

## OPEN MEETING MINUTES

Instructions: [F-01922A](#)

|   |                            |                           |   |
|---|----------------------------|---------------------------|---|
| Name of Governmental Body:<br>Wisconsin Long Term Care Advisory Council (LTCAC) |                            |                           | Attending: Audra Martine, Audrey Nelson, Beth Swedeen, Christine Witt, Cindy Bentley, Darci Knapp, Dennise Lavrenz, Denise Pommer, Elsa Diaz Boutista, Janet Zander, John Sauer, Kenneth Munson, LaVerne Jaros, Lea Kitz, Maureen Ryan, Sam Wilson, Shanna Jensen, Stacy Ellingen, Stephanie Birmingham |
| Date: 11/9/2021   | Time Started:<br>9:30 a.m. | Time Ended:<br>12:45 p.m. |   |
| Location: Virtual Zoom Meeting  |                            |                           | Presiding Officer: Heather Bruemmer   |
| <b>Minutes</b>  |                            |                           |   |

**Members absent:** none

**Others present:** Betsy Genz, Brenda Bauer, Carrie Molke, Curtis Cunningham, Kevin Coughlin, Kiva Graves, Krista Willing, Suzanne Ziehr

### Meeting Call to Order, presented by Heather Bruemmer

- Went over meeting processes
- Introductions of present council members and Department of Health Services (DHS) staff were made
- Approval of September 2021 Meeting Minutes
  - Motion to approve by Dennise Lavrenz. Seconded by Kenneth Munson. Unanimously approved

### Department of Medicaid Services (DMS) Updates, presented by Curtis Cunningham

- Geographic Service Region (GSR) Project Update
  - Secretary approval of council recommendations
  - Proceeding with new 7 regions
    - This will roll out over many years, starting in 2023
- Non-Emergency Medical Transportation (NEMT) services have transitioned from MTM to Veyo
- Home and Community Based Settings (HCBS)
  - Working on obtaining CMS approval of Statewide Transition Plan (STP) and Children's Long Term Support (CLTS) waiver
  - Non-residential will have a final report submitted to CMS around March 17, 2023
    - This will be shared with council members also
- American Rescue Plan Act (ARPA)
  - State anticipates receiving \$350 Million due to enhanced federal match
  - Krista will talk about 5% rate increase
- Build back better act
  - Will impact HCBS and provide additional funding
- Electronic Visit Verification (EVV) Hard launch
  - Was scheduled for January 1, 2022
  - Hard launch will be delayed, announcements will go out today about the delay
  - State will be establishing a new hard launch date
- Betsy Genz will be retiring from State Service
- Rate Bands update
  - Working with the actuary on what that would take
- **Council Suggestion:**
  - Future agenda topic - state workforce crisis and COVID-19 mandate and vaccine boosters

### **American Rescue Plan Act (ARPA) – 5% Rate Increase, presented by Krista Willing**

- Feds allow us to use ARPA funding to have additional funds for HCBS expenses for a period of time
  - This will begin January 1, 2022
- Will release which services it applies to over the next couple of weeks
- Still need to receive approval by JFC to have this increase
- Will let council know what is sent and when to JFC
- Funded completely with federal funds and additional funds until 2024
  - Anticipate questions from JFC on how to fund after 2024
- **Council Suggestions:**
  - Look at expanding Medicaid with these funds
  - Look at Usual and Customary to see what is being offered there is not equity in the state, there should be more transparent information for the IRIS participants on what they can provide

### **2022-2023 Charges Discussion, presented by Carrie Molke**

- Looking at condensing them down to be more manageable to tackle in 6 meetings/year
- Recapped the 5 current charges
- **Council Suggestions:**
  - Hard to meet virtually and get to action steps, think about sub-committees to prep activities to help go through this
  - Need subcommittees in off months to make a difference
    - Need to have interim meetings and the DHS staff to support them
  - Need to be aware of what our #1 issue is
  - Have informal discussion with Secretary at January meeting to discuss further and here her ideas before confirming what the next year's charges will be
- **Council Suggestions: Charge 1 – Long Path**
  - This should be integrated into all the charges, not a separate charge
  - Need to be vigilant about keeping it front and center as we work on current pressing issues. It may need its own charge or, at least, an ongoing agenda item where we reflect on path development and future planning.
  - This keeps us from getting bogged down in crisis spot
- **Council Suggestions: Charge 2 – Medicaid Long Term Care**
  - Focus on LTC quality, including trends/concerns
  - The Medicaid Funding Charge has not been fully achieved. I think we need continued attention on the last two goals
  - Focus on advice and guidance on quality access issues
  - Workforce is part of this
  - Include abuse and neglect prevention
  - Broaden this to Quality LTC - don't just focus on Medicaid
  - How do we sustain a n LTC system with changing demographics
  - Think about a new LTC financing system:
    - [https://research.upjohn.org/cgi/viewcontent.cgi?filename=5&article=1256&context=up\\_press&type=additional](https://research.upjohn.org/cgi/viewcontent.cgi?filename=5&article=1256&context=up_press&type=additional)
- **Council Suggestions: Charge 3 – Transportation**
  - If removed, need additional LTC Advisory Council involvement in NDAC, as well as designated DHS staff to participate in DOTs council.

- Access issues on geographical locations as well. Good points Leah!
- This is more of a connection/access charge - not just transportation, but access to broadband, etc.
- I agree with the recommendation to expand charge 3 to 'access'. That would allow us to put a larger focus on the ever increasing role that tech plays in LTC.
- **Council Suggestions: Charge 4 – Health Equity**
  - View the Health Equity charge as a lens through which all charges should be viewed
  - Identify barriers to access by different populations
  - To do this effectively, need to gain an understanding of the cultures to know better how to work with the different ethnicities
- **Council Suggestions: Charge 5 – Workforce**
  - This is included in other charges
  - Support keeping workforce needs as a charge as it will continue being a significant issue with this economy/market.
  - Workforce is a high priority issue, but our work should not be narrowed to that alone.
  - Workforce is a priority, but also would like equity as much of the state has a more immediate need for access.
  - Related to discussion of workforce, Survival Coalition released this 3-minute video of WI family caregivers last week for National Family Caregiver month.  
[https://www.youtube.com/watch?v=\\_3-pILaEqaU](https://www.youtube.com/watch?v=_3-pILaEqaU)

### Public Comment

- Heidi Sheire
  - Like how council was talking about transportation
  - Leave it in the budget so people have a better understanding
  - One on the panel was hard to understand because microphone was not working
- Jane Bushnell
  - Comment and concern about charges, specifically workforce
  - There is an OSHA mandate regarding vaccines and the CMS final rule coming out
  - There may be a stay on the OSHA rule
  - All pieces are intertwined
  - As a provider agency, there is going to be a lot of cost to this OSHA mandate
  - How do providers pay for testing workforce?
    - Only 25% of employees are vaccinated, could potentially lose 200 caregivers with the new requirements
  - Confusing with assisted living facilities, do you follow OSHA or CMS rules
  - Would be good to have council help providers out to avoid further crisis

### Department of Public Health Updates (DPH), presented by Carrie Molke

- New leadership in the Division of Public Health
  - New State Health Officer/Division Administrator- Paula Tran
  - Two new Assistant Division Administrators
    - Jonette Arms
      - Will manage and direct the Bureau of Aging and Disability Resources, Bureau of Communicable Diseases, Bureau of Community Health Promotion, and Bureau of Environmental and Occupational Health, beginning on November 22.
    - Anna Benton

- Will manage and direct the Office of Policy and Practice Alignment, Office of Health Informatics, Office of Preparedness and Emergency Healthcare, and the Bureau of Operations.
- Coalition to End Social Isolation and Loneliness
  - The five coalition groups continue to meet on a regular basis: Steering, Raising Awareness, Policy and Advocacy, Research, Access and Detection
  - Membership continues to expand; Over 150 people are members of the coalition and 72 people are actively participating in these workgroups.
  - Right now, the workgroups are developing their strategies; and how to measure the degree to which this work is having an impact on isolation and loneliness.
- State Health Assessment
  - The State Health Assessment (SHA) draft report is open for public input through Friday, November 19th.
    - Comment through the [State Health Assessment webpage](#), featuring the [full report](#) and a [short survey](#).
- Dementia
  - Held an All-Teams meeting on October 27th. Included members of the statewide steering committee and members of the four leadership teams (community team; facility team; crisis team; healthcare team).
  - Rather than hosting one statewide summit this next round, will be looking to get input from across the state- from leaders who will host local summits.
  - The National Alzheimer's Project Act - Alzheimer's Research, Care and Services committee
    - Dr. Cindy Carlsson is the chair of the committee;
    - Carrie is the chair of the LTSS sub-committee
    - The Committee's last meeting in October was focused around workforce.
- ADRC COVID-19 Vaccine Access Supplemental Funding
  - All ADRCs and tribal ADRCs agencies were invited to apply for funding under this grant.
    - A total of 10 ADRCs serving 21 counties and 2 tribes applied for and were awarded funding.
  - Eligible grant activities to support COVID-19 vaccine access for older adults, people with disabilities, and family caregivers
  - Grant Funding to Support a Community Health Worker Model in ADRCs that Serve Rural Communities
    - DHS has set aside \$240,000 from the CDC COVID-19 Health Disparities Grant to fund up to three ADRCs in implementing a community health worker (CHW) model in rural communities.
    - This project will extend through May 21, 2023.
    - ADRCs will be invited to apply for the funding through a competitive application process. This RFA has not yet been announced; details are currently being worked out, anticipate that application instructions will be available in coming weeks.
- Health Equity
  - The next meeting of the Governor's Health Equity Council will be held November 17 from 1-4 p.m.
  - The Zoom link and other meeting materials will be posted on the [DHS website](#) and [Wisconsin Public Meetings Notices page](#) this week.
  - Hosting listening sessions to gather feedback from members of the public to help inform their draft recommendations.
  - To receive notices about upcoming listening sessions, you can subscribe to the [email list](#).

- DHS was the winner of the 2021 Diversity Award for the creation of the Office of Health Equity and the Health Equity, Diversity and Inclusion (HEDI) Council by the State Council on Affirmative Action
- The Bureau of Environmental and Occupational Health's Climate and Health Program is collaborating with other state agencies (WI Economic Development Corporation (WEDC), Department of Natural Resources (DNR), and Department of Administration (DOA)) – to develop and promote the [Wisconsin Environmental Equity Tool](#) (WEET).
- Adult Protective Services (APS) Updates
  - The state APS conference was held in mid-October in a fully virtual format for the first time
  - The planning team is going forward with organizing for an in-person conference in late 2022.
  - The second round of supplementary federal funding for APS will be going out (to APS agencies) soon; these funds, from ARPA, will support a number of statewide initiatives (training, technology, and reporting system) as well as funds to support counties in providing direct services.
  - The DHS APS team is laying groundwork for the first State APS Plan, oriented around strengthening operations across the network.
    - Among the first steps is to get input into the needs of local APS teams, so a number of stakeholder outreach efforts will be launched in the next month or so.

#### **Council Business, presented by Heather Bruemmer**

- Next meeting January 11, 2022
- In person, fully virtual, or hybrid meetings in 2022
  - **Council Suggestions:**
    - Cannot make a decision until we see what' happening with COVID
    - Fine to continue virtual, allows people around the state to come and observe with more ease
    - More participants from public when done via Zoom
    - Hope virtual option continues after the pandemic
    - If we are still in high or very high COVID transmission levels, it is most equitable to stay online.
    - Hybrid preferred for 2022

#### **Adjourn**

- Motion to adjourn by Chris Witt. Motion seconded by John Sauer. Approved unanimously.

Prepared by: Suzanne Ziehr on 11/9/2021.

These minutes are in draft form. They will be presented for approval by the governmental body on: 1/11/2022

# 2022-2023 Long Term Care Advisory Council Charges

## **CHARGE 1: LONG PATH**

Planning and problem solving strategy looking ahead 10, 15, 25, and 100 years. Develop a collaborative and innovative strategic plan visualizing a future based on shared values and beliefs on what Wisconsin's long term care system will look like.

## **CHARGE 2: MEDICAID LONG TERM CARE**

Explore strategies to ensure Wisconsin's Long Term Care (LTC) programs focus on the whole person including: access; choice; high-quality; collaborative relationships; efficient and cost effective; with Wisconsin leading the nation in LTC delivery and services and supports.

- Provide advice on benefit definitions, reimbursement models, rates, and value based purchasing strategies.
- Provide advice and guidance on integrating or aligning long term care services with behavioral health services and acute and primary care services, including services provided through Medicare.
- Provide advice and guidance on the spending of American Rescue Plan (ARPA) Act of 2021 Section 9817 funds in regards to enhancing and improving Medicaid home and community based services.
- Provide advice and guidance on access to and quality in long term care programs.

## **CHARGE 3: HEALTH EQUITY**

Develop strategies so everyone in Wisconsin's Long Term Care programs has a fair and just opportunity to be as healthy as possible. Explore strategies to remove obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

- Provide advice and guidance on a cultural competency toolkit.
- Provide advice and guidance on how to ensure access to technology is equitable.
- Explore how the council can work with Division of Public Health (DPH) related to Wisconsin State Health Assessment.

## **CHARGE 4: WORKFORCE**

Develop recommendations to support and strengthen the direct care workforce, both paid and unpaid, to ensure access to care, improve the quality of caregiving, and meet the growing demand for long-term care services in Wisconsin, by:

- Studying the recommendations of the Governor's Task Force on Caregiving, providing advice and guidance on items that are being implemented and prioritizing recommendations for future consideration.
- Providing advice and guidance on proposals that relate to the direct care workforce and family/informal caregiving within the American Rescue Plan (ARPA) Act of 2021 Section 9817 to enhance, expand, or strengthen HCBS under the Medicaid program in Wisconsin.

## **Independent Living Pilot**

A Medicaid Home and Community Based Services Diversion Initiative

Long Term Care Council

January 11, 2022

Design Statement: Under this initiative the Department will utilize ARPA HCBS funding to develop an independent living pilot. The intent of this initiative would be to divert individuals that would eventually be eligible for Medicaid home and community based services and delay entry into publically funded long term care.

This pilot would be evaluated as a proof of concept to determine efficacy and cost effectiveness to determine adopting as part of the Medicaid program. Medicaid federal matching funds along with savings from diversions would demonstrate adding this program is a cost effective addition to the Medicaid program.

- 1) Eligibility: Who should be eligible
  - a. Financial Eligibility
    - i. Income
    - ii. Assets
  - b. Non-financial Eligibility
    - i. Institutional Level of Care
    - ii. Age
    - iii. Disability
    - iv. Other?
- 2) Benefits- What services should be provided to divert individuals into Medicaid Home and Community Based Services
  - a. Benefits
    - i. Care giver supports
  - b. Caps
    - i. Financial
    - ii. Benefits
  - c. Care management/ Plan Development
    - i.
- 3) Administration
  - a. Eligibility Processing
  - b. Care management
  - c. Benefits Provider
  - d. Fiscal Agent
- 4) Other Considerations