Consultant (12%)SB		0	0	0		5,900	0
8	Program Assistant (LTE - 50%) EC		0	1,140	7,054	*	716	0
9	Program & Planning Analyst (1 FTE) SH				55,267	*	62,000	0
	<i>Subtotal Personnel</i>		18,127	46,349	119,579		153,716	7,000

B	FRINGE						
1	44.22% of Eligible Personnel	5,589	14,965	48,737	*	71,048	3,235
	<i>Subtotal Fringe</i>	5,589	14,965	48,737		71,048	3,235
C	TRAVEL						
1	Grantee Annual Meeting	1,215	1,996	0		0	0
2	Training (\$2,000 x 4 staff)	3,794	1,925	13,220	*	20,000	0
3	Travel for site visits	0	3,937	6,274	*	10,500	0
	<i>Subtotal Travel</i>	5,009	7,858	19,494		30,500	0
D	EQUIPMENT						
1	Computers (\$1,200 x 4 staff)	0	0	0		0	0
2	Printer/Copier	0	0	0		0	0
	<i>Subtotal Equipment</i>	0	0	0		0	0
E	SUPPLIES						
1	Telephone	343	2,390	496	*	1,000	0
2	Duplicating	700	2,358	2,803	*	4,500	0

3	Supplies	1,090	3,147	3,413	*	5,000	0
4	Postage	54	56	489	*	900	0
5	Furniture	0	0	0		0	0
6	Printing	1,010	850	3,656	*	4,500	0
	<i>Subtotal Supplies</i>	3,197	8,801	10,857		15,900	0
F	CONTRACTUAL						
1	Hiring and Staff Services - EC	23,065	18,800	21,928	*	3,500	0
2	TMG - JG Year 4 expense Potracke PO	22,430	67,205	64,073	*	10,000	0
3	TMG - TL	0	46,180	217,138	*	0	0
4	ADRC Planning Support (OSA)	0	0	49,639	*	0	0
5	Richland - RL	0	70,514	15,884	*	0	0
6	Local Support (Planning Grants and CCIA)	0	315,984	533,074	*	480,942	0
	Northwest Supplemental Grant			0		300,000	0
7	BIS (yr 4 Deloitte po fjh 22078)	82,317	97,649	62,842	*	200,000	0
8	Alzheimers/Demenita Project - MS	222,443	174,720	232,534	*	50,000	0
9	Evaluation Services APS	0	16,625	0		300,000	0
10	State Long Term Care Council - LB p 1416 & 560650	10,972	4,029	10,704	*	22,500	0

11	Memory Care Connection - DM P# 560327	45,715	16,928	82,961	*	91,324	0
12	UW Extension - SR yr 4 new purpose	0	29,044	46,546	*	20,000	0
13	Outcomes Assessment - KM po FGH 12268	0	0	51,455	*	248,506	140,000
14	Consumer Core Training - CWAG 510720	0		47,647	*	12,393	0
15	Consulting Contract - TMG	0	0	200,000	*	0	0
16	Contracted Operations Prog Asst-MB/SU 1417					46,800	
	Planning Meetings	5,114	3,736	8,867	*	10,000	0
	<i>Contractual Subtotal</i>	412,056	861,414	1,645,292		1,795,965	140,000
G	CONSTRUCTION	0	0	0		0	0
H	OTHER						
1	Internal Services (FMS/FWRS)	3,699	7,927	16,323	*	22,000	0
2	DOA charges	277	2,411	2,531	*	7,500	0
3	BIS Internal Services	0	8,618	9,137	*	10,000	0
4	Rent (\$2,200 x 4 staff - Yr. 1 is 9 mos.)	787	1,730	5,986	*	8,800	0
5	State Long Term Care Conference	0	0	30,973	*	32,000	0
6	ADRC Conf Stipends - April 2007 Conf	0	0	9,875	*	0	0
	<i>Other Subtotal</i>	4,763	20,686	74,825		80,300	0

I	INDIRECT CHARGES							
	4.0% of Personnel		0	2,550	4,606	*	5,995	0
								150,235
J	TOTAL	5,500,000	448,741	962,623	1,923,390		2,153,423	11,823
	year 1 used	448,741	verified	verified	verified		Promised & Est	162,058
	year 2 used	962,623						Uncommitted
	year 3 used/estimated	1,923,390						
	year 4 promised	2,153,423						
	available balance	11,823						

This assumes that all year four promised \$ will be spent.

The balance shown for the Memory Care Connections is prior year money that will be spent in year 4, no new money.

The balance shown for the Planning Grants is prior year money that will be spent in year 4.

The balance shown for BIS under contractual is the remainder of the \$200,000 promised in year 3 and unused.

Appendix N: Acronyms

AD	Alzheimer's Disease
ADL	Activities of Daily Living
ADRC	Aging & Disability Resource Center
AOA	U.S. Administration on Aging
AODA	Alcohol and Other Drug Deficiency
APS	Adult Protective Services
APS	APS Healthcare, Evaluators
BIW	Brain Injury Waiver
CBRF	Community Based Residential Facility
CCS	Comprehension Community Services
CIP I	Community Integration Program (also CIP IA, CIP 1B)
CIP II	Community Integration Program
CLTS	Children's Long-Term Support
CM	Care Manager
CME	Continuing Medical Education
CMO	Care Management Organization
CMS	Centers for Medicare and Medicaid Services
COP	Community Options Program
COP-W	Community Options Program-Waiver
CSCG	Comprehensive Systems Change Grant
CSP	Community Support Program
CWAG	Center for Wisconsin Aging Group

DBS	Disability Benefit Specialist
DD	Developmental Disabilities
DDES	Division of Disability and Elderly Services
DHFS	Department of Health and Family Services
DHS	Department of Health Services
DQA	Division of Quality Assurance
DRW	Disability Rights Wisconsin
EBS	Elderly Benefits Specialist
EQRO	External Quality Review Organization
ES	Economic Support
FAQ	Frequently Asked Questions
FC	Family Care
FDD	Facilities for the Developmentally Disabled
FE	Frail Elderly
HCBS	Home and Community Based Services
HCBS	Home and Community-Based Services
HCBW	Home and Community-Based Waiver
HHS	Health and Human Services
HRS	Health-Related Services
I & A	Information and Assistance
IADL	Instrumental Activities of Daily Living
ICF	Intermediate Care Facility
ICF-MR	Intermediate Care Facility for the Mentally Retarded
IDT	Interdisciplinary Team

ILC	Independent Living Centers
IM	Income Maintenance
IRIS	Include, Respect, I Self-Direct
IT	Information Technology
LOC	Level of Care
LTC	Long-Term Care
LTC FS	Long Term Care Functional Screen
LTCS FS	Long Term Care Supports Functional Screen
MA	Medical Assistance
MA	Medical Assistance (Medicaid or Title IX)
MCO	Managed Care Organization
MDS	Minimum Data Set
MFP	Money Follows the Person
MH	Mental Health
NF	Nursing Facility
NH	Nursing Home
OASIS	Outcome and Assessment Information Set
PACE	Programs of All-inclusive Care for the Elderly
PASAAR	Pre Admission Screening and Annual Review
PD	Physical Disabilities
PEO	Personal Experience Outcome
PEONIES	Personal Experience Outcome iNtegrated Interview Evaluation System
PF	Publicly Funded
PMPM	Per Member Per Month

PP	Private Pay
QA	Quality Assurance
QI	Quality Improvement
QM	Quality Management
QMRP	Qualified Mental Retardation Professional
RCAC	Residential Care Apartment Complex
RFI	Request for Information
RFP	Request for Proposal
SDS	Self-Directed Support
SNF	Skilled Nursing Facility
SS	Social Security
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
SSI-E	Supplemental Security Income-Exceptional
TBI	Traumatic Brain Injury
TMG	The Management Group
UW	University of Wisconsin
UWEX	University of Wisconsin Extension
VRC	Virtual Resource Center
WI	Wisconsin