



of Wisconsin Disability Organizations

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2011-2013 Legislative Budget and Policy Priorities

IRIS PROGRAM (INCLUDE, RESPECT, I SELF-DIRECT)

Support adults with disabilities to live successfully in their communities with the services and supports of their choice.

Survival Recommendations:

- Allocate a sufficient level of DHS and contracted positions dedicated to IRIS central office operations to ensure that:
 - there is adequate oversight of the IRIS program and the IRIS subcontractors, including collection and analysis of relevant data on IRIS operations;
 - the state can engage in quality assurance and address patterns of problems in the program, and ensure transparency and accountability;
 - the state can get involved in a limited number of individual situations when state intervention is necessary to get things “unstuck”;
 - state staff can educate all the audiences who need to understand IRIS, and respond to all the myths and distortions re IRIS;
 - there is capability to plan for the future of the program, especially in light of faster than expected growth; and
 - the state can respond to the continuous demand for information and clarification from CMS.

(Note: DHS is currently developing a 2010-2012 IRIS work plan which will illustrate the broad scope of activity that will need to be carried out.)

- Increase the funding to provide a continuum of support, assistance in plan and service development, and oversight to ensure that every person/family who would like to enroll in IRIS can receive the variety and depth of support they need to experience the full benefit of IRIS:
 - enable IRIS participants to receive expert and knowledgeable support in the initial development of personal outcome based, cost-effective IRIS plans;
 - provide assistance to those individuals who require more robust support in the implementation of their IRIS plan, including working with providers of goods and services, and greater attention to health promotion, community inclusion, and risk management
 - raise the bar for IRIS Consultants re the level of education and experience required, increasing the pay scale and benefits package commensurately;
 - develop a pool of specialized expertise within the ICA and/or a pot of money to purchase that expertise when it is needed by individual IRIS participants.

- Create and fully fund an integrated data system for IRIS which:
 - is web-based;
 - streamlines administrative processes;
 - is “consumer friendly”;
 - ensures DHS’ ability to demonstrate compliance for CMS
 - provides DHS the necessary tools for managing the program; and
 - integrate the system between DHS and ICA to eliminate confusion and duplication.

- Develop and improve the accuracy of the rate setting methodology for the IRIS participants’ individual budgets.

Background: Based on current IRIS enrollment trends, it is reasonable to predict there will be approximately 4,300 people in IRIS as of 7/1/11, not including Dane and Rock Counties. In light of that, the current infrastructure to support IRIS (inside DHS and via DHS’ IRIS contractors) is clearly inadequate.

Depending on how you count the number of DHS and contracted staff assigned to IRIS central office operations, it is in the range of 4.0 FTE. This “team” is difficult to manage because it includes bits and pieces of the time of 12 people. Even at the current level of IRIS enrollment, this is inadequate.

During the initial IRIS implementation process, disability advocates vigorously protested the Department’s budgeting and staffing assumptions for the Independent Consultant Agency (ICA), i.e. the minimal education/experience requirements and the low pay scale for the independent consultants. Unfortunately the ICA was developed on a cost model based on those assumptions. Notwithstanding TMG’s efforts to provide appropriate training for new consultants, it is now clear that:

- IRIS works most efficiently for individuals who have their own or family/friends capacity to obtain support and services with minimal assistance;
- many individuals and families who have expressed interest in IRIS have been unable to get satisfactory or timely answers to basic questions from some consultants;
- there are a variety of needs for service coordination, information on available choices, and in-depth support that are currently either not within the scope of responsibility of the ICA (for example, selecting and working with potential providers of services and goods), or are difficult to effectively obtain through the current scope of work of the ICA and the education/experience requirements of IRIS Consultants (for example, obtaining home modifications and assistive technology; support to address issues with behavior; support to obtain employment or self-employment, transportation, to move out of an institution and for many other parts of a person’s IRIS plan).
- some individuals and families who are favorably predisposed towards IRIS have decided not to pursue it because they have concluded the support offered through IRIS is inadequate; and

- there is “too much paper” in IRIS – too many data systems, too many opportunities for data errors, and it is too time-consuming to access the data and too “unfriendly” for consumers trying to access their IRIS plan or budget online.

Ideas for Funding Sources

1. Analyze which functions and/or elements of the IRIS Program could be eligible for a higher level of federal matching funds.
2. Set an appropriate level of administrative funds based on the projected size of IRIS during the 2011-13 period.
3. Some IT improvements could be charged to the IT part of DHS budget.

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