



Survival Coalition

of Wisconsin Disability Organizations

P.O. Box 7222, Madison, Wisconsin 53707

Why is DHS renewing the IRIS Waiver?

The state budget signed into law on July 12th directs DHS to replace Wisconsin's current long term care system (Family Care, IRIS, and legacy programs) with a new and untested model.

The current IRIS waiver is set to expire at the end of 2015. Because the new long term care system is not yet in place, DHS must complete the required process (waiver renewal) so the IRIS program can continue to run until (and if) it is replaced by the new system.

If the IRIS waiver is renewed, does that mean IRIS will continue?

Renewal of the IRIS waiver will mean that IRIS will continue as a separate waiver program until it is replaced with the new long term care program that the state budget has directed be developed. The state budget directs DHS to replace existing Family Care, IRIS, and Legacy programs with a new long term care system. The new waiver that would replace current programs has not yet been developed, and it is unknown what the stakeholder process or timeline will be to develop the new waiver. Once the waiver for a new system developed, it must be approved by the federal government (CMS). Until the new waiver for the new system is approved by CMS, the existing programs (Family Care, IRIS, Legacy programs) remain in place. Renewal of the IRIS waiver means that the IRIS program exists until (and if) it is replaced.

Why should I comment on the IRIS waiver if the program may be eliminated?

Every opportunity to tell DHS what self-direction should look like is important. Submitting public comments on the current IRIS program—even though the state budget calls for self-direction to be folded under managed care in the new system—can clearly communicate the elements of self-direction that people with disabilities and their families feel are important to retain in a new system.

The more the current IRIS waiver language represents what people with disabilities and families need, the better position people with disabilities, families, and advocates will be in to provide feedback to DHS on the content of the new waiver that will determine how self-direction will operate in the new system. While the process to engage stakeholders and participants to develop or provide input on the new system is still unknown, it is critical that everyone affected by changes to the long term care system participate in all opportunities to influence the development and operation of the new long term care system.

What can I do now?

You are an expert in the daily services you and your family need to live in and be a part of the community. Many people have shared their story and concerns about the changes proposed in

Wisconsin's budget with their state legislator; the same concerns and stories are important to share in your comments on the IRIS waiver and the forthcoming revision to the Family Care waiver that will propose changes to the current long term care system.

Submit your comments to DHS by **September 11, 2015** via e-mail to DHSIRIS@wisconsin.gov or mail to:

Department of Health Services
Attn: IRIS Waiver
1 West Wilson Street, Room 418
P.O. Box 7851
Madison, WI 53707-7851

You can read the proposed IRIS waiver at <https://www.dhs.wisconsin.gov/iris/iriswaiverrenewal.pdf>

Advocates are reading and analyzing the content of this waiver; additional talking points are forthcoming.

Background: How does the budget change Wisconsin's long-term care system?

The new system would require the same managed care organization—called an Integrated Health Agency (IHA)—to provide day-to-day health care (primary care), treatment for severe injuries or illness (acute care), behavioral and mental health, and long term care services and supports for people currently in Family Care, IRIS, or legacy programs. IHAs could be out-of-state for-profit insurance companies.

The budget calls for the elimination of IRIS as a separate Medicaid Waiver program, and folds self-direction under the umbrella of managed care. Many questions on how a self-directed option will operate under managed care remain unanswered.

Changes will unfold over the course of the next two years and will happen when the federal Centers for Medicaid Services (CMS) approves a new Medicaid waiver that will tell us how the new long term care system will operate.