



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Children's Long-Term Support Program Participant and Family Handbook

P-03689 (03/2025)

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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at
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Welcome

Welcome to the Wisconsin Department of Health Services Children's Long-Term Support (CLTS) Program! This program provides individual supports and services for children with disabilities to help them grow, thrive, and be active members of their families and communities.

This handbook is your guide to understanding the CLTS Program, what supports and services are available, how to access them, what program costs might be, and what to do when you have questions.

Here are a few things to keep in mind:

- We are focused on you and your family. The participant is always at the center of our program.
- We use a team approach to help you make decisions to help your child meet their goals.
- We are talking to you: the parents, the caregivers, and the child. Throughout the handbook, you will see terms such as "your child" and "your family."
- We are here to help.
 - You will find links to additional resources to help you find more detailed information and assistance.
 - You can find this handbook online.
 - You can get a copy of this handbook in many languages, including Spanish, Hmong, and English.
 - You can find a list of important terms and acronyms at the end of this handbook.

When you have questions or concerns or when you need help, reach out to your local CLTS Program. You can find contact information at dhs.wi.gov/clts/contact.htm.

DHS thanks the families and county waiver agencies who provided valuable feedback in the creation of this handbook.



More Information

Information described in this handbook is grounded in Title 42 of the Code of Federal Regulations; in Wisconsin Statutes; in the Wisconsin Department of Health Services (DHS) administrative rules, memos and policy instruction; and in provisions in the CLTS Waiver Program applications (dhs.wi.gov/clts/waiver/clts-1915c-renewal.pdf), submitted to and approved by the federal Centers for Medicare & Medicaid Services (CMS).

The handbook is for informational purposes only. Current CLTS Program policy is available in the Medicaid Home and Community-Based Services Waiver Manual for the CLTS Program (dhs.wi.gov/publications/p02256.pdf).

This handbook reflects policy and procedures as of the publishing date found on the front cover.



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Section 1: Introduction to the CLTS Program

The Children’s Long-Term Support (CLTS) Program offers supports and services for children and young adults under age 22 who have significant developmental, physical, or emotional disabilities and substantial limitations in multiple daily activities because of these disabilities. Throughout this handbook we will refer to the participants in the CLTS Program broadly as children, but it is important to remember that the program may be able to help them through early adulthood.

The CLTS Program helps children with disabilities live at home and better participate in their family and community life. It includes services and supports that help children:

- Complete daily living tasks.
- Enhance relationships with family, friends, and community members.
- Learn new skills and develop new interests.
- Achieve their best physical and mental health.
- Keep living at home.
- Live their best life.

The CLTS Program is a Medicaid home and community-based program that is federally authorized under Section 1915(c) of the Social Security Act. It pays for nonmedical services and supports that are not part of other kinds of Medicaid coverage.

The Wisconsin Department of Health Services (DHS) and your county health and human services department partner to bring this program to Wisconsin families.

Getting started

All children in the CLTS Program work with a support and service coordinator (SSC), assigned by their local human services agency. Support and service coordinators are there to help. These professionals are your family’s main contacts in the CLTS Program.

An SSC will reach out to your family. They will set up a time to get to know your child and family. This first meeting will take place in your family’s home. Your SSC will talk with your child and family to learn about your child’s needs, strengths, and goals. Your SSC will also learn about your family’s traditions, values, and what your child needs to be successful.

We’ve included a page where you can record your SSC’s name, contact information and upcoming meeting dates. See Appendix B: Important Contacts.

Creating your team

The CLTS Program uses a team approach to help you plan supports and services and make decisions to help your child meet their goals. Working as a team provides better outcomes for your child and family.

Who is always a part of the team?

- Your child
- Parents and primary caregivers
- The support and service coordinator

Who else might be on your team?

You may choose to include other people on your team. These people include anyone who is important to your family. For example:

- School staff
- Medical providers
- Religious or cultural persons
- Neighbors
- Extended family and friends
- Advocates
- Other community members your family is connected with



How long can my child be enrolled in the CLTS Program?

If your child continues to meet the program requirements, they can continue to be enrolled in the CLTS Program until:

- Your child or family wishes to disenroll.
- Your child transitions out when they are either:
 - 18 years old, if they are eligible for adult long-term care programs, or
 - 22 years old, if they are not eligible for adult long-term care programs

See Section 9: Eligibility and Recertification for information about eligibility and Section 12: Transition Planning about the process of moving to adult programs.

Section 2: Support and Service Coordination

In the CLTS Program, you will coordinate, select, and manage the supports and services your child needs to reach their goals. A support and service coordinator will help you.

What is a support and service coordinator?

Support and service coordinators (SSCs) are there to help. Each child has an SSC who is your family's main contact in the CLTS Program. SSCs are employed by your local county or by an agency who works with your county on behalf of the county CLTS Program.

SSCs help your child get the supports and services they need to help them stay healthy, safe, and a part of their homes and communities.

What does our SSC do?

Your SSC helps your family understand the CLTS Program and your rights in the program. They connect your family to supports, services, and resources, and help your child achieve an inclusive and self-empowered life.

Your support and service coordinator uses their knowledge and expertise to:

- Help establish and maintain your child's eligibility and participation in the program.
- Work with your family to develop and maintain your child's support system.
- Develop plans to lower risks to your child's health and well-being (if necessary).
- Help with crisis and safety planning.



Your support and service coordinator also performs care coordination and service planning by:

- **Working with your family to develop goals.**
Your SSC meets with your family to learn about your child's needs, strengths, and goals. They learn about your family's traditions, values, and what your child needs. They also work with your child and family to help decide which supports and services can help achieve your child's unique goals.
- **Creating an individual service plan.**
Your SSC uses their knowledge of available programs, resources, and services to create an individual service plan (ISP) that best supports your child and family. See Section 4: Creating an individual service plan for more about ISPs.
- **Authorizing CLTS Program supports and services.**
Your team chooses the supports and services that are most appropriate for your child and your family. Your SSC then makes sure that the chosen supports and services fit with the CLTS Program requirements and authorizes them.
- **Finding providers to work with your child and family.**
Your SSC can help your family find qualified providers for CLTS Program supports and services. Providers can be professionals, family members, friends, and neighbors.
- **Checking to make sure the supports and services are meeting your goals.**
Your SSC will ask you if things are working well or if you have concerns that the team needs to solve together. If things are not working, they will guide the team to review goals and current supports and services and help make changes.
- **Helping your child and family through transitions and life changes.**
Your SSC helps your child and family with transitions. This can include transitioning to adult long-term care services, finding safe housing for your child, and pursuing school and job opportunities. See Section 12: Transition Planning for more.
- **Collaborating across systems.**
Your SSC helps your family access resources, programs, and services that are offered through other programs. For example, educational supports or services that help children prepare for a job.

How often will I talk to our SSC?

Every family will want and need different amounts of contact with their SSC. There are times in the program when you must meet with them. In addition to these minimum contacts, **your family can ask to meet with your SSC at other times, as needed.** For example, you may ask to meet when goals change or supports and services need revisiting. Tell your SSC if you are running into a difficult situation and would like their help.

Required Meetings with Your SSC			
When	Who	How	Why
Every Month	You or your child, family, or someone familiar with your child's needs (like school staff or specific service providers). This contact can be made with anyone involved with your child's care planning.	In person or by phone, video, or email. Your family and your SSC should decide the best way to stay in touch.	Ensure ongoing support and address any new or emerging needs.
Every Three Months	Your family and any person your family wants to have there. Your child can be present but does not have to be at this contact.	In person or by phone, video, or email.	Review and discuss the supports and services. Listen and learn about your child and family.
Every Six Months	Your child, family, and any person your family wants to have there. Your child must be present.	In person, at a location that works for everyone.	Review the supports and services and make sure they still meet your child's goals. Continuing to build a relationship that supports your child.
Every Year	Your child, family, and any person your family wants to have there. Your child must be present.	In person, at your child's home.	Review the supports and services and make sure they still meet your child's goals. Often recertification (renewing participation in the program) is also completed at the yearly visit. See Section 9: Eligibility and Recertification for more.

More Information

If you are having trouble contacting your SSC and need to talk with someone right away, reach out to your local CLTS Program. You can find your local CLTS program contact information at dhs.wi.gov/clts/contact.htm.

Contact your local CLTS Program when:

- You have concerns about your SSC.
- You are not getting answers to your questions.
- You have issues and cannot resolve them directly with your SSC.



Section 3: Deciding Together

The CLTS Program uses a team approach to decision-making called Deciding Together. Deciding Together is a step-by-step decision-making process. In the CLTS Program, children and their families work together with a support and service coordinator (SSC) to identify needed supports and services and create individual service plans (ISPs) to help the children achieve their goals.

What is Deciding Together?

The Deciding Together approach combines the information your family has about your needs and goals with the knowledge your SSC has about available community supports and services. Your family and child's outcomes are stronger when you and your SSC share knowledge and build understanding together.

Benefits of Deciding Together

- Makes the decision-making process clear and open to everyone.
- Makes sure your child and family are partners at every step.
- Uses the expertise of every member of the team.
- Aligns with your family's culture and is person-centered.

Five steps of Deciding Together



Step 1: Identify goals, issues, and needs

Deciding Together starts with team members talking with each other. Your team includes your SSC, your family and child, other caregivers, and anyone else you want to include. The team works together to identify goals, challenges, and problems. The conversation starts wherever your family is comfortable. See Section 4: Creating an Individual Service Plan for details about team members.

This step of the decision-making process is to understand all the concerns and needs and build on family strengths, uniqueness, and culture.



Questions to think about

- Which parts of the day or week are most challenging?
- Which parts of the day or week are easier?
- What causes harder times and helps easier times?
- What does your child enjoy the most? What makes them happy? What makes them smile or laugh?
- What is something your family wants to do in the future (next month, next summer, or next year)?

Step 2: Think creatively

Once the team fully understands the goals or problems, it becomes easier to think creatively about potential solutions. Working together, your team will come up with a list of ways to help reach each goal. Your SSC will share ideas about how to help fix the problems and achieve goals. All ideas are welcome. Narrowing the list comes later in the process.



Questions to think about

- How might this goal or need be addressed for *any* child, no matter what abilities or challenges they have?
- Which family members and friends in your child's life could help?
- What interest or skills could you build on?
- What ideas have you tried and what could make them more successful?

Step 3: Weigh the options

As a team, you'll consider the full list of creative ideas from Step 2. Then, you will narrow them down to help decide what to add to the service plan. Not all the suggested supports will be a good fit.

The team works together to narrow options to those that:

- Are reasonably expected to work.
- Have a positive impact.
- Help now and in the future.
- Align with your culture, values, and comfort level.
- Are the least restrictive (see Section 11: Health and Safety for more about restrictive measures).



Questions to think about

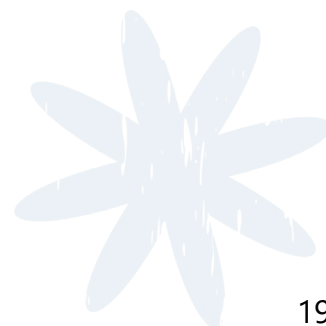
- What strategies make the most sense for your child? Your family? Your goals?
- What are your child's and your family's preferences?
- Does it suit or fit your family's culture and values?
- What supports and services are likely to work well?

Cost considerations

Different options will have different costs. As you consider each idea, discuss which costs less or more and why. While cost is not the determining factor in which options are chosen, it is an important consideration in the decision-making process.

Positive risk taking

The team should consider the idea of positive risk-taking when narrowing your list of solutions. Taking risks is a part of everyone's life and is needed for healthy human growth and development. Positive risk-taking means managing risks to give people as much choice and control over their lives as possible, while also trying to meet goals.



Step 4: Develop the plan together

The team will then be ready to develop the individual service plan (ISP) together. This is the time to:

- Decide which supports and services to use.
- Look in the CLTS Program Provider Directory to find who can provide the needed supports and services for your child and family. Talk in the team about setting up any new providers to work with the CLTS Program.
- Set timelines.
- Identify team member responsibilities.

Step 5: Evaluate effectiveness

Your individual service plan (ISP) needs to change with your child and family. As your child's goals, circumstances, and interests change over time, so will their service plan. If goals aren't being met or problems are not getting better, talk with your SSC and team about reviewing the plan and making changes. Your SSC may also help you identify when a support or service does not seem to be meeting a goal and will work with your family to find a different solution.



Questions to think about

- What is and isn't working well? Why?
- Are your family's problems getting better?
- Is your child meeting their goals?

If a goal is not being met or a problem is not getting better, the team can revisit the Deciding Together process, starting at Step 1. Be sure to talk as a team as often as needed.

What if you disagree during the Deciding Together process?

It is natural for people to have differences of opinion. If you or anyone else on the team disagrees:

- Stay in the discussion.
- Explain your thinking.
- Make sure everyone is heard and different viewpoints are understood.
- Ask for more information or guidance.

You have the right to appeal

People may still disagree. You have the right to appeal when services are denied, services are reduced, or when your choice of a qualified provider is not approved. See Section 8: Rights and Appeals for information about how to appeal.

Resources

Deciding Together Worksheet

dhs.wi.gov/publications/p02246a.pdf

You can use this worksheet to prepare and record Deciding Together conversations.

Deciding Together Guide

dhs.wi.gov/publications/p02246.pdf

This two-page guide walks people through the Deciding Together process.

Deciding Together Guide Instructions

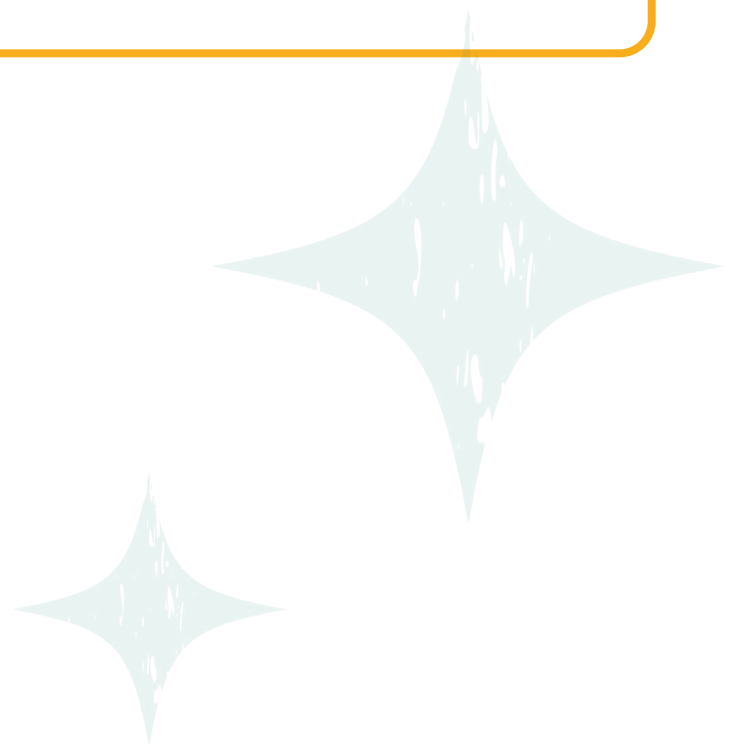
dhs.wi.gov/publications/p02246i.pdf

These instructions offer examples of how Deciding Together can help the team plan for CLTS Program supports and services that will meet your child's goals.

Deciding Together Guide: What it is and what it isn't

dhs.wi.gov/publications/p02246c.pdf

This resource helps the team work through Deciding Together and explains what Deciding Together is and what it is not.



Section 4: Creating an Individual Service Plan

An individual service plan, often referred to as an ISP, is the written plan that details and supports your child’s participation in the CLTS Program. It is reviewed at least every six months but can be adjusted at any time as your child’s needs and goals change. This section discusses who is involved in developing the plan, the process they use, and what is included in it.

What is service planning?

Service planning is a process of identifying supports and services. Your child and family drive this process. Planning helps your whole team learn about your child and family’s experiences and life story. The team uses service planning to develop the individual service plan (ISP).

Service planning begins with learning how your child wants to live their life. The team’s conversation looks at both what is important **to** a person (in this case, the child) and what is important **for** a person. Examples may include:

What is important <i>to</i> a person
<ul style="list-style-type: none">• What results in feeling:<ul style="list-style-type: none">○ satisfied○ content○ fulfilled○ happy• Relationships• Rituals and routines (cultural and personal)• Pace of life• Things to do and places to go• Things to have

What is important <i>for</i> a person
<ul style="list-style-type: none">• Valued in society• Contributes to the community• Health issues• Prevents illness• Treats illness• Promotes wellness (diet, exercise)• Safety

What is an individual service plan?

An individual service plan (ISP):

- Is a unique plan of supports and services for your child.
- Is a flexible plan that changes as your child's goals and needs change.
- Includes a summary of your child's supports and services, including not only those from the CLTS Program, but also any other formal and informal supports. For example, you may get help from a school or a family doctor.
- Addresses the short-term and long-term goals of your child and family.
- Is a required document in the CLTS Program.



A complete ISP has two documents. Your CLTS Program may use the two documents below or they may use local forms that contain the same information. (Local forms must be approved by the Wisconsin Department of Health Services.)

- **Individual Service Plan – Outcomes:**
This form lists all the goals or outcomes your team has decided on. You can find this form in English, Hmong, and Spanish at dhs.wi.gov/library/collection/f-20445a.
- **Individual Service Plan:**
This is your detailed service plan. You can find this form in English, Hmong, and Spanish at dhs.wi.gov/library/collection/f-20445.

When is the ISP developed?

You and your team will complete the ISP within 60 days after your child is enrolled in the CLTS Program.

When is the ISP reviewed?

You and your team will review and update the ISP at least every six months, at a minimum. You can also review and update the ISP whenever your child's needs or goals change.

Can an ISP change?

Yes. The ISP is flexible and should change if the planned supports and services are not working or if there are new goals. Service planning is a continuous process.

Who creates the individual service plan?

You, your child, and your team will plan services and create the ISP. This team approach helps everyone on the team understand how the plan is developed and why supports and services are chosen. The team makes decisions together and this makes sure team members work together to support your child. Working as a team in the CLTS Program helps to support better outcomes for your child and family.

Who is part of the team?

- Your child
- Family members
- Your support and service coordinator (SSC)
- Other important people that your family would like to include.

The team works together to make decisions, which helps everyone do their part. The team uses the Deciding Together process. See Section 4: Deciding Together.

What does each team member do?

Child

As much as possible, your child's views should be at the center of service planning. Taking children and their views seriously and understanding their perspective is important. Your child may have something difficult or stressful they want to work on, or they may have a milestone coming up that they want to prepare for—like changing schools or becoming a young adult. Having your child be a part of directing their service planning helps them be in control of their life, reassures them that they belong, and encourages them to express their wants and needs.

Family

Your family members are key participants on the service planning team. Your role is to help guide what is important to you and your family. You and your child are experts on your child's life including their goals, strengths, and needs.



Support and Service Coordinator (SSC)

Your SSC helps your family choose your goals and outcomes by asking questions and listening. Your SSC is an important link for your family to create the ISP and get supports and services you need. Your SSC must:

- Work with your family to find, manage, and coordinate supports and services and monitor goals (outcomes).
- Coordinate other program services, including those outside the CLTS Program.
- Develop plans to lower risk to your child's health and well-being (if necessary).
- Complete the Outcomes and ISP forms.
- Discuss your rights and choices with you.

Other team members

You may choose to include other people on your team. These people include anyone who is important to your family. They help support your family by offering observations, ideas, and suggestions. Other team members may include:

- School staff
- Medical providers
- Religious or cultural persons
- Neighbors
- Extended family and friends
- Other community members



Developing the individual service plan

Assessment

The first step in creating an ISP is the assessment. The assessment focuses on your child and is used for service planning. It identifies your child's strengths.

The assessment will help your SSC and your team discover insights about your child's:

- Background information including diagnoses
- Physical health
- Daily living skills
- Emotional and cognitive functioning
- Friendships and involvement in the community

When is the assessment done?

Your SSC will complete an assessment at enrollment. Your child must be present and be a part of the process. It must be updated every year at recertification, at a minimum. See Section 9: Eligibility and Recertification for more information.

Working together to develop the ISP

After the assessment, the team will use Deciding Together to develop an ISP that is specific to meeting the needs of your child. Deciding Together is a team-driven, step-by-step decision-making process. Understanding your child's and family's strengths, interests, hopes, dreams, priorities, and resources helps the team develop your child's ISP.



As a team, you will go through the five steps of Deciding Together.

1. Identify goals and issues
 - Think about your concerns, problems, and the things you want to improve.
 - Discuss what results you want to see.
2. Think creatively
 - Create a list of all the ways to help your child and family reach your goals. This list can contain more than just CLTS Program supports and services.
3. Weigh the options
 - Consider what options will work best now and in the future.
4. Develop the plan together
 - Choose the best options and create the plan.
5. Evaluate effectiveness
 - Pause and look at how well the plan is working.

See Section 4: Deciding Together to learn more about this process.



What does an individual service plan include?

The ISP must be written down and include all the supports and services your child will get from the CLTS Program and from other resources. However, the CLTS Program can only pay for supports and services that are allowed within the CLTS Program. The ISP has several sections.

Information about your child and your family

The ISP includes your child's birth date, address, contact information, and emergency contact information.

Goals for your child and your family

The ISP should reflect your family's needs and preferences. These are determined using the Deciding Together team-based decision-making process.

Supports and services information

The ISP describes:

- The CLTS Program supports and services that will be used.
- Any non-CLTS Program supports and services that will be used. These may come from other programs or from informal supports such as friends and family.
- The frequency, duration, and cost of supports and services.
- When supports and services will start and end.
- Any reason an option your family preferred was not able to be used.



Participant-informed rights and choices

The ISP lists your child's and family's rights and choices when participating in the CLTS Program.

- Your child and family have the right to choose home and community-based services, the choice of services and qualified providers, and the right to fair hearings.
- You have the right to:
 - Include anyone you want in any part of the ISP process. People who know your family and child can be helpful.
 - Get information about the types of supports and services offered through the CLTS Program and the willing and qualified providers of these services.
 - Choose between institutional services and home and community-based services.
 - Choose the types of CLTS Program supports and services you get and the providers of those services.
 - Request a hearing about your eligibility determination, eligibility denial, service reduction, or termination of services. See Section 8: Rights and Appeals for more.

Sharing the individual service plan outcomes

Your team will share your child's outcomes with your CLTS Program service providers so they can support your child's goals. This helps providers see themselves as part of the larger team supporting your child and your family. Your SSC will give you a list of these providers. The CLTS Program requires that the team shares your child's outcomes to make sure your child is achieving their goals. This is an important part of the Deciding Together decision-making process and the annual ISP review with your SSC. If you have questions about sharing your child's outcomes, you can talk with your SSC.

There are three times when your SSC is required to share the ISP outcomes form with your CLTS Program providers:

- When the ISP is **first developed**, your SSC sends copies to essential service providers in the ISP. Each provider returns a signed copy.
- When an ISP is **updated** with a new service provider, your SSC sends a copy to the new provider and asks that they sign and return a copy.
- At the **annual review** when the ISP is reviewed, your SSC sends copies to each of the service providers so they know about any changes. Each provider once again returns a signed copy.

Section 5: Allowable Supports and Services

The CLTS Program offers more than 30 different supports and services. They can help your child learn new things, enhance their relationships, live safely in their home, and achieve their best physical and mental health. The CLTS Program provides access to supports and services to help your child and family meet the goals that are listed on the child's individual service plan (ISP). These supports and services would not be covered by other Medicaid or private health insurance plans.

Supports and services are delivered in different ways, but they must do two things:

- Meet a goal on your child's individual service plan (ISP) that your team has identified and confirmed it meets CLTS Program requirements.
- Be delivered by an approved and registered provider. See Section 6: Program Providers for more information.

CLTS Program supports and services fall into five categories:

- Support services
- Teaching and skills development
- Management and coordination
- Physical aids
- Housing related services

The next section lists the supports and services that may be covered in each category, and some helpful considerations when thinking about them. Your support and service coordinator (SSC) will work with your family to decide which supports and services are best to meet your family and child's goals.

What follows is a resource for families and is for informational purposes. Full benefit policy is defined in Wisconsin's most recent Application for a 1915(c) Home and Community-Based Services Waiver (dhs.wi.gov/clts/waiver/clts-1915c-renewal.pdf) and the Medicaid Home and Community-Based Services Waiver Manual for the CLTS Program (dhs.wi.gov/publications/p02256.pdf).

Support Services

CLTS Program support services help when you or your child need an extra set of hands to meet a goal. They include supervision, transportation, and other items for your child. These services are available at your home and out in the community. Support services are not used for goals to teach your child new skills—these services are available in a different category.

Child care

Child care is a kind of support service you can access when **family members are working**. The payments the CLTS Program can make for these services depend on the child's age.

Children Under 12

You must pay the basic cost of care to your child care provider when your child is under 12 and family members are working.

If your child has exceptional care needs above what is included in the basic cost of care, the CLTS Program can pay the supplemental costs to meet these exceptional needs while they are in child care. This is called a supplemental payment.

Children 12 Years of Age and Over

The CLTS Program can pay the total cost of care for children over 12 years old when they have aged out of traditional child care and their disability requires continued child care needs.

The CLTS Program has a Statewide Uniform Rate Schedule (dhs.wi.gov/publications/p02184-2022-06-29.pdf) that shows how much can be paid for different types of services for specific units of time. More information and a link to the rate schedule are shared at the end of Section 5. The rates that can be paid for full cost of child care are shown in that document.



Considerations

The CLTS Program can only pay for the full cost of child care for children 12 years of age or older when their disability requires continued child care needs.

Community competitive / integrated employment

Your child with a disability can get a job in the community. Services are available for your child to help them succeed in their job. This can include having a support person who joins your child at their job to help them fulfill their duties and build job skills.



Considerations

You must use all resources available through the Division of Vocational Rehabilitation (dwd.wi.gov/dvr/about/default.htm) in the Wisconsin Department of Workforce Development before the CLTS Program can pay for job support services.

Day services

Day services encourage your child's involvement in their community through facilitating regular activities for part of their day. Providers help your child access community activities, employment opportunities, and other supportive services.

Day services:

- Focus on community involvement.
- Target skill development.
- Take place in a nonresidential setting (a facility or business location, or out in the community).



Considerations

Day services can't be used in place of other CLTS Program services such as:

- Child care
- Daily living skills training
- Personal supports
- Health and wellness
- Mentoring
- Respite care

Day services are a highly specialized and unique option that fits a small number of specific child and family goals. Your support and service coordinator can provide insights on whether day services are a good match for achieving the goals in your child's ISP.

Participant and family-directed goods and services

This kind of support service provides goods and services to help your child meet a goal on their ISP when your family cannot get those goods and services through another CLTS Program service or Medicaid.



Considerations

Goods and services must directly and only benefit your child. To use participant and family-directed goods and services, the related goal for your child must:

- Decrease the need for other Medicaid services.
- Promote your child's involvement in the community.
- Promote your child's independence.
- Fulfill a medical, social, or functional need.
- Increase your child's safety in the home.



Personal supports

Personal supports help your child with daily activities and make sure those activities meet their needs.

Personal supports can be a **direct care** service that helps your child with tasks they need for everyday life. This might include helping the child take their own medication, use transportation, and do household tasks. Personal supports do not include assistance with grooming and personal care.

Personal supports may also be provided **indirectly** for your family and child. For example, chore or pest control services. Both chore services and pest control services must be directly related to your child's disability to be covered under in the CLTS Program.



Considerations

- Personal supports can't be used in place of child care services.
- Personal supports are a helping service, not a teaching service.
- Personal supports are different from the personal care services that are covered by your child's Medicaid health care.
 - **Personal care**, available through your child's **health care coverage**, focuses on providing routine care for your child, such as bathing, toileting, and feeding.
 - **Personal supports**, available through the **CLTS Program**, focus on direct or indirect tasks that help your child and your family with everyday life.

Respite care

Respite care helps ease the daily stress of the family and caregivers by providing a trained worker to care for your child and give your family a short-term break. There are a variety of respite care options available:

- In your community.
- At your own home or the home of your respite provider.
- In a camp setting.
- In rare circumstances, in an institution such as a residential treatment facility.





Considerations

Respite care is not the same as child care. Respite is used to temporarily give caregivers a break. It's **not** used when supervision is needed because you or your child's primary caregiver are working, in training, or at school.

Transportation

Transportation services help get your child to places in their community and to other CLTS Program supports and services. This is for nonmedical and nonemergency transportation.

Transportation options include:

- Rides with a public or private transportation provider.
- Pay mileage to and from a CLTS Program activity if you use your own vehicle.
- Money for bus tickets or taxi fares. Transportation support services pay the transportation fare, such as bus tickets or taxi vouchers, for the child and for the person supporting them during transportation. This service only pays for the support person's transportation fee, not their time. Other CLTS Program supports and services are available to help pay if care and supervision is needed during transportation.



Considerations

- Your child's Medicaid coverage offers transportation to medical appointments. Transportation services under the CLTS Program **can't** be used to get to medical appointments.
- The CLTS Program **can't** cover transportation to and from school. You'll need to arrange this with your child's school.
- Parents can be paid for transportation only if it is specifically related to their child's disability and goes beyond what parents normally do for children without disabilities.



Teaching and skills development

Teaching and skills development services help your child to gain independence through learning. These services often include a provider who is trained or has experience in helping your child learn something new to meet their goals.

Counseling and therapeutic services

Cognitive and therapeutic services improve your child's health and well-being. These services focus on their physical, social, emotional, and cognitive development.

Counseling and therapeutic services can include:

- Music therapy
- Art therapy
- Equine involved therapy (using horses)



Considerations

Counseling and therapeutic services must have a well-defined goal that can be evaluated for progress. The CLTS Program will **not** fund therapy services that may be harmful to your child. The CLTS Program does **not** fund therapeutic services covered by your child's Medicaid or private health insurance.

Daily living skills training

Daily living skills training is a direct care service that teaches your child to do everyday activities by themselves, building skills they'll use for the rest of their life.

Some examples of daily living skills training are:

- Independently performing personal hygiene and grooming tasks.
- Learning to prepare food.
- Understanding how to manage money.
- Using public transportation.
- Doing chores in their home.





Considerations

Daily living skills training is a teaching service, not a helping service. It focuses on teaching your child new skills, not doing the tasks for them. It does not include educational instruction, such as reading, writing, or math. Learning new daily living skills must be directly related to your child's disability.

Discovery and career planning

Discovery and career planning services will help your child build general skills that will help them be ready to get a job. Your child can improve interviewing skills, explore different career ideas, and when ready, get support with their job search.



Considerations

Discovery and career planning services are not job specific. It supports your child becoming ready to apply for and hold a job in the community.

Empowerment and self-determination supports

Empowerment and self-determination supports help your child, your family, and unpaid caregivers in your child's life learn how to support development of skills in self-advocacy and independence for your child. This service must be directly connected to a goal related to increasing your child's ability to express their own thoughts, goals, and desires to direct their supports and services more independently.

Empowerment and self-determination supports cover:

- Training courses
- Conferences
- Books
- Other educational materials



Considerations

Empowerment and self-determination supports are focused on self-advocacy. The service is limited to in-person or virtual trainings and events. The service does **not** include a support person directly teaching skills on a regular basis. This service may cover the costs to attend a conference or training event but will not pay for related costs such as meals or hotel rooms. Talk with your SSC about other ways to pay for these related costs.

Family / unpaid caregiving supports and services

The CLTS Program can support parents and unpaid caregivers in building confidence around supporting and caring for your child. This service must be directly connected to the caregiving role and learning new skills related to your child's disability.

These caregiving supports and services help parents and unpaid caregivers to:

- Learn new parenting/caregiving strategies.
- Learn new skills to manage challenges.
- Build confidence that can boost your child's development and independence.

This service includes, but is not limited to:

- Training events
- Resource materials
- Support groups
- Conferences



Considerations

This service is focused on education and training to increase the caregiver's ability to continue to care for your child. This service does not include training to become a paid caregiver. Training is not intended to be provided by a support person on a regular basis. This service may cover the cost to attend a conference or training event but will not pay for related costs such as meals or hotel rooms.

Grief and bereavement counseling

Grief and bereavement counseling helps your family cope with the possible death of your child, by focusing on identifying, communicating about, and dealing with the emotions that your child and your family may have about death.



Considerations

Your family may use this service before and after a child's death. This service must be authorized while your child is still enrolled in the CLTS Program, but the service can be used for 12 months after their passing. This service may cover the costs of a spiritual counselor, such as a pastor, priest, rabbi, or imam, who is specific to your family's beliefs.

This service does **not** pay for funeral or memorial service costs.



Health and wellness

Health and wellness services promote healthy habits for your child. These services focus on socialization and community inclusion with family and peers. Health and wellness can include learning about a healthy lifestyle and may include sexual health education. They may also include wellness practices that are important and culturally responsive to your family, such as yoga, reiki, Native American healers, or traditional African-based holistic services.

Health and wellness services include, but are not limited to:

- Classes or gym membership purchases
- Events
- Items that support your child's wellbeing

Considerations

Health and wellness services must be used to meet a goal related to your child's disability and may **not** be used for recreation goals. If your child has a goal that is only for recreational purposes, talk with your SSC about other ways to support that goal.



Mentoring

Mentoring helps your child learn ways to interact and play with friends and be active in their community. Mentors should have something in common with your child. Mentoring is done through practicing and modeling skills with friends in the community.



Considerations

Mentoring is different from daily living skills training because it promotes learning skills from people who are your child's peers or people who share your child's interests.

Safety planning and prevention

Safety planning and prevention includes items or direct support services (provided one-to-one) that reduce risk or danger for your child and keep them safe in their home and community. This includes planning and training with a professional, as well as items that support your child's safety.

Safety and planning prevention services include:

- An evaluation of the home and your child's behaviors.
- A support plan that your family can use.
- The purchase of items that support the plan or increase safety.



Considerations

This is a unique service in the CLTS Program because it can also support your child's paid caregivers. For example, if your child attends respite care and your child's respite provider needs safety planning support, the CLTS Program can provide that planning support. Strategies need to align with the guidelines in Section 11: Health and Safety.

Management and coordination

The CLTS Program uses a team approach to help you plan supports and services and make decisions to help your child meet their goals. The team approach provides better outcomes for your child and family. Management and coordination services can cover the cost of getting help to manage your team, finances, and your child's access to CLTS Program supports and services. These services can do things like facilitate bringing together the team, finding providers who can support your child, and coordinating payments to your child's providers.

Community integration services

Community integration services cover a provider who assists with not only coordinating the multiple service systems that your child is involved with, but also doing intensive care coordination.



Considerations

A community integration services coordinator does not replace your SSC. They work together to ensure that all members of your child's team are supporting your child and family goals and helping your child to remain involved in their community.

Financial management services

Financial management services (FMS) help your family manage the funding for CLTS Program supports and services. CLTS Program financial management services are required when your family wants a family-hired provider who neither owns, nor is employed by, an agency. A family-hired provider may be a trusted neighbor or friend. Financial management services providers handle financial transactions between the CLTS Program and these providers. Such transactions include managing timesheets, caregiver taxes, and payment to the provider according to the Statewide Uniform Rate Schedule (more information on this at the end of this section).



Considerations

Financial management services are an indirect support for your family. Financial management services do not find providers. Some FMS providers may have a list of qualified and available providers for you to reference. You are not limited to using the providers on that list. Your family can choose the providers who are the best match for your child and family.

Participant and family-directed broker services

Participant and family-directed broker services help your child and your family direct your CLTS Program supports and services by assisting you in:

- Learning how to recruit for help.
- Knowing how to interview providers/workers.
- Hiring the people you select.
- Coordinating, and managing the people you hire.



Considerations

This service does not supply direct support staff to work with your child. Broker services indirectly support your family's goal of finding care providers. Broker services do not hire the care provider once they are located.

Physical aids

Physical aids are items or supplies that the CLTS Program helps you purchase for your child to use to gain independence, increase safety, and engage in the community or with others.

Assistive technology

Assistive technology includes direct services, items, and devices that improve your child's ability to do tasks at home, at work, and in the community. It includes designing, fitting, and replacing devices covered by this category. It can also include training caregivers how to use assistive technology that helps your child.

Assistive technology may include buying and training a service animal. The CLTS Program may support the costs for buying and training a service animal, so long as the tasks a service animal is trained to do relate to your child's disability and support your child's goals.





Considerations

The CLTS Program can't pay for assistive technology software and applications used exclusively for recreation. They also can't pay for internet services.

The CLTS Program does **not** fund emotional support animals. Service animals must:

- Meet service animal definitions based on the Americans with Disabilities Act (ADA) and Wisconsin Statute 106.52(1)(fm), ([docs.legis.wi.gov/document/statutes/106.52\(1\)\(fm\)](https://docs.legis.wi.gov/document/statutes/106.52(1)(fm))).
- Be trained to support a major life task that your child can't complete independently.

Routine veterinary care and equipment for service animals is covered if it is necessary for them to do their job. This service does not cover items such as pet food or grooming.

Communication assistance for community inclusion

Communication assistance can help your child with hearing, speech, communication, or vision needs by covering the purchase of communication devices and related evaluation, fitting, and training. This service may also support hiring of sign language or foreign language interpreters.



Considerations

Providers are responsible for taking reasonable steps to provide interpreter services for your family when they are needed. Interpreter services available through the CLTS Program should not be used to replace providers fulfilling that responsibility.

Personal emergency response system

Personal emergency response systems are devices or services that provide an immediate response and help in the event of an emergency. This service may include coverage of devices or services that require an ongoing monthly subscription.



Considerations

The personal emergency response system service is limited to purchasing items. It cannot pay for a service provided by a support person.



Specialized medical and therapeutic supplies

Specialized medical and therapeutic supplies are physical aids that help your child with everyday activities, manage a medical condition, and increase independence in your home and community.

Some examples of specialized medical and therapeutic supplies are:

- Meal preparation tools
- Adaptive bikes
- Over-the-bed tables



Considerations

The CLTS Program may only cover specialized medical and therapeutic supplies that are not covered (or are denied) by your child's Medicaid or private health insurance.

This specialized medical and therapeutic supplies service does not cover the purchase of items used for recreational activity.

Vehicle modification

Vehicle modifications are changes to your family's vehicle that help your child stay safe when getting in and out, and when traveling with your family.

Vehicle modifications can include:

- Ramps to load wheelchairs into your vehicle.
- Specialized chairs to assist your child getting in and out of the vehicle.
- Specialized hand controls for a child who is ready to drive.
- Funding a rental vehicle while your family's vehicle is undergoing modifications.



Considerations

Your family is responsible for purchasing and performing standard maintenance on your vehicle. Vehicle modification services only pay for modifying your family's vehicle to support your child's ability to access or use the vehicle if they have difficulty doing so without help due to their disability.

Virtual equipment and supports

Virtual equipment and supports are items that let your child and family access CLTS Program supports and services that are remote or virtual.

Virtual equipment and supports can include purchasing tablets, computers, and software.



Considerations

This service only covers equipment and items that facilitate your child or your family's ability to access remote or virtual supports and services under the CLTS Program. It does not cover equipment to access other services that offer telehealth, such as your child's health care provider. Equipment can't be purchased for the use of recreational or school services.

This service also does not cover the cellular or internet costs.



Housing-related services

Housing-related services are a mixture of supports, services, and items that help support your child's living arrangement.

Housing support services

Housing support services help families find and keep safe and accessible housing by helping them:

- Search for housing.
- Fill out a housing application.
- Learn about how to rent.



Considerations

Housing support does not help with actual costs such as rent, security deposits, utility bills, food, home furnishings, or physical alterations to a family's home.

Home modifications

Home modifications cover changes to your home that make it easier and safer for your child to enter and exit the home, access rooms, and use equipment in the home or on the home's property.

Home modifications can include:

- Ramps
- Lifts
- Special door handles
- Shower modifications



For example, if your child has needs that are higher than a similar aged child, the home modification service could be used to add fencing for safety. Home modifications also include independent living or home assessments that look at ways the home may be modified to help your child.



Considerations

Home modifications must directly help with your child's disability. Home modifications may not be used to fund items that all families pay for or all members of the family use. The items covered under this service must be determined cost effective to meet the need. Home modifications do not cover upgrades for aesthetic purposes.

Relocation services

Relocation services pay for items your child needs when they move from an institution, hospital, residential facility, or group home to a less restrictive place to live (for example, their family home). These services also support your child when they move out of their family home to a more independent community setting.

Housing relocation services can cover things like:

- Basic furnishings
- Household supplies
- Cooking utensils
- Basic cleaning supplies
- Initial utility connection costs
- A security deposit



Considerations

Relocation services do not cover the purchase of food, rent payments, or items that are used for leisure or recreation. This category only covers supports for children moving into a less restrictive living environment from a more restrictive one. These services are only to prepare the home to live in. Ongoing costs are not covered.





Adult family home

Adult family home services cover treatments, supports, and services for members up to the age of 22 who are living in a home certified or licensed as an adult family home. Adult family homes are licensed by the Wisconsin Department of Health Services, Division of Quality Assurance.



Considerations

Adult family homes only serve individuals older than 18. This housing-related service funds only their care, support, and supervision. It does not cover costs for room and board.

This service is only for participants in the CLTS Program that do not qualify for adult long-term care services.

Children's foster care

Children's foster care services support a child's disability-related needs when they are placed in foster care.



Considerations

The CLTS Program does not place children in foster care. This service is only to support a child's needs when that occurs.

What supports and services are not covered or not allowable?

The CLTS Program has standard rules and policies for what supports and services can and cannot be covered.

These supports and services are not covered:

- Items or services that all families are responsible for paying for and all family members use. For example:
 - Your water heater stops working and you need a replacement.
 - Your furniture is getting old or is broken.
- Room and board costs like rent, food, or utility bills.
- Supports or services that may harm your child, are experimental, or have been shown to have negative effects for children.
- Supports or services that are for recreational purposes only.
- Supports or services that are the responsibility of another program, such as your child's school or your child's health care coverage. The CLTS Program is the payer of last resort, which means other programs pay first.
- Payments to parents, primary caregivers, or directly to the participant are not allowed. (The only exception is for reimbursement of costs under transportation service.)

Timeline for decisions

A county must approve or deny a requested support or service within **14 calendar days** of the request. This can be extended an additional 14 days if there are complex circumstances to the request. Your family must receive a notice if this happens.

Use other coverage options before CLTS Program funding

The CLTS Program is considered the payer of last resort. This means that supports and services available through other systems must be exhausted before CLTS Program funding can be used. Other payers that should be used first, for example, are Medicaid (including HealthCheck Other Services) or private insurance. After using all coverage from public or private options, then the CLTS Program may fund supports and services.

CLTS Program Statewide Uniform Rate Schedule

The CLTS Program has a rate schedule for some services, (dhs.wi.gov/publications/p02184-2022-06-29.pdf). This rate schedule is a document that shows different types of supports and services and details how much can be paid for them for specific units of time. Providers who offer the supports and services listed on the rate schedule may not be paid more than what is listed.

Some CLTS Program supports and services do not require a statewide rate and are not included in the rate schedule. These services are paid at a market rate.

High-cost process

If you need an expensive item, like home or vehicle modifications, your SSC may need to notify the Wisconsin Department of Health Services (DHS). Your SSC will provide DHS details about the cost, why you need it, and any other options you've considered. DHS will review the information and respond to the request confirming whether the request meets CLTS Program requirements. Your local CLTS Program is responsible for authorizing or issuing a denial for the request.



Resources

Children's Long-Term Support Program Supports and Services at a Glance

dhs.wi.gov/library/collection/p-02570

This resource shows the supports and services available through the CLTS Program.

Medicaid: Non-Emergency Medical Transportation

dhs.wi.gov/nemt/index.htm

This resource will help you understand how your child can get non-emergency medical rides free of charge through their Medicaid coverage.

HealthCheck and HealthCheck Other Services

dhs.wi.gov/forwardhealth/healthcheck.htm

This web page provides information about HealthCheck and how it can help your child.



Section 6: Program Providers

What is a provider?

A provider is the person or agency who works with your child and family to deliver supports and services:

- A provider is often a person who works for an agency that offers supports and services to people who need help.
- A provider could be a person you know that you have chosen, such as a neighbor or family member.

Whether the person works for an agency or not, they must be qualified to deliver the CLTS Program support or service they are selected to provide.

Choice of providers

You have a choice of providers. The provider you choose must be qualified and accept CLTS Program payment rates.



Finding a provider

You can find a CLTS Program provider in several ways.

- **Talk to your support and service coordinator (SSC)**

If you need help finding a provider, talk to your SSC. They can help you find approved and qualified providers to meet your child's goals.

- **Public provider directory**

The CLTS Program has a public provider directory, or a list of providers who are approved by the Department of Health Services (DHS) to help children and families. You can find the list at cltsproviderdirectory.wi.gov/s/. You can search this list by the support or service (for example, child care, respite care, transportation), by the county you are in, or by the provider's name.

- The providers in the directory are approved by DHS.
- Your SSC can help you search the list of approved providers. They can tell you more about how to get supports and services from these providers.

- **Request addition** of a provider agency to the public provider directory

If you find a provider agency that offers the help your child's needs, but they are not on the public provider directory, contact your SSC. They can call the provider to talk about how to apply to be on the approved DHS provider list. You can also direct the provider to the DHS website for more information at dhs.wi.gov/clts/provider-registration.htm.

- **Hire a provider directly**

If you know someone who is qualified and willing to provide a CLTS Program support or service that helps meet your child's goal but does not want to be hired through a provider agency, then you can hire them directly with the assistance of a financial management services (FMS) provider. An FMS will help you with payroll and paychecks. Talk to your SSC about this option. See Section 5: Allowable Supports and Services for more information about FMS.

Section 7: Program Costs

The CLTS Program helps families pay for certain supports and services. Some families may have to pay a part of the cost for a CLTS Program support or service. This is called parental payment liability (PPL). If you have questions about program costs, contact your support and service coordinator.

In the CLTS program, each child has an SSC who is your family's main point of contact. SSCs are employed by your local county CLTS Program or by an agency who works with your county. Your SSC helps your family understand the CLTS Program and your rights in the program. They connect your family to supports, services, and resources. See Section 2: Support and Service Coordination for more information.

How do I know if I have a parental payment?

Some families don't have a parental payment and each one is different. It depends on:

- Your family size.
- How much money your family makes and the U.S. poverty guidelines.
- The cost of the services in your child's individual service plan.

You won't have a parental payment if you are enrolled in one of the following programs:

- SSI-Related Medicaid
- BadgerCare Plus
- FoodShare
- Wisconsin Works (W-2)
- Women, Infants, and Children Program (WIC)

You can find the amount you'll have to pay on your child's individual service plan. If you have questions, ask your SSC.

What services might I have to pay for?

All CLTS Program supports and services may have parental payment liability, except support and service coordination.

Do I need to submit proof of income?

You must tell the CLTS Program about your gross income (your pay before taxes and deductions), but you do not need to provide written documentation. The best place to find this information is on your most recent federal income tax return, W-2 tax form, or a paystub. You do not need to provide copies of those documents—just reference them to get the right figures.

Will the amount I have to pay change?

Different counties bill families differently. This affects whether the amount you pay each month changes or stays the same. Some counties bill for the services as you get them. In this case, your bill will reflect the amount specific to those services from month to month. Other counties look at the services you plan to get throughout the year and bill you an average amount each month. In this case, if you end up paying for more services than you use, you'll get money back or the extra amount will go toward the next year's parental payment. You can ask your county how they handle the parental payment.

Your SSC will review your parental payment liability every year. You can also ask them to review it at any time if your individual service plan changes, or your family's needs or finances change.

What if I can't afford to pay?

If you are struggling to pay, talk to your SSC. They can consider your situation when deciding your parental payment.

What if I disagree with the amount I have to pay?

You have the right to ask for your parental payment to be recalculated at any time. You also have the right to file a grievance with your local CLTS Program or file an appeal with the state's Division of Hearings and Appeals if you do not agree with the amount. See Section 8: Rights and Appeals for more about filing an appeal or grievance.

Resources

Parental Payments for CLTS and CCOP

dhs.wi.gov/library/collection/p-03342

This is a fact sheet about parental payments for your child and family.

Program Costs

dhs.wi.gov/clts/costs.htm

This DHS webpage has more information about parental payments.



Section 8: Rights and Appeals

Your child and family have rights and responsibilities in the CLTS Program. Your SSC must tell you about your rights and what you can do to appeal or file a grievance if you don't agree with a decision made in the CLTS Program.

Participant Rights and Responsibilities Notification and County Grievances

You can find a copy of your rights and responsibilities online at dhs.wi.gov/library/collection/f-20985. This Rights and Responsibilities Notification includes:

- Your rights and responsibilities in the CLTS Program.
- How and when you can file a CLTS Program appeal.
- How the county can and will help you.

You must be given this Rights and Responsibilities Notification—both verbally and in writing—at important milestones throughout your child's participation in the CLTS Program:

- When you first apply to the CLTS Program.
- Every year.
- Any time you receive a Notice of Adverse Action that tells you something you have asked for has been denied.

When your child is accepted into the CLTS Program, you must sign the Rights and Responsibilities notification you receive. One copy of the notification will go to the county, and one will stay with your family. You can and should talk with your support and service coordinator (SSC) at any time if you have questions.

In addition to the Rights and Responsibilities Notification, your SSC must explain how to file a county grievance, which is different than an appeal.

If you don't agree with or don't understand a decision, you can:

- Talk with your SSC, the CLTS Program lead or a supervisor.
- Ask questions at any time.
- Complete your county's grievance process.
- Request an appeal through the state's Division of Hearings and Appeals.

Notice of Adverse Action

When you participate in a state program, you receive many notices about important information. In the CLTS Program, a Notice of Adverse Action is sent to tell you when the program has made a decision to deny something that you have asked for and the reason for the denial. Your support and service coordinator (SSC) is required to send you a Notice of Adverse Action when:

- Your child does not meet all the criteria to be eligible for the program.
- A CLTS Program support or service is denied or reduced.
- Your qualified CLTS Program provider is denied.

This notice must include:

- The action that will be taken and why.
- When the action will be taken.
- Your rights, including your right to appeal.
- Timeline to appeal the decision.

Timeline for decisions and receiving a Notice of Adverse Action

A county must approve or deny a requested support or service within **14 calendar days** of the request. This can be extended an additional 14 days if there are complex circumstances to the request. Your family must receive a notice if this happens.

You must get a Notice of Adverse Action at least **10 calendar days** before the date the action is going to take place.

Decisions that can be appealed

There are some decisions that can be appealed. You can appeal an eligibility denial, a support or service denial, or a qualified CLTS Program provider denial. Each decision has a deadline for when you must file an appeal.

Initial eligibility denial

An initial eligibility denial can happen when your child is referred to the CLTS Program and they are denied because they do not meet all the requirements to participate in the program.



Deadline to appeal

You have **45 days** from the day of the denial decision to appeal.

Eligibility termination

Eligibility termination happens when your child is initially enrolled in the CLTS Program, but then something changes that causes them to no longer meet all the requirements to continue participating.



Deadline to appeal

You have **90 days** from the day of the termination decision to appeal.

Service denial

A service denial happens when your family requests a CLTS Program support or service, and the county denies that request for any of these reasons:

- **Support or service suspension**
Example: A child enrolled in the CLTS Program temporarily moves to an ineligible setting. The child's supports and services will be on hold until the child comes back to a community living setting. For example, if the child moves from home to an inpatient mental health facility.
- **Support or service limitation in amount, time, or quantity**
Example: A family requests 10 hours of respite care per week and only five hours of respite care is approved.
- **Support or service reduction in amount, time, or quantity**
Example: A child was receiving 10 hours of daily living skills per week, and it is reduced to five hours per week.
- **Support or service termination**
The county denied the continuation of a support or service that a child is receiving. Example: A child was receiving 10 hours of mentoring per week, and this is ending.
- **Denial of a requested support or service**
Example: A family requests a support or service and the county approves something different or denies the requested support or service. Example: A family requests a home modification and the request is denied.
- **Denial of chosen qualified provider**
Example: A family requests to use a specific qualified provider for mentoring and it is denied. See Section 6: Program Providers for more about qualified providers.



Deadline to appeal

You have **90 days** from the day of the decision to appeal.

Decisions that can't be appealed

- You can't appeal if the issue or change is required by federal or state law. For example, if a law requires reducing or ending a CLTS Program support or service, families don't have the right to appeal the change.
- You can't appeal a provider denial if the provider is not enrolled with Medicaid (they are not a qualified provider).
- You can't appeal the rate of the support or service. For example, you can't appeal how much the CLTS Program will pay for a support or service.

How to file an appeal

If you disagree with a decision about a CLTS Program support or service, you have the right to appeal with the Division of Hearings and Appeals (DHA). It is one way to work through differences when you disagree with a decision.

DHA is a division of the Wisconsin Department of Administration. It conducts fair hearings on appeals brought by children and families in the CLTS Program. At a fair hearing, an administrative law judge listens to the reasons why a decision was made and the reasons why children and families think that decision is wrong, to see whether that decision should be overturned. There's more information about fair hearings below.

You can request a fair hearing using the form at doa.wi.gov/Pages/LicensesHearings/DHAAdministrativeHearingProcess.aspx or by sending a signed letter describing your request to:

DHA
P.O. Box 7875
Madison WI 53707-7875

Fair hearing requests must include:

- The name of the person requesting a hearing.
- The mailing address of the person requesting a hearing.
- A brief description of why a hearing is needed.
- The county or state agency that took the action or denied the service.
- A copy of the Notice of Adverse Action received from the county or agency denying the support or service.
- The signature of the person requesting a hearing and the date.

Deadlines to file an appeal

- Initial eligibility: You must appeal within 45 days of the decision.
- Supports and services: You must appeal within 90 days of decision.
- Denial of qualified CLTS Program provider: You must appeal within 90 days of decision.
- Recertification of enrollment: You must appeal within 90 days of decision.

If you file a request for a fair hearing within 10 days of getting the Notice of Adverse Action, you can ask for all your benefits to stay the same until an appeal decision. If the appeal decision is not in your favor, you may need to pay for the cost of services.

What happens at a fair hearing?

The administrative law judge will lead the hearing by phone. At the hearing, the administrative law judge will ask why you disagree with the decision. You have the right to submit documents that support your point of view before the hearing. These documents should be sent to DHA and to the county agency involved at least 48 hours before the hearing. The addresses will be listed on the hearing notice.

CLTS Program staff will also explain their position and present documents. The administrative law judge will then consider all information and make a decision after the hearing. You'll get the decision in the mail. If you have questions about the appeal process, reach out to your SSC.

This information is meant to help explain the appeal process. It is not a substitute for the legal advice and assistance of an attorney. This is a general explanation and does not cover all details in the law.



Grievances

A grievance is a local process. You file a grievance with your local CLTS Program, not to a state agency. This is a different and separate process than an appeal. It can be done at any time and can be done while you are also filing an appeal and requesting a fair hearing, or you can do it separately.

Your SSC must give you information about how to file a local grievance. Different counties have different processes. Counties must also provide a written grievance procedure for parental payment liability (PPL) billing and collections. See Section 7: Program Costs for more information about PPL.

If you have concerns about your SSC or if your questions are not being answered, you should contact the CLTS Program lead in your county.

Resources

The Participant Rights and Responsibilities Notification

dhs.wi.gov/library/collection/f-20985

This is a detailed list of the rights and responsibilities of applicants and participants for the CLTS Program.

Division of Hearings and Appeals

doa.wi.gov/Pages/LicensesHearings/DHAContact.aspx

This website includes contact information and appeals forms.

Request for a Fair Hearing

doa.wi.gov/DHA/WFSHrgReqForm.pdf

The form for requesting a fair hearing about an appeal.

County contact information

dhs.wi.gov/clts/contact.htm

Find your county CLTS Program contacts on this webpage.

Section 9: Eligibility and Recertification

Joining the CLTS Program begins with a referral. You do not need to say the program name or get a referral from a professional when seeking support for your child with a disability. Referrals can be informal requests to your local human services agency for help with your child.

The referral date is the date a parent or legal representative contacts their local human services agency. An SSC will contact you within 10 days of receiving the referral. An SSC will tell you about the functional screen which is the first step toward enrollment in the CLTS program, although it's only one aspect of program eligibility. See Section 2: Support and Service Coordination for more about your SSC's role.

CLTS Program functional screen

The functional screen is a standardized tool with questions to measure a child's abilities and day to day functioning. The tool will gather information such as:

- Diagnoses
- Behaviors
- Mental health services
- Cognition and learning
- Ability to complete age-appropriate daily living activities
- Social and emotional skills
- Health care services

After the screener collects the information and enters it into the functional screen, the functional screen determines if the child meets a level of care.

A child who does not meet a level of care as identified on the functional screen is not eligible for the CLTS Program.

A child who meets an eligible level of care has a need for care and services that would qualify them for inpatient care in an institutional setting. Wisconsin has three levels of care, and a child must meet at least one level of care. Some children may meet more than one level of care.



The three levels of care in Wisconsin's CLTS Program are:

1. Intermediate Care Facilities for Individuals with Intellectual Disabilities
2. Nursing home or hospital
3. Psychiatric hospital

Each level of care has a corresponding target group. Both the level of care and the child's target group will be on the functional screen results page, if the child is functionally eligible. The CLTS Program uses the terms developmental disability, physical disability, and mental health disability to identify target groups associated with each level of care.

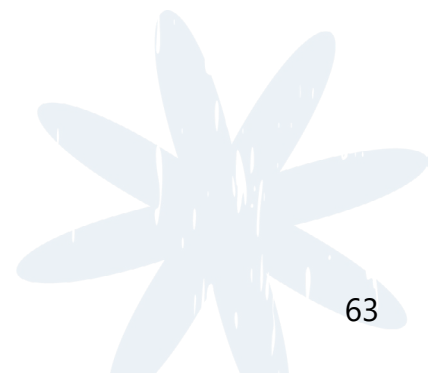
CLTS Program eligibility

The functional screen is only one requirement of eligibility for the CLTS Program. A child must meet three additional eligibility requirements:

- They must be enrolled in a full-benefit Medicaid program.
- They live in a community setting.
- They are under the age of 22.

After functional eligibility is established on the functional screen and the support and service coordinator has determined the child meets all the eligibility criteria, then they can be enrolled.

When the functional screen has been completed, all eligibility has been met, and the family wishes to enroll, an SSC must complete enrollment within 45 days of the functional screen completion. Getting children into the CLTS Program without delay is important to ensuring children and their families are receiving needed supports and services.



What is recertification?

Children must meet and maintain certain requirements to join and stay in the CLTS Program. Recertification is a yearly review to see if your child still meets those requirements. Equally important, recertification offers a time where you, your child, and the support and service coordinator (SSC) can review the past year, revisit goals, decide if goals are being met, create new goals, and discuss what your child and family hopes for in the upcoming year. It is important to include your child in these conversations so they can talk about what is important to them and what they would like their goals to be.

How often is recertification done?

CLTS Program recertification is completed **once per year**. Your child's recertification is usually in the month they joined the program. Your SSC can tell you when your next recertification is.

What happens during recertification?

Your recertification meeting will include you, your child, the support and service coordinator (SSC), and anyone else you would like to have there. You have the right to include anyone on your team during any part of the recertification process. Together, you will have a conversation about your child's day-to-day life.

During recertification, you will:

- Confirm your child's eligibility requirements.
- Update the functional screen. This ensures that your child still meets the level of care eligibility requirements.
- Update the participant-focused assessment.
- Review, update, and sign the individual service plan (ISP).
- Discuss participant rights and responsibilities. You will also get the Participant Rights and Responsibilities Notice to sign.



Confirm program eligibility requirements

During recertification, your SSC will determine if your child still meets the requirements for enrollment. Your child must:

- Be younger than age 22.
- Meet financial eligibility requirements.
- Be eligible for and enrolled in a full-benefit Medicaid health care program.
- Live at home, in foster care, or in another approved setting.
- Need a level of care that people get at:
 - A hospital.
 - A nursing home.
 - An institution for people with developmental disabilities.

Update the Functional Screen

For your child to be eligible to participate in the CLTS Program, they must meet the criteria requiring a level of care and services that would qualify them for inpatient care in one or more of three institutional settings: a hospital, a nursing home, or an institution for people who have developmental disabilities. This is determined using a tool called a Functional Screen.

Children and youth who do not meet the criteria requiring one of the three levels of care through the Functional Screen are not eligible for the CLTS Program.

A screener will assist you and your child with the Functional Screen. If your child is in another program that uses the functional screen, their screen from that program can be used for CLTS Program recertification as well.

Update the participant-focused assessment

The participant-focused assessment focuses on your child and family's strengths, abilities, and their circumstances.

Your SSC will discuss with your child and family any updates the team has for the assessment. Updating the assessment will help the team evaluate the current supports and services to make sure they are still the best ways to help your child achieve their goals.

Review and sign the annual individual service plan update

Understanding your child's and your family's strengths, interests, hopes, dreams, priorities, and resources helps the team to evaluate the current outcomes and develop new outcomes if needed. While reviewing the current individual service plan (ISP), if the team decides that the current supports and services aren't working, the team can begin at Step 1 of Deciding Together to talk about goals. See Section 3 for more about the Deciding Together process and Section 4 for details about ISPs.

Deciding if the supports and services are working and making changes to it should happen as often as needed throughout the year. Recertification offers a more formal and expected time to review and make needed changes.

When reviewing the ISP, the family's parental payment liability should also be discussed, if applicable. See Section 7: Program Costs.

Discuss and sign participant rights and responsibilities

Your SSC will give your child and family the Participant Rights and Responsibilities Notification again at recertification. This notification includes:

- Your rights and responsibilities in the CLTS Program.
- How and when you can file a CLTS Program appeal.
- How the county can and will help you.

You can find a copy of your rights and responsibilities at any time at dhs.wi.gov/library/collection/f-20985.



Your SSC must also explain:

- Your child and family's right to include anyone on your team during any part of recertification.
- The range of supports and services offered in the CLTS Program.
- The right for your child and family to choose to be a part of the CLTS Program if your child is eligible.
- The right for your child and family to choose the types of supports and services you receive and who provides them.
- Your child and family's right to request a hearing for eligibility determinations and if your services would be denied, reduced, or ended.

You and your SSC will also discuss what you and your child are responsible for, such as:

- Staying in contact.
- Taking part in service planning and recertification activities.
- Informing your SSC if your child moves.
- Discussing any incidents that affect your child.

See Section 11: Health and Safety for information about reporting incidents.

What happens if my child is still eligible?

If your child is still eligible for the CLTS Program, your child will continue to receive the supports and services in the individual service plan (ISP) that help meet their goals. You will continue to work with your SSC and the team to review your child's supports and services to be sure they still meet your child's goals.



What happens if my child is no longer eligible?

If your child is no longer eligible for the CLTS Program, your SSC will let you know the effective date of this change. At that time, the supports and services your child is getting will no longer be covered by the CLTS Program. Your SSC will also talk to you about your options for appealing. See Section 8: Rights and Appeals.

If your child does not meet the eligibility rules to stay enrolled in the CLTS Program, they may still be able to keep their Medicaid health care coverage for at least 12 months through continuous coverage. See Section 10: Medicaid and the CLTS Program and the Keeping Kids Covered factsheet at dhs.wi.gov/library/collection/p-03555 for more about continuous coverage.

Resources

Children's Programs Eligibility and the Functional Screen

dhs.wi.gov/library/collection/p-03061

Explains the basics of the Functional Screen tool and what you can expect during the functional screening process. It also explains some basics of functional eligibility for children's programs, which are important during the recertification process.

Section 10: Medicaid and the CLTS Program

To join the CLTS Program, your child must also be enrolled in a full-benefit Wisconsin Medicaid health care program. Medicaid provides health coverage to children, people with disabilities, low-income adults, pregnant people, and elderly adults. Wisconsin's Medicaid programs help people get:

- High-quality health care
- Long-term care
- Other services that promote physical and mental health

Limited coverage Medicaid programs do not meet the eligibility requirements for the CLTS Program.

Medicaid health care programs that meet the CLTS Program eligibility requirements

Your child must be in a full-benefit Medicaid health care program to be eligible for the CLTS Program. Some common qualifying programs are:

- ✓ Katie Beckett Medicaid
- ✓ Home and Community-Based Waiver (HCBW) Medicaid
- ✓ Supplemental Security Income (SSI) Medicaid
- ✓ Adoption Assistance Medicaid
- ✓ Foster Care Medicaid

Medicaid programs that do not meet the CLTS Program requirements

Your child's enrollment in a food assistance program or a limited coverage Medicaid health care program does not meet CLTS Program eligibility requirements. The following programs are examples of state benefit programs that do **not** meet the CLTS Program eligibility requirements:

- ✗ FoodShare
- ✗ Family Planning Only Services
- ✗ Tuberculosis-Related Only Medicaid
- ✗ Emergency Services Plan



Keeping your child enrolled in their Medicaid health care program

To maintain your child's participation in the CLTS Program, you must renew their Medicaid enrollment every year.

Completing an annual renewal

About two weeks before your child's Medicaid renewal month, you will get a letter and renewal packet in the mail telling you about what you need to do. It's important to respond quickly and take any required actions to renew before the due date. Visit dhs.wi.gov/renew for more information about renewing your Medicaid health care program.

If you are no longer eligible

If your child loses eligibility for their current Medicaid program, they might qualify for a different one. At renewal, your SSC will help check if your child is still enrolled in a full-benefit Medicaid program and assist in finding a new source of Medicaid if needed.

If you voluntarily leave the CLTS Program

You can choose to leave the CLTS Program at any time. Leaving the CLTS Program also means leaving Home and Community-Based Waiver (HCBW) Medicaid. If you're enrolled in Medicaid other than HCBW, your choice to leave the CLTS Program will not affect your eligibility for Medicaid.

To leave the CLTS Program, give the support and service coordinator a written statement with your signature that says you no longer wish to receive CLTS Program supports and services. The support and service coordinator will help you plan to transition from CLTS Program supports and services to other resources. See Section 12: Transition Planning for more information.

Helping children keep their Medicaid health care coverage

A federal law helps most children under 19 on Wisconsin Medicaid keep their health coverage for at least 12 months, even if family circumstances change. This stability leads to better health for children and is easier for families. Learn more at dhs.wi.gov/library/collection/p-03555.

How do the CLTS Program and Medicaid health care programs work together?

Medicaid, the CLTS Program, and other insurance work together to cover your child's health care and support needs. All children in the CLTS Program must have Medicaid coverage. They can also have private insurance.



Medicaid and private health insurance cover your child’s health care services. However, your child may need additional support to live fully in their community that Medicaid and other insurance do not cover. The CLTS Program covers these additional supports and services. All of your child’s services—services covered by Medicaid, private insurance, or the CLTS Program—are listed on your child’s individual service plan. You can learn more in the Welcome to the Children’s Long-Term Support Waiver Program packet at dhs.wi.gov/library/collection/p-03010.

There could be costs for your child’s Medicaid coverage. These costs are separate from costs you may have for the CLTS Program.

Examples of services covered by Medicaid health care programs:

- Lab and x-ray services
- Dental services
- Home health services
- Medications
- Personal care services
- Podiatry services
- Physical and occupational therapy
- Speech, hearing, and language disorder services
- Substance abuse services
- Transportation for medical care

To learn more about the services covered by Medicaid and the CLTS Program, see the Medicaid and Children’s Services Program Benefits Overview dhs.wi.gov/library/collection/p-02996.

Options when Medicaid doesn't cover a service your child needs

HealthCheck Other Services

If your child is under 21 and needs a service Medicaid typically doesn't cover, you may be able to use a Medicaid benefit called HealthCheck Other Services. The service must be:

- Able to be covered according to federal Medicaid law.
- Deemed medically necessary.

Your doctor will write a prescription for the service or product your child needs.

Resources

Medicaid and Children's Services Program Benefits Overview

dhs.wi.gov/library/collection/p-02996

Information about which services are covered by Medicaid and the CLTS Program.

Welcome to the Children's Long-Term Support Waiver Program

dhs.wi.gov/library/collection/p-03010

Overview of how your CLTS Program services and health care coverage work together.

ForwardHealth homepage

dhs.wi.gov/forwardhealth

From this webpage, explore the Medicaid programs in Wisconsin.

ForwardHealth Health care renewals

dhs.wi.gov/forwardhealth/renewals.htm

This DHS webpage has information about the Medicaid renewal process, including when and how to renew.

ForwardHealth Enrollment and Benefits Handbook

dhs.wi.gov/library/collection/P-00079

An extensive handbook with detailed information about Wisconsin Medicaid programs.

HealthCheck and HealthCheck Other Services

dhs.wi.gov/forwardhealth/healthcheck.htm

This webpage provides information about HealthCheck and Health Check Other Services and how they can help your child.

Section 11: Health and Safety

The CLTS Program helps your child stay safe and healthy by:

- Preventing risks.
- Identifying and responding to risks that have already happened.

Preventing risk

The CLTS Program helps limit preventable risk to your child's health and safety by:

- Offering supports and services that promote health and safety and address risk factors.
- Working together with your child's service providers.
- Providing information about having an annual HealthCheck visit with a primary health care provider.
- Preventing the use of restraints.
- Making backup plans during service planning when needed.

Planning and starting supports and services

The CLTS Program uses a team approach to help you plan supports and services and make decisions to help your child meet their goals. Working as a team provides better outcomes for your child and family. One of the things your team will focus on is keeping your child safe and healthy.

Your team includes a support and service coordinator (SSC). SSCs help your child get the supports and services they need to help them stay healthy, safe, and a part of their homes and communities. Your SSC is your family's main contact in the CLTS Program. They are employed by your local county CLTS Program or by an agency who works with your county.

When you are working with your team to create your child's individual service plan (ISP), the plan will include supports and services that promote your child's health and safety and address any risk factors.

Your SSC will help you choose options for supports and services that:

- Help your child learn new skills.
- Create a safe living space.
- Keep your child safe during transportation.
- Manage your child's medical condition.
- Provide response right away if there is an emergency.

Working with all your child's providers

Working together with all your child's providers supports your child's health and safety.

When these work together, the team can:

- Improve your child's connection with their community.
- Access additional supports and services.
- Help your child achieve their goals.

Your SSC will help your child and family build a support network. They connect you with helpful resources and help resources work together.

Preventing illness with an annual HealthCheck primary health care appointment

Your child's HealthCheck visit(s) with their primary health care provider is an important step for good health. It's also important for coordinating their CLTS Program services and Medicaid health care benefits. Your child is automatically eligible for this free check-up because they have a full-benefit Medicaid health care program.

- HealthCheck is a preventive health check-up for children under the age of 21.
- The goal is to prevent illnesses and find and treat health issues early. This appointment is free for your child.

You can find more information about the HealthCheck benefit at dhs.wi.gov/forwardhealth/healthcheck.htm.



Preventing the use of restraints

Children in the CLTS Program must always be treated with respect regardless of complex behavioral needs.

Positive behavioral support planning

Positive behavioral supports are used when a child's behavior becomes a risk to themselves or other people.

Positive behavioral supports:

- Try to understand the "why" of the behavior.
- Keep the dignity of your child.
- Focus on your child's needs.
- Empower your child.
- Allow choices.
- Prevent the challenging and dangerous behavior from happening again.



You and your team can create a behavior support plan to describe the things your family can do to support your child if their behavior puts themselves or others at risk. A behavior support plan is a written document and may be as simple as an after-school routine or a more complex, full plan addressing a broader range of situations where the child and family could use positive behavioral supports. Not all children who have a disability need a behavior support plan. But when needed, behavior support plans can help to give parents and caregivers important tools.

For children with complex behavioral needs, a full behavior support plan may be needed. The support planning process should involve your child's entire team and include:

- Medical evaluation to rule out physical or medical concerns.
- Deciding which factors are related to the behavior.
- Identifying the reasons or functions for the behavior (the "why" of the behavior).
- Identifying how to prevent, deescalate, and respond to the behavior.
- Plan to develop other coping skills.

The behavior support plan is unique to your child and provides an easy-to-follow plan for the people and providers who support your child:

- Defines behavior of concern.
- Describes prevention strategies.
- Describes de-escalation strategies.
- Describes response strategies.

Restrictive measures

In the very rare case that a restrictive measure is necessary for safety, it should be the last method used. Restrictive measures should only be used after all other strategies have been tried and are found to not stop the dangerous behavior.

Restrictive measures can mean any item, action, or procedure that does any of the following:

- Limits a child's movement.
- Limits their access to other people.
- Limits their access to other locations or activities.
- Restricts their rights.

To protect children's health and safety, the CLTS Program has rules and processes about restrictive measures. Restrictive measures rules apply to any items, supports and services the program pays for, no matter who uses the restrictive measure. This includes not only CLTS Program providers, but also unpaid caregivers using items, services, or supports with a restrictive component that they have asked the CLTS Program to pay for.



There are five types of restrictive measures, but only two can be approved in the CLTS Program:

- ✓ Mechanical restraints
- ✓ Protective equipment

- ✗ Manual restraints
- ✗ Isolation
- ✗ Seclusion

Mechanical restraints and protective equipment are the only types of restrictive measures that can be approved in the CLTS Program. The CLTS Program **never allows** seclusion and isolation, even in emergency situations. Manual restraints are never approved for planned use but can be used in emergency situations.

The support and service coordinator submits the request for use of mechanical restraints or protective equipment to the Wisconsin Department of Health Services (DHS). DHS must approve the use of mechanical restraints and protective equipment.

With approval, any use of mechanical restraints or protective equipment is monitored to make sure:

- The child is protected from harm.
- It's not used when less restrictive supports are working.

Mechanical Restraints

Mechanical restraints may help prevent injuries by limiting the movement of a specific part of the child's body. They can be approved for certain uses. Mechanical restraints are devices that:

- Restrict or prevent voluntary movement.
- Cannot be easily removed by the child.
- Are above and beyond typical safety measures used for children the same age.

Mechanical restraints include devices that are applied to any part of the child's body. An example of mechanical restraints are arm or elbow immobilizers.

Protective Equipment

Protective equipment may help prevent injuries by limiting access to a specific part of the child's body. They can be approved for certain uses and are devices that:

- Do not restrict movement.
- Limit access to one's body.
- Are applied to any part of a child's body.
- Help prevent physical harm that may result from their behavior.

Examples of protective equipment:

- Specialized clothing
- Soft or hard sided helmets
- Mitts or gloves

Manual restraints

Manual restraints involve one or more people holding the limbs or other parts of the body of the child to restrict or prevent their movement or to make them move.

This includes:

- Physical holds
- Escorts – someone physically moving the child

Manual restraints are **not allowed except** in emergencies that meet **all three** criteria:

- The child's behavior could get them or someone else hurt very badly right away.
- The measure used is the **least restrictive** approach possible.
- The manual restraint is used for the **shortest time possible**.

Manual restraints are never approved for planned use in the CLTS Program but can be used in emergency situations.

Isolation

Isolation is never allowed.

Isolation is:

- Being separated from others against their will.
- Directed by staff.
- Based on behavior.

Isolation is **not**:

- Separation to prevent the spread of contagious diseases.
- Cool-down if:
 - It is in an unlocked room.
 - If it is voluntary.
 - There are no bad consequences if the child refuses to go into the room or chooses to leave the room.



Seclusion

Seclusion is never allowed. Seclusion is:

- Being separated from others against the child's will.
- A form of isolation with locked doors.

Backup planning

A backup plan is a way to protect your child's health and safety when something unexpected happens. The plan outlines the steps to ensure your child stays healthy and safe when their usual supports, services, or resources change. You might use the backup plan when:

- Providers or people who support your child can't do their usual supports, such as a direct care professional missing a scheduled appointment.
- A child's family member who provides support becomes ill and is unable to provide supervision and care.
- There is a natural disaster that disrupts usual routines.

You, your child, and the team will talk about any needed backup plans together.

Identifying and responding to risks that have already happened

In addition to steps to help prevent risk, the CLTS Program also has rules and processes to:

- Spot risks.
- Respond to and stop the risk.
- Keep it from happening again.

Your SSC helps spot risks to your child's health and safety. They have special training for this.

Abuse or neglect

Your SSC must report abuse or neglect involving the child to law enforcement or child protective services (CPS). This is called mandated reporting. Your SSC will report child abuse or child neglect if they suspect any of the following:

- Your child has been abused or neglected.
- Your child has been threatened with abuse or neglect.
- Abuse or neglect may occur.

Incident reporting

Another way the CLTS Program responds to events or situations that risk your child's health and safety is through incident reporting.

What is an incident?

An incident is an event or situation that risks harm to the physical health, mental health, safety, or well-being of a child. All unapproved restrictive measures, including manual restraint, must be reported to your SSC.

An incident is an event that:

- Has happened.
- Is suspected, or thought, to have happened.
- Is threatened to happen.

Examples of incidents include:

- The child has been or is suspected of being abused, neglected, or exploited.
- The child is physically restrained by a CLTS Program provider.
- The child is suicidal and is admitted to a hospital.
- The child is given the wrong medicine and is admitted to the hospital.
- The child has contact with law enforcement.

What if it's an emergency?

Call 911 right away if your child is at risk of harm and needs help.

Why should we report incidents?

Your SSC can help your family make sure you are getting the supports and services needed to help your child stay safe.

Who should we call and when?

Call your SSC as soon as possible. Reporting an incident as soon as possible helps your child and family receive the supports and services needed to help keep the child safe.

If you're not sure if an incident needs to be reported, ask your SSC. All CLTS Program providers must report incidents.

What happens next?

Your SSC will ask your child and family about what has happened or may have happened. They will help you explore ways to support your child and prevent future incidents. It may also be a helpful time to review your child's supports and services.

Your SSC will inform the Wisconsin Department of Health Services (DHS) about the incident and what steps are being taken to protect your child. DHS will follow up with the county and offer assistance, if necessary. In addition, DHS continues to monitor and look at trends in incident reports.

Resources

Incident Reporting

dhs.wi.gov/library/collection/P-00069A

Includes more information about incident reporting.

HealthCheck webpage

dhs.wi.gov/forwardhealth/healthcheck.htm

Find details about your child's recommended HealthCheck medical appointment.

Section 12: Transition Planning

Planning for your child's transition out of the CLTS Program is an important part of service planning. Transition planning is the planning and preparation that takes place leading up to the switch from the CLTS Program to other programs, supports, and services. The goal of transition planning is to ensure your child is supported when they leave the CLTS Program and is prepared for the next steps in life.

All CLTS Program participants will have a transition plan. Some examples of why a child will transition out of the CLTS Program:

- Your child reached the age of 18 and is eligible to transition to a different program that serves adults. This is called adult long-term care.
- Your child reached the age of 22 and must transition out of the CLTS Program because this is the maximum age limit for the CLTS Program.
- You and your child voluntarily decide that the CLTS Program is no longer needed.
- Your child no longer meets the eligibility requirements for the CLTS Program. See Section 9: Eligibility and Recertification for information on eligibility requirements.

Moving to adult long-term care

For children transitioning to adult long-term care programs, the support and service coordinator (SSC) and adult long-term care programs will work together with the young adult and family (where appropriate). Together, you will coordinate your child's move to programs for adults with long-term care needs.

When should transition planning begin?

Transition planning and discussion can start at any time—it is never too early to start. Transitioning to adulthood and independence is an ongoing process and a focus for your child throughout their lives, but it is especially important from age 14 on.

Once your child turns 14 years old, your SSC will start talking with you, your child, and whoever is a part of your team about transition planning. This may seem like an early age to start considering adult supports and services, but schools also start talking to children and families about their post-school plans at this age.

Starting to plan when your child is 14 means that schools and the CLTS Program can work together to coordinate services and plan for what happens after high school. That could be

helping with living alone (or alone with supports in place), getting a job, or going to college, a technical school, or into a trade.

Transition planning with your SSC

Your SSC will help you and your child with the important questions and decisions you need to make to help ensure a successful transition out of the CLTS Program. You and your child will need to consider different parts of transition planning such as:

- Living independently
- Moving to adult health care providers
- Identifying educational and career goals
- Getting health insurance
- Assuring any needed guardianship and legal authority

Living independently

You, your child, and the rest of your team will plan services to help your child be independent in activities like bathing, grooming, dressing, and toileting, as well as things like money management and meal preparation. Your SSC will work with your county's aging and disability resource center (ADRC) when your child is 17 ½ years old to collect and share information about adult long-term care options.

Moving to adult health care providers

Your team will help you and your child think through who they want to be a part of their health care team in the future.

Educational and career goals

Your team will work with your child's school for transition planning. The child's individualized education plan (IEP) will need to be updated to include changes and action steps for transitioning to adulthood. For help planning for educational and job goals, work with your local Division of Vocational Rehabilitation (DVR).

Health insurance

Your SSC will refer your child to the Wisconsin Department of Health Services Disability Determination Bureau (DDB) at 17 ½ years old to obtain a disability determination as an adult. This determination is necessary for some adult long-term care programs. You will need to discuss disability status for the transition to adult supports and services, as well as eligibility for a Medicaid program for adults.

Legal considerations

As part of transition planning, your team will help you and your child make decisions about your child's legal authority as an adult. Your SSC will help your child and family think through your options. In Wisconsin, anyone over the age of 18 is legally an adult and has the right to:

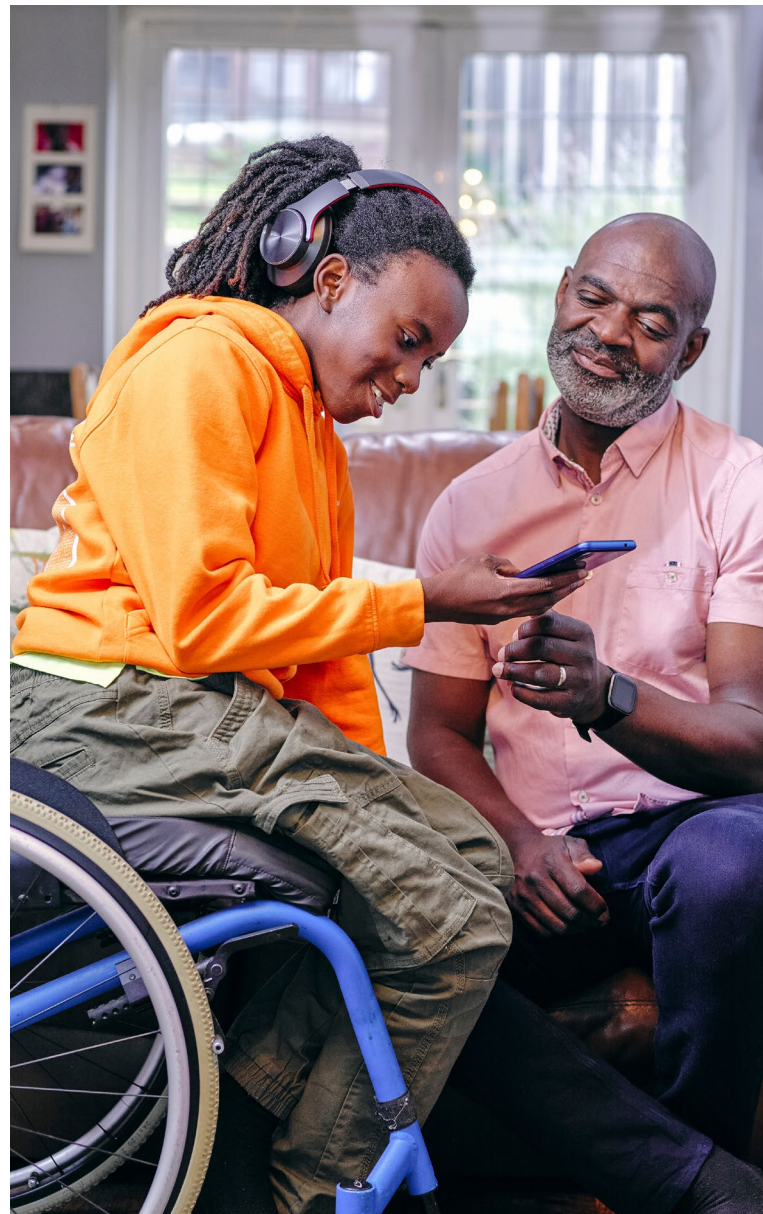
- Manage their own finances.
- Choose where to live.
- Consent to medical treatment.
- Vote.
- Make contracts.
- Marry.
- Use their legal rights as an adult.

These rights do not change because a person has a disability. When a person isn't able to do some or all of these things, they have options. It is important that families start early and learn about the full range of what might be possible.

Young adults who need assistance with legal decisions as they transition to adulthood have different options. Two possible options are:

- **Supported decision making** – Young adults rely on friends, family members, and professionals to help them understand situations and choices they face so they can make their own decisions without the need for legal guardianship. It is a new approach to help people make decisions without long-term legal limits on their rights.

- **Guardianship** – A legal process where a court decides if a person lacks the capacity to make decisions for themselves and there are no less restrictive alternatives. Wisconsin has full guardianship or partial guardianship arrangements. The guardian has legal decision-making power for the person's best interest, which can include where the person lives, their medical decisions, and whether they can get married or enter into contracts.



Transition begins at 17 years and 9 months

When your child turns 17 years and 9 months old, their transition planning and discussions will increase. It's important to work with your SSC during transition and fill out necessary forms and documents.

At this time, your SSC will also take the following transition action steps:

- Provide guidance and forms for supportive decision making—if you choose this option.
- Provide guidance and forms for guardianship—if you choose this option.
- Talk with the adult long-term care program that your child will join about any high risk or vulnerabilities your child may have.
- Refer your child to your local ADRC for options counseling.

Transition to adult long-term care program at age 18

Moving out of the CLTS Program is most successful with good planning.

If your 18-year-old child is eligible, they must enroll in a new adult long-term care program right away. To make the transition to adult long-term care services, you and your child should:

- Be an active part of the transition and communicate with your SSC and the ADRC staff.
- Act on all referrals from your SSC to adult resources.
- Compare supports and services between the CLTS Program and adult long-term care services programs, with the help of your SSC and ADRC staff.
- Ask lots of questions. The more answers you get, the more confident you will feel about moving into adult supports and services.
- Talk about timelines for the transition activities to make sure there are no breaks in services.
- Ask for help if you would like more information or supports.

Your child must stay in contact with your SSC and take part in service planning and activities to verify program eligibility. If your child is eligible but not completing responsibilities to move to an adult program, they could be disenrolled. It is very important to make sure you and your child fill out documents and take an active part in this transition process.

Adult long-term care options

If your child meets the rules and requirements for adult long-term care services, your county's ADRC can help you understand the available adult programs. You can choose from:

- **IRIS (Include, Respect, I Self-Direct)**

IRIS is a self-directed program for adults with disabilities and older people in Wisconsin who need assistance with activities of daily life in order to stay in the community. When someone joins IRIS, a budget is made just for them, based on their individual long-term care needs and goals. Using that budget, the IRIS participant works with a consultant to will creates a support and service plan to meet their needs.

- **Family Care**

Family Care is a Medicaid long-term care program for older adults and adults with disabilities. Family Care provides long-term care services with a goal to help members get the services they need to live in a home setting whenever possible.

- **Family Care Partnership**

Family Care Partnership is a Medicaid program that helps older adults and adults with disabilities. It mixes health and long-term support services in home and community settings.

Options for young adults aged 18-21 who are not eligible for adult long-term care

The CLTS Program provides services to young adults through age 22 who are not eligible for adult long-term care programs but who are still eligible for the CLTS Program.

Even though your child may still be eligible for the CLTS Program, you should continue to work with your SSC to transition to other programs that can support your child when they leave CLTS, like adult mental health programs or county-specific programs.

Transition planning summary

With good planning, your child can successfully transition out of the CLTS program and into independence and adulthood. Start your planning early and work together with your CLTS program team.



Your SSC will help you and your child with the important questions and decisions you need to make to help ensure a successful transition. During transition planning, your SSC must:

- Discuss supportive decision making, guardianship and other options. Your SSC will get you the correct forms, depending on what option you choose.
- Refer the participant to an ADRC to receive an Adult Long-Term Care Functional Screen. This is like the Children’s Functional Screen that your child had to have for eligibility in the CLTS Program, but it is for adult services.
- Share documents with the adult long-term care program if your child moves to adult long-term care. For example,
 - Functional screen
 - Individual service plan assessment
 - Diagnoses
 - Crisis emergency plans
 - Behavior support plan (if your child has one)
 - Approved restricted measures application
- Coordinate and communicate with your county’s ADRC about roles and responsibilities to help you with the transition process.
- Refer your child to the DHS Disability Determination Bureau at 17 years and 9 months for a disability determination as an adult.
- Share information with the adult long-term care system about your child’s high risk or vulnerability.
- Keep your family up to date on plans and decisions around transitions.

Resources

Wisconsin Youth Health Transition Project

healthtransitionwi.org

The goal of this initiative out of the University Center for Excellence in Developmental Disabilities at the University of Wisconsin-Madison Waisman Center is to make health care transition easier by developing and sharing resources.

Integrated Transition Planning

integratedtransition.waisman.wisc.edu

The integrated transition project, also out of the University Center for Excellence in Developmental Disabilities at the University of Wisconsin-Madison Waisman Center, brings together self-advocates, family members, and people who work in education, employment, and health care to improve and simplify the transition planning process.

Family Voices

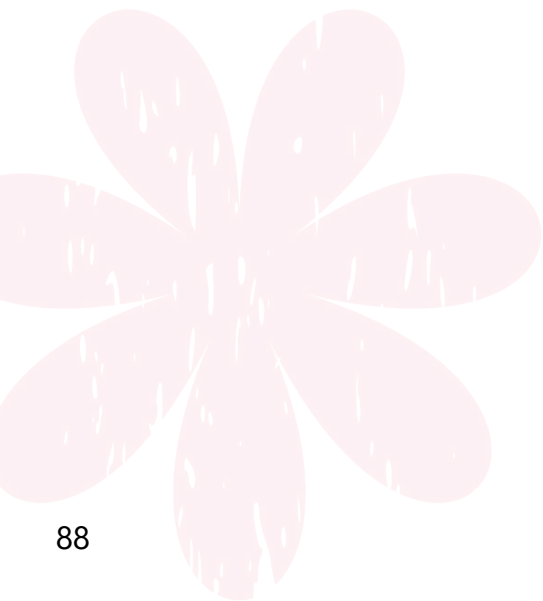
familyvoiceswi.org/resource-library/supported-decision-making-for-transition-age-youth

Family Voices of Wisconsin is an organization that helps families with helpful information about guardianship and supported decision making.

Wisconsin Board for People with Developmental Disabilities Supporting Individuals to Live Full Lives Toolkit

https://wi-bpdd.org/wp-content/uploads/2024/01/SDM_toolkit_01262024.pdf

This toolkit provides information about supported decision-making, as well as other alternatives to consider.



Appendix A: Terms and Acronyms

Here is a list of acronyms that you may come across in the CLTS Program. We try to limit the use of acronyms, but some terms are used so often that the acronyms are practical and helpful.

Acronym	Definition
ADRC	aging and disability resource center ADRCs operate at the county level to offer Wisconsinites objective information and assistance about resources that are available to help adults with disabilities and older people. They can assist helping children transition into one of the state's adult long-term care programs. Visit findmyadrc.com .
BCS	Bureau of Children's Services BCS is part of the Division of Medicaid Services inside the Wisconsin Department of Health Services. It implements statewide policy for children with developmental disabilities, physical disabilities, and developmental delays.
CCOP	Children's Community Options Program CCOP provides services for children under 22 with severe physical, mental, or emotional disability. Visit dhs.wi.gov/ccop/index.htm .
CLTS	Children's Long-Term Support Program CLTS Program (dhs.wi.gov/clts/index.htm) helps children with disabilities and their families through supports and services that help children grow and live their best lives.
CPS	Child Protective Services CPS helps children who have been or are at risk of being abused, neglected, or exploited.
CWA	county waiver agency CWAs are responsible for implementing the CLTS Program in Wisconsin for the people in their county. They follow the procedures and guidelines created by the Wisconsin Department of Health Services.

Acronym	Definition
DDB	<p>Disability Determination Bureau</p> <p>DDB is part of the Division of Medicaid Services inside the Wisconsin Department of Health Services. It is responsible for determining whether people meet the disability definitions that are required to qualify for Social Security Administration disability benefit programs and certain benefit programs offered by the State of Wisconsin.</p>
DHA	<p>Division of Hearings and Appeals</p> <p>DHA is part of the Wisconsin Department of Administration. It conducts fair hearings for appeals in the CLTS Program and other state benefit programs. Go to doa.wi.gov/RequestAHearing for more information.</p>
DHS	<p>Wisconsin Department of Health Services</p> <p>DHS (dhs.wi.gov) is committed to protecting and promoting the health and safety of the people of Wisconsin, making sure everyone can live their best life. It is the home to several divisions including the Division of Care and Treatment Services, the Division of Medicaid Services, and the Division of Public Health.</p>
DVR	<p>Division of Vocational Rehabilitation</p> <p>DVR (dwd.wi.gov/dvr/) is part of the Wisconsin Department of Workforce Development. It works to assist people with disabilities in gaining employment.</p>
FMS	<p>financial management services</p> <p>FMS help families manage the funding for CLTS Program supports and services. They are required when families want to use a family-hired provider who neither owns, nor is employed by, an agency. More information on FMS is available in Section 5 under the Management and Coordination heading.</p>
HCBW Medicaid	<p>home and community-based (services) waiver Medicaid</p> <p>HCBW is a kind of full-benefit Medicaid that many children in CLTS are in enrolled. A child must have a full-benefit Medicaid program in order to be a part of CLTS.</p>

Acronym	Definition
IEP	<p>individualized education plan</p> <p>An IEP is a written statement for a student with a disability that is developed, reviewed, and revised by a team of people, including the student’s family, that outlines an educational plan for the student.</p>
ISP	<p>individual service plan</p> <p>An ISP is a living document that details and supports participation in the CLTS Program. It includes a summary of the child’s supports and services and can be updated as their goals and needs change.</p>
PPL	<p>parental payment liability</p> <p>PPL, also referred to as just parental payment, is when families sometimes have to pay part of the costs for CLTS services themselves. See Section 7 of this handbook for more information about parental payments.</p>
SSC	<p>support and service coordinator</p> <p>SSCs are points of contact for families in the CLTS program and are assigned by the family’s county waiver agency. See Section 2 of this handbook for more detailed information about the role of SSCs.</p>
SSI	<p>Supplemental Security Income</p> <p>SSI (dhs.wi.gov/ssi/index.htm) is a federal income support program for people 65 and older or people who are blind or disabled.</p>
WIC	<p>Women, Infants, and Children Supplemental Nutrition Program</p> <p>WIC (dhs.wi.gov/wic/index.htm) is a program administered at the county level that improves the health of low-income, nutritionally at-risk pregnant and nursing women, infants, and children under age five. It provides through nutrition education and vouchers for the purchase of certain foods.</p>
W-2	<p>Wisconsin Works</p> <p>Wisconsin Works (dcf.wi.gov/w2/parents/w2) is a program run by the Wisconsin Department of Children and Families that provides cash assistance while giving people real work experience and training, access to education, job interview preparation, and job matching.</p>

Appendix B: Important Contacts

Use this section to record important names, contact information, and dates. If you need additional copies, you can print this page from the online version.

Support and service coordinator

Name _____

Phone _____

Email _____

Other information _____



CLTS Program county lead

You can find your local CLTS Program contact information at dhs.wi.gov/clts/contact.htm.

Name _____

Phone _____

Email _____

Other information _____

Upcoming meetings

Date	Time	Where	Purpose
Date	Time	Where	Purpose
Date	Time	Where	Purpose
Date	Time	Where	Purpose
Date	Time	Where	Purpose
Date	Time	Where	Purpose
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