

**HealthWatch Meeting
December 10, 2008**

TOPIC	DISCUSSION
<p>Approval of Minutes</p>	<p>Introductions Approval of November minutes-no changes</p> <p>Announcements: Give Kids A Smile Program-free dental exams for children ages 3-16 at Marquette School of Dentistry Saturday, January 17, 2009-handout.</p> <p>Meeting of Pharmacists & Professionals on December 16th in this room next week to answer billing issues; please make pharmacists in your agency aware if this opportunity.</p>
<p>Agency of the Month: Milwaukee Brain Team Debra McNelis Early Childhood Outreach Specialist Wisconsin Council on Children & Families 555 W. Washington Ave. suite 200 Madison, WI 53703 ph# 414-315-2779 dmcnelis@wccf.org</p>	<ul style="list-style-type: none"> • Wisconsin Council of Children and Families-provides state-wide advocacy; I am a council representative. • Milwaukee Brain Team was founded in 2006 by a variety 21 agency affiliates. We try to promote scientific brain research to parents, professionals, educators, child care providers, new parents, child birth classes, legislators and the community. • My goal is to create awareness and understanding of early brain development. If people understand how the early years impact brain development we can get more policies and funding that relate to the needs of young children and their families. Due to some funding changes, only 25% of the Brain Team is my focus. I am more of a quality education advocate. <p>Services:</p> <ul style="list-style-type: none"> • Offer 2 hour trainings or early childhood liaisons to come to a site. • Identify umbrella organizations who reach early childhood professionals. • Send quarterly updates e-mails, newsletters, meetings/presentations. • Offer a parent-focused curriculum that is easy to use in multiple ways such as in support groups or trainings for professionals • Hold Family Nights to enhance families • Provide 1:1 education in a home visitation setting • Toolkits that can be found on the Wisconsin Council of Children and Families’ website @ www.wccf.org; on the “brain project tab” that can be used in a variety of ways such as a posting in a workplace or in a newsletter. • Marketing Campaign ideas: still working on getting website set up

	<p>BRAIN Awareness Week- March 16th</p> <p>Questions:</p> <ul style="list-style-type: none"> • Who is your target audience? Our problem is showing measurable outcomes. For example, the number of people we reach is done through surveys which we are no longer able to coordinate due to funding cuts. • Do you offer parenting classes? No, I can do 2 brain trainings each month on a variety of topics (i.e. brain basics, social emotional development, stress trauma, poverty, male vs. female brain development and “it does not stop at 3 years.” • BrainInsights- my own business, offers presentations privately and other materials • Are packets available for purchase? Yes, online @ www.braininsights.com, single packets are \$10, the set is \$24.95 • If Health Watch members have ideas for other agency affiliations or funding, please contact me!
AGENCY REPORTS	
EDS Report	None reported.
DHHS Report	None reported.
GAMP Report	None reported.
COALITION REPORTS	<p>Refer to handout</p> <p>Disability Rights Wisconsin: Family Care Update (Shirin Cabral) Handout: “Family Care Challenges on the Ground, Part I (part II not yet completed, booklet “Being a Full Partner” also passed around for review) Availability:</p> <ul style="list-style-type: none"> • Medicaid Waiver Program-for years we have dealt with eligibility issues (i.e. outpatient care). There is a great need for people who meet a certain functional level of criteria but cannot perform some activities of daily living and they need non-typical services (i.e. laundry, cleaning, medication management). Long-term care has been provided through traditional Medicaid waiver programs such as COP and CIP with the public government paying for long-term care; however, there is a 4-5 year waiting list. Family care has provided the same services without a waiting list-how can they do this? The answer is by making it a managed care program with no waiting lists. • In Milwaukee County, Family Care is only available for people over 60. There is a current proposal made to the state to serve people under 60 years of age who are currently being served by county disability. Currently, the Department on Aging administers Family Care to people over the age of 60. <p>Eligibility:</p> <ul style="list-style-type: none"> • In order to meet eligibility requirements, you need to meet the rules. There are different deductions

for regular Medicare, such as income levels can be much higher and there can be spend-downs (see handout pg 2 for financial eligibility details)

- In addition, for financial eligibility, you need to meet a certain functional eligibility level via a functional screening and the individual needs to pass at a nursing home level of care. Family Care is a way to prevent people from being warehoused in nursing homes, while providing services people need to remain in the community.
- There is a separation between the Department on Aging and the Disability Resource Center who processes Family Care applications and the CMO that actually administers services. The state requires a separation so folks do not get channels confused.

IRIS- a progressive idea of state funding that allows people to hire their own workers. They can still use a Medicare card for some services and may use their Medicaid card to get those types of services that you can get under Family Care. Where is IRIS money coming from? It is a waiver from State and Federal money. Call ph# 1-888-515-4747 to get an IRIS booklet or go to or www.wisconsin-iris.com.

Process/Appeals:

- Case goes from Family Care to the CMO (Department of Aging); the Department will subcontract with 23-24 agencies with CMU (case man units- i.e. Aurora Family Services, MCFI); the individual should be given the option of choosing from a list of providers but frequently people are just assigned.
- CMU is essentially the provider of care. If there is a special need within the network that cannot be provided, the CMU needs to go out of the network. CMO is the gatekeeper and may or may not allow this since it can be a cost issue. Out of network eligibility can be appealed through a grievance procedure-anything may be challenged such as cuts in services or outright denials and some appeals can go directly to a Fair Hearing. HFS 10 rules are great and very client-centered but they are not necessarily applied in that way.
- The Resource Center will send financial eligibility to ESS with a 30-day timeline for processing until the case is transferred to a CMO, benefits do go out and there is no retroactive pay.

Questions:

1. What are other partnerships? Community Care for the Elderly which combines home-based services with medical services, SSI is managed care/family care and is a smaller network of providers.
2. What does the Resource Center do? They are supposed to advise people about these programs (i.e. IRIS). Relative caregivers can join home health agencies to give care OR an individual can self-direct services.
3. Where is the entry point? The Resource Center at the Department of Aging can arrange for

	<p>an in-home assessment. For more information go to the State website and then to Family Care page or call the Department of Aging.</p> <ol style="list-style-type: none"> 4. What about Power of Attorney? P.O.A- individuals may complete a state form only if incapacitated. Another option is to see Lisa Foley at Legal Aid, her phone number is ph# 414-727-5300, Paula Lorant will also do P.O.A documents, ph# 414-727-5332. Individuals may also go to Legal Aid as a walk-in. The problem is often the P.O.A is never activated. Legal Aid has something you can self-activate that is modified under the law. Financial P.O.A is similar, the state form does not do it that way. Legal Aid and private attorneys can do this differently; 5. Risk Reduction Worksheets have certain liability issues-Question: What if the client does not sign? What happens? Possible denial of some services. 6. What are self-directed services? / Are services that a family member can join are services paid in real dollars or per diem? Pay is not supposed to be per diem but rather all services are considered. Refer clients to RAD (on website) to help them come up with a realistic budget, if Disability Rights becomes involved, we would often negotiate this. <p><u>Ongoing Issues and Action:</u></p> <ul style="list-style-type: none"> • Health Watch Wisconsin Conference/Milwaukee poster ideas- the conference is in February; Kari will resend postcards out again. If anyone has ideas, please e-mail Kari. • Quarterly training ideas for 2009: Hospital Training as a safety net; when should we have this training and do we want it separate from Health Watch meeting? Yes. • BadgerCare for Childless Adults-do not know when this is going to be rolled out. Possibly an answer will be had at the end of February when the Governor gives his budget address. GAMP enrollment has been very high. • Resource Guide-Kari will try to put together a resource guide, Community Advocates is still working on theirs for the uninsured, an alternative to free clinics if they do not qualify for a public health insurance program. You can advise them to try to become a member of a group such as the alumni of a school so that they may be eligible to buy into the group policy which often will have more reasonable rates than other non-employer insurances.
LEGISLATIVE UPDATES	<p>Sent as attachments via e-mail and as handouts during meeting: Wisconsin Legislature: Members and Contact Information Health Watch State Update SSI/SSA Q&A Family Care Challenges on the Ground, Part I</p>
Next Meeting:	Wednesday, January 14 from 9:30-11:30; at Aurora Family Services located at 3200 W. Highland