



of Wisconsin Disability Organizations

101 East Wilson Street, Room 219, Madison, Wisconsin 53703
Voice: 608/266-7826 Fax: 608/267-3906

February 10, 2014

Hon. Kitty Rhoades
Secretary of Health Services
Wisconsin Department of Health Services
1 West Wilson Street
Madison, WI 53703

Dear Secretary Rhoades:

Thank you for the issuance of the favorable report to the Joint Finance Committee in December 2013 on the Family Care/IRIS long-term care system which included clear data on the cost-effectiveness of continued expansion. We were pleased to see the Department's objective analysis that quantifies the cost savings associated with the Family Care managed long-term care program model, and how the greater availability of supports will help delay the need for more intrusive and/or expensive services that are currently the only available options in the fifteen legacy waiver counties that do not yet have access to Family Care/IRIS.

As you know, the Survival Coalition of Wisconsin Disability Organizations continues to advocate for the statewide availability of Family Care/IRIS long-term supports for individuals with disabilities and older adults. Our position has consistently been that supports should be accessible to Wisconsin residents who need them, regardless of where they live, and that waiting to provide supports until an individual is in crisis is not an acceptable, cost-effective, or healthy system for individuals and taxpayers.

Despite the favorable findings in your December report, at the January 14th meeting of the Wisconsin Long Term Care Advisory Council Meeting DHS Staff described the obstacles to issuing a Request for Proposal (RFP) to the seven Northeast Counties who are "in the queue" and waiting to adopt Family Care/IRIS. Staff indicated DHS would not take the first step of issuing an RFP without some pre-assurance from the Joint Finance Committee that contracts presented to it would be approved through the active review process. Family Care expansion, therefore, continues to be stalled and the number of waiting individuals and excess costs in legacy waiver counties continue to grow.

Since the Long Term Care Advisory Council Meeting, we have worked to gauge the political willingness to move forward to address the rising long-term care cost curve and the needs of people waiting for supports in the fifteen remaining counties. Specifically, Survival Coalition members and aging advocates met with Joint Finance Committee members throughout the weeks of January 20 and 27th.

Although some Joint Finance Committee members have some questions following the issuance of the December report, a majority of members indicated they were unclear as to why the state would not move forward with the plan for expansion into new counties. They were satisfied with the outcome of the report and most important, many members expressed the sentiment that it was unfair to have people waiting indefinitely for services that are immediately available to their neighbors in adjoining counties. These legislators also said they agreed with the logic of continuing to move toward a single statewide long-term support system and questioned the waste of administrative resources and duplication in a dual system that the report showed was not cost-effective in the long-run.

While our meetings clearly do not indicate final votes by the Joint Finance Committee, we pledge to work with you to strengthen legislator support and strongly urge you to take the next steps that are within your authority by issuing an RFP for the seven northeast counties as soon as possible. We note that the statutory language requiring Joint Finance active review of any contracts proposing to expand geographic coverage by Family Care imposes no limits on the Department's authority to issue RFPs or the process of selecting MCOs to cover new counties. In other words, the assurances DHS staff has said it requires from the legislature are not statutory preconditions to the Department completing its work. Having said that, we believe our informal survey of the Joint Finance membership indicates that any contracts presented to it for review would be favorably received, especially since the DHS report so strongly establishes the economy of expansion.

Finally, we believe DHS must be concerned that the Center for Medicare and Medicaid Services will become intolerant of the non-expansion of the Family Care/IRIS system, which has stalled for nearly four years. Our Coalition members worked alongside administrations led by both political parties to create and launch Family Care/IRIS over the last decade. We believe in the original promise of the end to waiting lists. Yet, even if Family Care was extended to all remaining counties today, we would not see the end to waiting lists statewide until 2017. We question how long CMS will allow this stalling of the promise of statewide entitlement as a use of federal Medicaid dollars before publicly calling Wisconsin out of compliance or issuing corrective action measures. Let's do the right thing and get out in front of this potential directive.

Thank you for considering our concerns. We would welcome the opportunity to discuss this with you further and we reiterate our request for the issuance of an RFP at the earliest possible date.

Sincerely,
Survival Co-Chairs:

Maureen Ryan, moryan@charter.net; (608) 444-3842;
Beth Swedeen, beth.swedeen@wisconsin.gov; (608) 266-1166;
Kristin M. Kerschensteiner, kitk@drwi.org; (608) 267-0214

Survival Coalition Issue Teams: education, employment, housing, long term care for Adults, long term care for children, mental health, transportation, workforce, voting, Medicaid and health care.
