

What Medicaid Means to Wisconsin



**Survival
Coalition**

of Wisconsin Disability Organizations



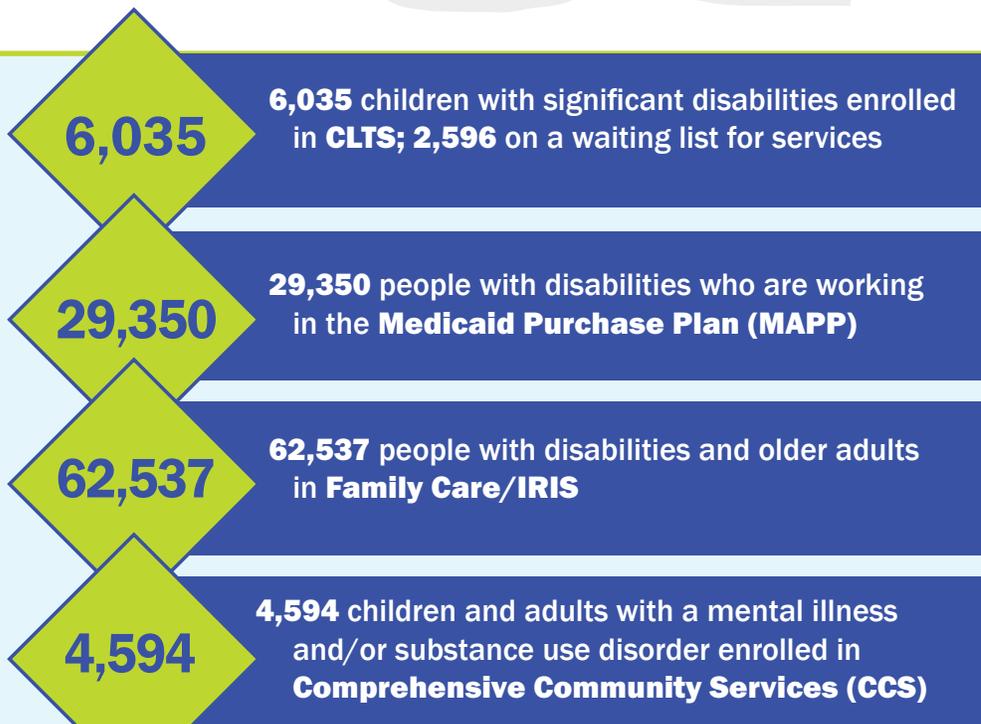
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Medicaid Provides Funding for More than 20 Wisconsin Programs¹



Medicaid Enrollment in Wisconsin's Congressional District Counties:

District 1:	472,044
District 2:	130,681
District 3:	181,262
District 4:	311,643
District 5:	379,211
District 6:	107,486
District 7:	144,350
District 8:	151,375



Total Enrollment in Wisconsin: 1.1 million people

¹All numbers cited here are from: www.dhs.wisconsin.gov/

Executive Summary

Wisconsin's Medicaid program provides critical health and long-term care services to more than 1 million Wisconsinites. Nearly two-thirds of Wisconsin Medicaid participants are older adults, people with disabilities or children, many of whom have disabilities.

Wisconsin's strong Medicaid Program is essential to the health and independence of people with disabilities. Adults with a disability are more likely to: be low-income, have less access to health care, and report higher health risk factors and chronic conditions. People with disabilities rely on specific supports, such as personal care, school therapies, prescription drugs, transportation, job coaching and employment services, and mental health and substance use disorder services, that are not available or are not available at the level needed on the private insurance market.

Medicaid provides affordable, quality health coverage to individuals with disabilities. Many people with disabilities do not have access to private health insurance or cannot have all their needs met through private insurance plans—this is especially true for people who rely on non-emergency medical transportation, home care services or need comprehensive mental health and substance abuse services. Recent polling demonstrates the majority of Americans (65%) would prefer to see Medicaid continue as it is today than either of the offered alternatives to the current federal funding structure.¹ Medicaid access in Wisconsin is also proven to decrease unnecessary hospitalizations and increase access to primary care.²

In Wisconsin, adults and children with disabilities may access the Medicaid program in many different ways. Some people may use a specialized long-term care program such as Family Care or IRIS provide the support they need to stay in their home. BadgerCare and Medicaid card services provide access to acute and primary care and are vital to health care security. There are also programs designed to help children with significant disabilities (e.g. Katie Beckett and the Children's Long Term Support Waiver) and working adults with disabilities gain access to Medicaid (e.g. Medicaid Purchase Plan). People with mental health needs access services through BadgerCare or dedicated mental health programs like CCS, CRS, or CSP. It is impossible to find a Wisconsin Medicaid program that doesn't serve people with disabilities.

Survival Coalition surveyed 1,500 Wisconsinites who use Medicaid and found:



60% use Medicaid transportation to access the community.



80% said without Medicaid they couldn't see their doctor, therapists or direct support providers.



33% use Medicaid for supports to be able to work.



43% said without Medicaid, they couldn't stay in their homes.



48% said changes to Medicaid would mean they couldn't work.



32% use Medicaid to access mental health services.

40% said without Medicaid they wouldn't have access to medical devices like a wheelchair or speech device

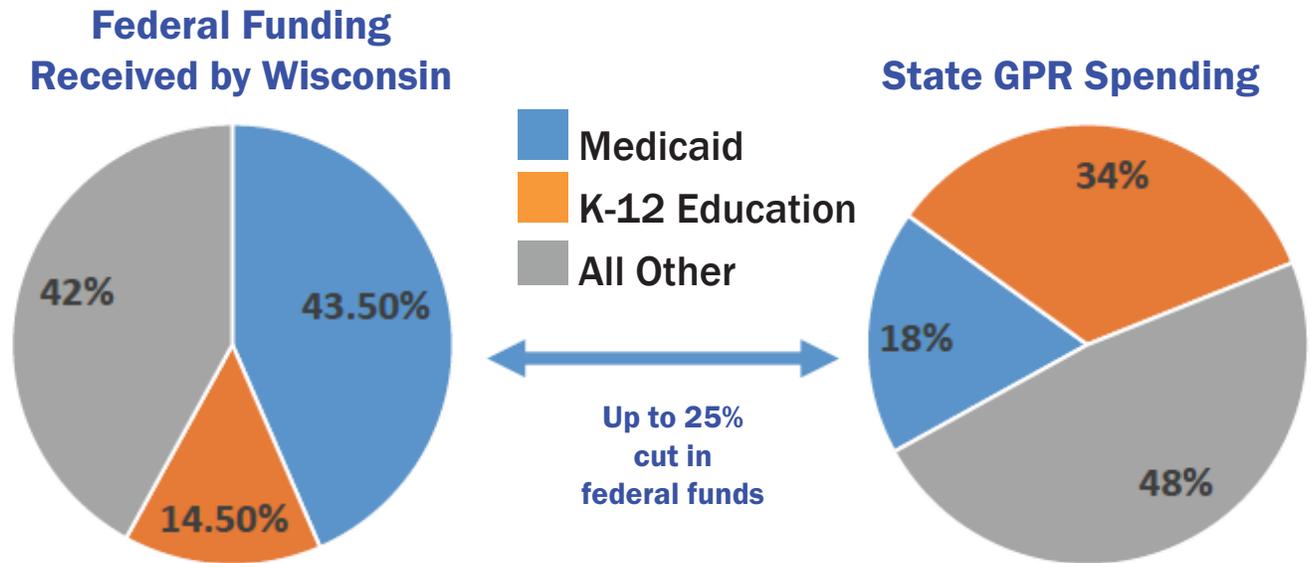
¹ <http://kff.org/health-reform/poll-finding/kaiser-health-tracking-poll-future-directions-for-the-aca-and-medicaid/>

² <https://uwphi.pophealth.wisc.edu/publications/other/badgercare-plus-1-executive-summary.pdf>

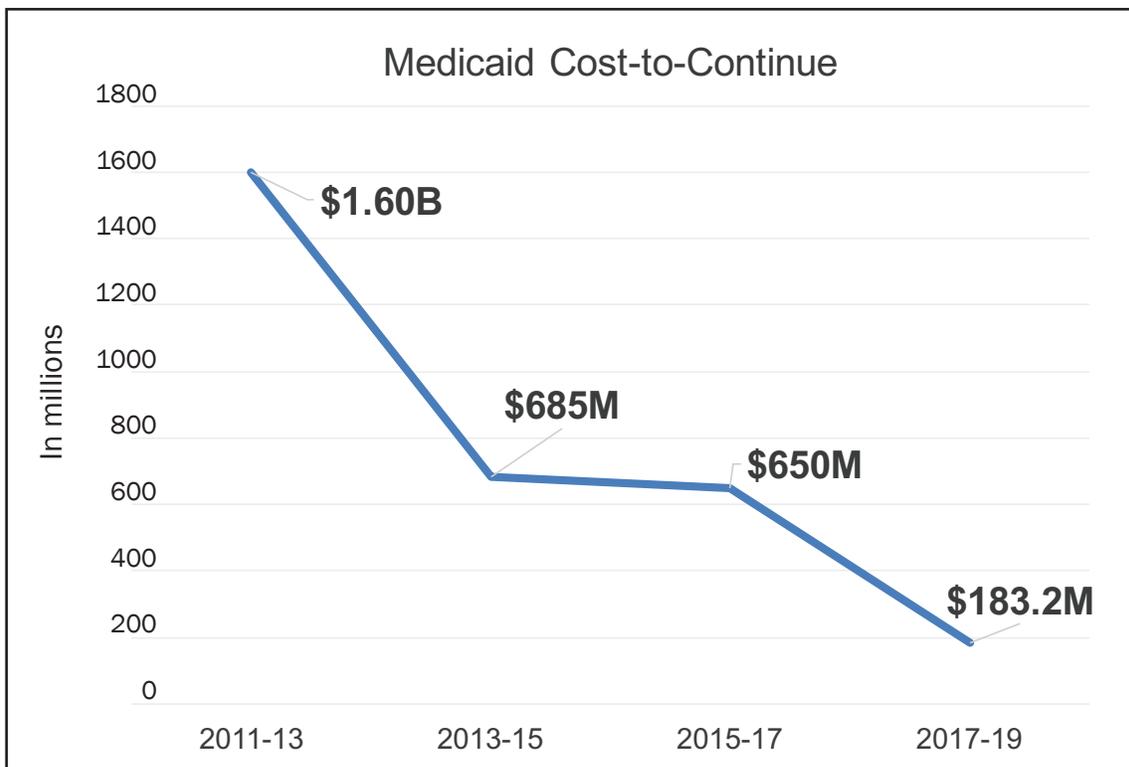
Medicaid Funding in Wisconsin

The federal government currently funds about 60% of Wisconsin's Medicaid costs, bringing roughly \$5 billion to Wisconsin. These federal matching funds are the largest funding source for Wisconsin's Medicaid programs and help to ensure that state GPR can be used for other essential purposes.

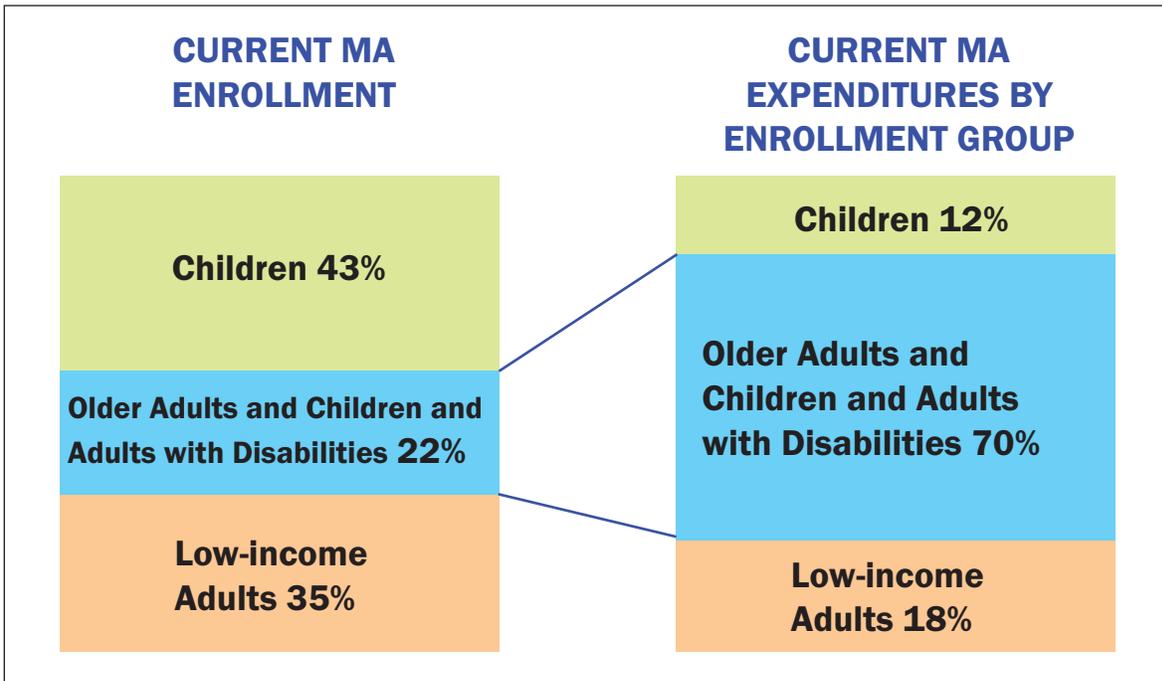
If Congress approves Medicaid per capita caps, the non-partisan Congressional Budget Office estimates that federal Medicaid funding will be reduced by \$834 billion, or 25%, over 10 years. Combined with the President's proposed \$610 billion in cuts to Medicaid in his budget, Medicaid spending could be reduced by 45%. With cuts of this size, Wisconsin would need to find other revenue, such as state GPR dollars, to maintain current Medicaid programs and benefits or institute cost-savings measures like reducing provider reimbursement rates, limiting services and benefits, or re-instating waiting lists for programs. Medicaid funding supports Wisconsin's economy and helps cover the wages of tens of thousands of Wisconsin workers employed by Wisconsin's 75,000 Medicaid provider agencies. Big cuts in Medicaid will hurt our economy and result in widespread job losses across the state.



Medicaid in Wisconsin is already on a sustainable path. The cost-to-continue has decreased over the past four biennia, and there is currently a \$330 million surplus.



More than 2/3 of Medicaid spending in Wisconsin is on people with disabilities and older adults. Cuts to Medicaid will directly affect these populations. Home and community based services – like Family Care and IRIS – are especially vulnerable to deep cuts if the AHCA funding cuts and/or per capita caps are imposed.³ This jeopardizes the success and investments Wisconsin has made.

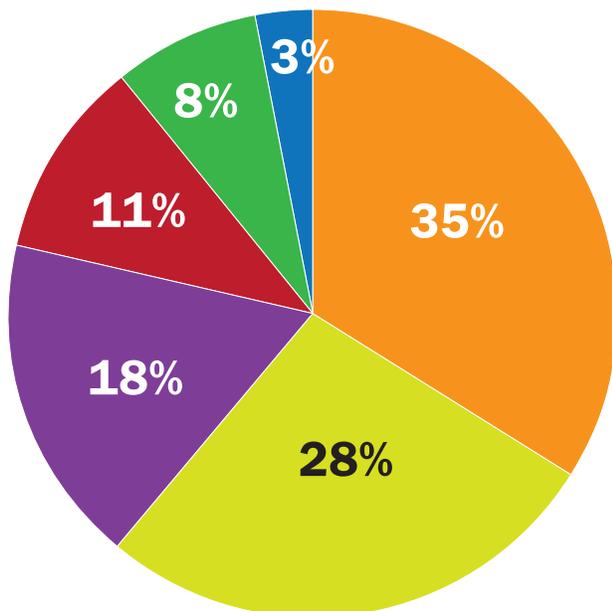


Work status of Medicaid beneficiaries (national data):

The vast majority of Medicaid recipients are working or qualify for a work exemption.⁴ Medicaid recipients are currently Wisconsin's most vulnerable.

Working full-time: **41%**

Working part-time: **18%**



Of the 41% not working:

Ill or disabled

Taking care of family

In School

Retired

Could not find work

Not working, without exemption from MA work requirements

³ <http://www.cbpp.org/research/health/medicaid-cuts-in-house-aca-repeal-bill-would-limit-availability-of-home-and>

⁴ <http://kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicare-and-work/>

Stories from Wisconsin

Survival Coalition received the following personal stories from people who use Medicaid and live across the state, organized by Congressional district. They illustrate the different types of critical supports provided by Medicaid and the impact these services have on people's ability to lead independent and healthy lives in the community. Although these supports may vary, common themes on what Medicaid means to these Wisconsinites emerge: life-saving medical treatment, a safety net, employment for the individual and family, much-needed respite for caregivers, and the ability to stay in their homes and in their communities.

DISTRICT 1

BURLINGTON

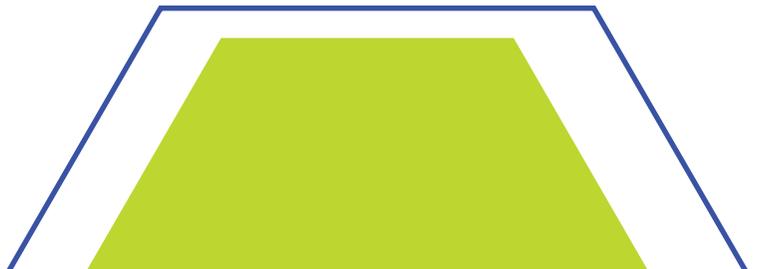
I can't afford health care insurance. I've paid income taxes and SS my entire life but now that my income is drastically reduced as I have aged the Badger Care I receive allows me to stay healthy. —Michael

KENOSHA

Every week my brother is given the taste of independence via aid from respite workers through IRIS. These workers include my mother and I, among others. My brother is a 20-year-old nonverbal man with autism who spells and is currently learning to type. The services provided to him range from toilet and hygiene care to our weekly exercise day (Saturday's). Burnout is easy to get when supporting someone who needs help every day, but the other respite workers (more like family after all these years) ease the burdens he cannot help; IRIS offers relief a few times a week. This relief is not only for my family, but for Carlos, my brother, as well. Going to work with support from his aid, Heather, or walking around downtown to get an iced tea is a simple activity that holds in its hands the power of autonomy through action. This autonomy is a right, but is often treated like a luxury today. Taking care of those who need help should not be something we are debating about. Extending a hand to those who are differently-abled is something that should be woven into the fabric of America by now. Do not take this away."—John

He takes medication for mental health diagnoses, ADHD, behaviors related to autism spectrum disorder, as well as psychiatric care. He receives in home care for suicidal ideations, behavior treatment, support for ADL's and iADL's, daily living skills training, social communication support and safety in the community, and support for him to attend college and to live on campus for safety, socialization, and communication.

—Mary



FRANKLIN

I'm a ventilator dependent quadriplegic and my nursing care is provided by Medicaid. Without it, I'd have to leave my home and go into a nursing home. A nursing home would be a literal death sentence for someone on a ventilator. Pneumonia, pressure sores, and neglect are the norm. —Eric

Without services for a family member he would not be with us. He has severe mental health and addiction issues the Badger Care program has allowed him to get the medical and psychological attention he needs as he is unable to work due to his medical issues. I work with children ages 3-21 whose parents rely on the medical supports they need to keep their children alive. I have several children within my oversight that have daily medical needs, will need the long term support, they currently are receiving medical and psychological support along with strategies to support their child with needs such as Autism, behavioral and learning needs. People who are making these decision need to attend a school early childhood program or a program with students who have Intellectual Disabilities for even an hour to see the huge amount of care and services that children need not just at school, but in and around the community. Even middle class and above income families need supports for their children with multiple needs.—Karla

MUSKEGO

We would be impoverished or my son would be in a facility instead of being happy and healthy at home. Our insurance does not cover his diapers or gtube feedings which is over \$1200 per month without including his daily meds which would be out of pocket over \$800 after our insurance. We are so thankful for Medicaid. —Tracey

NORTH PRAIRIE

Our family paid more than \$300/month our daughters prescriptions (with insurance) without Medicaid. My daughter is planning on living independently in 3 years. This would not be possible without Medicaid. Also, we are using her IRIS funding to prepare her and sustain her with independent living. We absorbed all of this financially prior to receiving support from the state. We have two other daughters who need care, funding for college, etc. Medicaid and IRIS are helping our family financially and enabling us to invest time and resources into all of our children.—Name not provided

EAGLE

The young man I help is epileptic, autistic, bipolar, and non-verbal. I assist him both at home and in the community. He has some very extreme behavioral issues, but his mother is trying to keep him living at home and involved in the community. Without extra services, I don't know how she would manage. She cannot take care of him alone and support them both. He has made great progress in his 22 years of life, and he has the potential to do so much more, but he needs more time and lots of patient help.—Laura

EAST TROY

Because she has service in the home I am able to work. She is also a hoier lift and needs assistance due to being in a wheel chair. Her evening workers are from the local high school. This has helped them earn money through Consumer Direct as an employee. So far 2 of the workers are going on to be nurses. Amanda is able to teach them proper techniques in caring for someone with medical challenges. I believe the high schoolers benefit in having a flexible evening shift. They can still attend after school functions for athletic events. The young adults are also learning job skills for the medical profession, how to care for and understand someone that has a disability. Not to mention their pay helps them save for college. When we say there are cost involved in keeping disabled people in the home/ community independently the benefits this brings others is often overlooked.—Sonja

FRANKSVILLE

My family member would not be able to stay at home without the services. She is medically fragile and ventilator dependent, with a cognitive disorder. Placement for her would cost the state much more than staying with us in community if they had to try to find placement. She would end up in a ICU hospital setting.—Brenda

LAKE GENEVA

Our son's needs are great and the resources we receive through the IRIS program allow us the ability to meet his needs. He meets the criteria for institutional care but our IRIS resources allow us to keep him in our home with our staff of trusted caregivers helping us care for him. We are older parents and I don't believe we'd be able to keep him in our home without our helpers that are paid by IRIS. —Kathy

MUKWONAGO

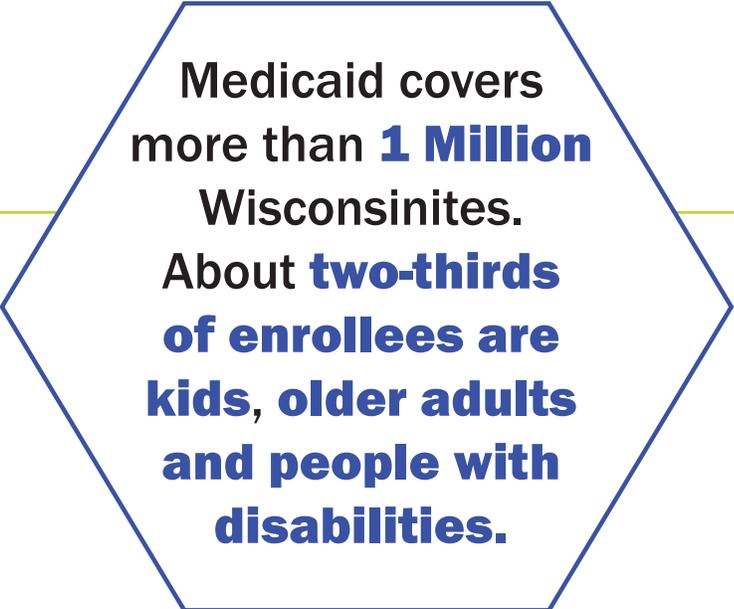
Keeping him healthy is essential to decrease progress of deterioration d/t having a genetic disorder. Regular MD visit & blood draws to monitor labs for health of vital organs and assessing medication dosages.—Rebecca

OAK CREEK

"I don't currently receive services, but when my son was 3 years old till 6 years old we received the necessary supports for Autism."—Amber

WILLIAMS BAY

Because of the rarity of my daughter's disease, she must see certain specialists, and take very expensive daily medications to keep her heart beating in a typical way. If those doctors or medications were no longer covered, we would not be able to guarantee her physical safety. The leading cause of death is sudden cardiac arrest and she has already surpassed published life expectancy by 6 mos.—Courtney



Medicaid covers more than 1 Million Wisconsinites. About two-thirds of enrollees are kids, older adults and people with disabilities.

DISTRICT 2

CROSS PLAINS

My son doesn't drive. The transition program in our school district has worked with him to find 20 hrs. per work of employment with transportation and a job coach. Without this support my son would be 21 yrs. with no means of income or a way finding employment as his writing and reading skills are at a 3 - 4 grade level. He would not be able to be at home all day unsupervised so I would have to quit my job from which we rely on income to help with our family living expenses. He would have to go on our family insurance (which I carry) but only until age 26 and at that time he would not be able to afford the multiple medications he takes and doctors visits. – Shelly



FITCHBURG

Allows parents to work, to care for sibling, and have quality interactions with our disabled child. Allows our daughter to have the opportunity to as much as possible go through the appropriate developmental stages of individuating so that she will be best prepared physically, psychologically and developmentally prepared to live independently of us, particularly as we age and are unable to care for her. – Sandy

MADISON

My mother takes many medications. She would not be able to afford them on her very limited income. A difference of \$20 a month has a severe impact on her life. -Deb

MAPP and support at his job are both essential for Sadler to be a productive member of his community. He works for the State of Wisconsin in the mail room where he has been for almost 10 years and makes more than \$11/hour. Sadler has Down Syndrome and while he is pretty independent, he would have most certainly lost his job on several occasions had it not been for a job coach assisting him to learn new equipment (it takes him longer) and understand subtle social cues that were impacting his relationship with co-workers and ability to do his work well. Because he works 20 hours per week at a good wage, he uses MAPP for his health insurance. Because he does not have access to insurance any other way he would be forced to leave his job if that program was not available.- Amanda

We would not survive without them. I am the brother and guardian of an individual with developmental disabilities. I became her guardian out of necessity. I was not prepared for the extra time and money it would take to provide the proper care for my sister. If we do not have this care it will likely be a trickle down affect that will not only affect her but will affect my child, wife and myself. We will likely lose our home, cars and not be able to pay for our own insurance. – Ryan

Life-saving. Son is suicidal and so anxious he can't perform basic self-care. CCS is our last hope. – Mara

The personal care, supportive homecare, meal preparation, feeding, toileting, bathing, dressing, transferring, provided through the Community Options Program have allowed me to maintain my employment with the state for the last 35 years. My wife and I adopted six children, five with special health care needs. They have all graduated from high school, to have graduated from college and all living independently. They depend on SSI and Medicaid for the health care coverage and mental health support. – Dan

McFARLAND

PCW's provide COMPLETE daily living supports to our adult daughter with a disability, including dressing, bathing, food prep, eating, exercise/range of motion, basically all daily living areas. Our disabled adult daughter is totally dependent on others and is unable to live independently. She's nonverbal. Uses eye gaze, gestures, vocalizations, to communicate her needs. As older parents we worry about the day when we are no longer able to physically help our daughter in our family home. - Jeanne

MERRIMAC

The medical services (doctor, psychiatrist, dentist) and medications have made an incredible difference. Without all of that my grandson would most likely have had run-ins with the law, be unemployed as well as having declining physical health. As it is, he is well, employed part time, is able to drive. - Kit

MIDDLETON

They are essential. As the primary wage earner who has to work full time, I have to have the services & the supplemental support in order to provide a healthy environment for my daughter who has complicated needs. She has epilepsy, autism, and an intellectual disability. Because of her complicated health issues, we use Medicaid to supplement Unity for health needs. We use Medicaid for autism services, services billed by the school district, incontinence products, and personal care help in the home, as well as respite. Because my husband also has a disability, I cannot imagine how we would get by without the services, products, and support that Medicaid helps us afford. - Kirsten

MONROE

Without BadgerCare helping to cover costs that our insurance didn't cover, our family of 6 would be in the kind of debt that we'd never be able to recover from. Now, up until recently only our kids were covered, but now my husband and I are also on BadgerCare since he has left his dead-end job (and crappy insurance) to better himself by being self-employed. Once our business gets going and we no longer qualify for BadgerCare, we were hoping to buy insurance, but I'm very worried that there won't be anything affordable available, and we'll end up back where we started. - Angie



**Wisconsin
schools receive \$60
million per year in
Medicaid funding for
school-based services
like speech therapy.**

PLATTEVILLE

I help care for two adult children with disabilities who rely on medicaid, SSI and IRIS to allow them to live, work, attend school etc. in their community. Our family is also facing challenges with needing in home care and supports for an aging adult with MS. Home modifications and mobility equipment are expensive. Access to in home care supports will allow for remaining in the home and community rather than moving to a skilled nursing facility to be safe and receive medical care needed. - Brenda

SAUK CITY

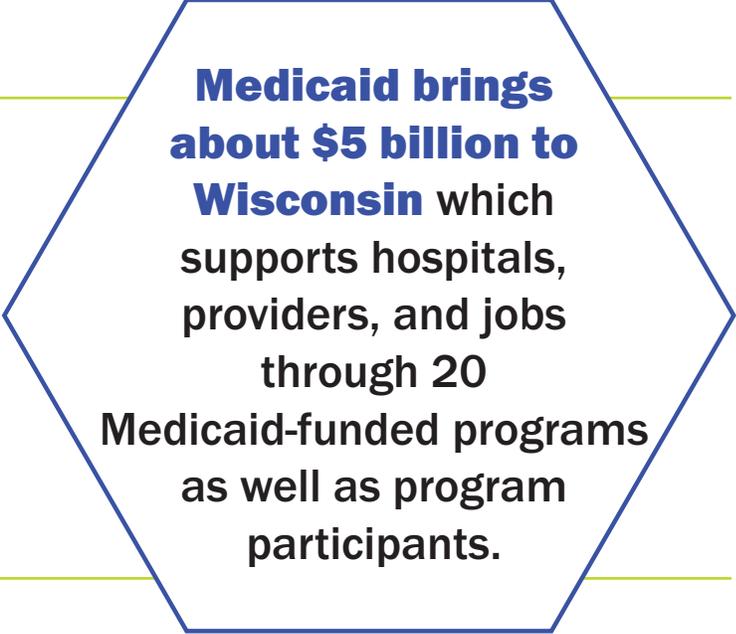
Without therapy and CCS I would be in a really, really bad place. They help me get through every day.
- Patrick

STOUGHTON

I am a single parent of a child/young adult who has life threatening issues heart/kidney/seizures. He needs daily assistance in all aspects of his life. I would not be able to work if I didn't receive help. He also always needs someone that is cpr/defibulator trained. He has a quality of life and is a happy person because of the life he has now. – Cathy

VERONA

Katie Beckett supports our need for services for our son who was born with a genetic deletion which causes physical and cognitive challenges. Our employer-provided insurance is a grandfathered plan under the ACA and excludes therapies and other services relating to or resulting from a developmental delay and won't cover habilitative services. Katie Beckett gives us access to essential health services, the cost of which would otherwise be insurmountable. – Christianne



Medicaid brings about \$5 billion to Wisconsin which supports hospitals, providers, and jobs through 20 Medicaid-funded programs as well as program participants.

WAUNAKEE

Job coaches and transportation for my daughter with Cerebral Palsy make it possible for me to work and care for elderly parents. My mother-in-law relies on Medicaid for a place to live as she needs Assisted living due to her severe Parkinson's disease. – Lynn

WINDSOR

The care i provide my elderly disabled mother and my down syndrome sister allows them to continue to live in their own apt. Without my help, they would need to be in a nursing home. - Barb

DISTRICT 3

BLACK RIVER FALLS

My children both are disabled. They regularly see a therapist and a psychologist. My son also sees a psychiatrist. My daughter receives services through DVR and the Promise grant. Without these services she would not have been able to get one on one training for Drivers Education or her job shadowing. Both of my children also receive mentoring services as well. I am trying to help them be as independent as possible by the time they are adults. Without the services offered through the county and state to support them, this would not be possible. My daughter for sure needs a job coach and my son may need one as well when the time comes. I feel that without services like these along with their ongoing therapies, I could never prepare them enough alone to be self-sufficient to the best of their abilities. I also feel that one or both will need ongoing services even after they legally become an adult and would not otherwise have access to these things without the supports and services offered through Medicaid. I am thankful they have some of the services they need and hope they continue to have the supports needed for them to reach their full potential.– Mem-Gween

HIXTON

Without health care, my son will die. This is not an exaggeration. He is a senior in high school, he also has Asperger's Syndrome, Epilepsy, and survived a partial arm amputation and reattachment 15 months ago. He also sees a therapist due to the trauma of his accident. I am a single mother of three children. I will lose my job if he loses transportation, there is no one else to bring him. If work supports go away he will not work, with supports he isn't considered disabled. Without a job, he has no chance for insurance on his own. Without insurance (which isn't an offered benefit for my dependents) he will become either severely brain damaged or die due to seizures. This is life or death for my family.—Rebecca

KENDALL

If we didn't have BadgerCare we wouldn't have found out about my husband's lung cancer. May 28, 2017 will mark one year from last chemo treatment. He is doing well with a good scan a week ago today. I'm able to go to Dr and dentist regularly.—Name not provided

MENOMONIE

My daughter is 7 and has autism, adhd, anxiety, sensory processing issues, as well as other medical illnesses. She requires daily PCAs to come to our home to assist her with daily living and safety. She also requires behavior therapy 5 days per week which is not covered by my regular health insurance, nor is her occupational and physical therapy that she receives 1-2 times per week. Her MA coverage allows us to give her the proper care she needs to function daily and to give her a better chance at functioning in the future mainstream. We also have received therapy equipment provided by the waiver program to enhance her therapies she does outside the home so we have been able to reduce the number of appointments she has outside the home. MA also helps alleviate the cost of her medications as she has daily meds she takes that can be expensive. By having a PCA in our home, it allows us to help her and function more as a family unit instead of supporting just her.— Lexi

NEKOOSA

Without direct support for daily living and community activities, the person that lives in my home would be at risk of being placed in a group home. This living arrangement allows him to live as independently as he can be and enjoy being a part of the local community. He volunteers his assistance to elderly neighbors to do yard work and snow removal. He enjoys having his own space in my home while having oversight and care. He is not currently in a LTC program but has Medicaid paid health benefits. He has received job coaching and transportation supports in the past in LTC. He is an awesome person.—Catherine



PLOVER

Every day caregivers spend 6 to 10 hours in my house providing my personal cares, such as bathing, dressing, assistance with eating, housekeeping and transportation. By this care, I am able to live on my own and not required 24-hour a day nursing home care. The daily work of these caregivers allows me to be an active member of my community. I can attend appointments, meetings, visit members of my family and get prepared for and go to work. I work by being a member of the Board of Directors of my local Family Care Organization. My doctors are paid by Medical Assistance, and these medical professionals oversee my physical health care by providing medical information, tests and the required signatures for all my medical supplies and services. The staff of my local Family Care organization, Wisconsin's long-term care service provider, coordinates my long-term care services to best serve my individual needs, allowing me to stay living in my community, in my own home, while saving taxpayer dollars compared with the alternative of me requiring 24-hour a day care in an institution.– Janis

SPARTA

My mother, from age 86- 93 was a caregiver to my dad at the beginning of his illness and for 5 years until he was admitted into a memory unit where he lived for 2 years until he died this past September at the age of 89. The personal care and home-making services they were provided through Family Care program (Medicaid) helped them stay in their own home together and, I believe, helped my Dad stay connected to life and living. I provided additional hours of caregiving and took over when my mom was ill and couldn't continue. Housekeeping, shopping, respite care, and some supplies were all part of the services provided to us. Although the turn-over of caregivers, differing quality of care, and difficulty in getting enough hours were problematic at times, we were so grateful for the assistance and couldn't have done it for as long as we did without the programs my Dad and Mom were on. Support for the family caregiver was critical. My mom now lives in assisted living through the Medicaid program and Western WI Cares. She pays a co-pay and the program does the rest that enables her to have the comfort and support she needs to live, and to live well. My role as a caregiver for my mom is manageable and limited to transportation to appointments and money management. Our relationship feels more balanced as I am no longer consumed with the cares and the tasks and the worries. We can simply enjoy being together. Without the Medicaid program for my mom, she wouldn't be able to have this type of old age and this much health.– Andrea



STEVENS POINT

Without the supports offered through Family Care, my cousin would not have the ability to work in her community, get quality medical care (including someone attending appts with her to help her with follow through), and would not have transportation to go where she wants and needs to go. Long term care supports have helped her grow in her independence to where she needs much less daily assistance than she used to. She used to need 1:1 support in a job but now can work fairly independently with weekly check-ins and occasional increased supports when there are changes in her job. Transportation has allowed her to navigate her community independently, not having to rely on others when she needs groceries or has a routine medical appt. Having a Family Care RN attend doctor appts has helped her when she has a new medication that she needs more info on, or when she injured her ankle this year and needed the RN to advocate for her to get a second opinion to get adequate care. Family Care staff have helped my cousin find her voice, by providing her with the supports that she needs to LIVE. – Mykeerah

WILTON

Without my doctor, my medications and my IRIS worker's help my life would not be worth living. I would be living in pain, unable to prepare food, my home would be filthy. I'd be unable to get to the stores or the doctor. I'd be isolated in my apartment with no human contact. Medicaid is literally my lifeline!-- Joan

CONGRESSIONAL DISTRICT 4

BROWN DEER

Without respite I would not be able to provide 24/7 care for my 2 children with disabilities. My son would be forced to be segregated to group home living to avoid my burnout. Without my medications and mental health visits I would require hospitalization and be unable to care for my family.-- Genell

CUDAHY

The services we receive allow our daughter to be included in the educational system and brighten the days of many around her. Her life has been saved on more than one occasion, and she is able to live a full and eventful daily life, participating in educational activities and adding to the vitality of her peers and teachers. Without these and other medical intervention, SHE WOULD NOT BE ALIVE!!! We are already struggling on so many levels...the stress of changes in our medical services is just too much to bear.—Jennifer



GLENDALE

These services help my child be independent at school and stay healthy enough to attend school and be at home. One of our biggest concerns is if our daughter has a cancer relapse, we will be unable to pay for treatment. My husband recently had a couple of strokes and is currently unable to work. After giving up my career to care for a child with an intellectual disability, I have taken work in another field with a substantial pay cut just to make ends meet. –Orvis

My daughter's medication alone a month is over 1,200.00. No one can afford that plus I have to stay home and be available to her. I don't get paid to do that! She is my world and I already give up so much with just my husband being able to work full time. –Shelia

MILWAUKEE

Without the support of being able to have medical mileage reimbursement, my son would not be able to make his many appointments. I am able to hire a family member to pick him up from school or home and transport him to his appointments and bring him back home. If I didn't have this service, I would have to take off of work each time (sometimes 3 times a week) and would no longer be able to have a job just to support the therapies he needs to learn to be more independent. Without respite, I would not be able to go to school one night a week to improve my ability to get a better paying job and to have time so I can actually spend time with my other child alone as she often feels forgotten and neglected. The long term care waiver has allowed my son to receive a wheelchair which allows us access to more places as his inability to walk long distances have kept us from being able to shop in a grocery store, go to events and be an active family together. Having Katie Beckett allows my son to receive multiple services that I would not be able to afford otherwise. Without the supports for mental health and physical/occupational therapy he would not be learning how to be more independent and learning how to be a contributing member of society as he would not have skills to build upon that can eventually translate into the working world and his own personal self care.—Lori

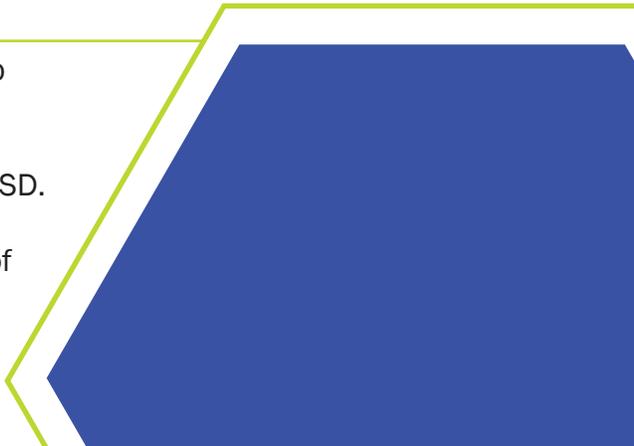
Our son is 15 years old and has Down syndrome. We depend on Children's Long term waiver in order for him to attend recreational camps and gain social skills we are not able to provide. In addition, we have a respite provider for him in order for him to stay safe when we are not able to be with him. We also benefit from respite as we do not have family that can be with him. Respite also provides my husband and I with the much needed quality time together to be better parents. – Theresa

SHOREWOOD

The Iris program greatly impacts my brother's life. It is what provides him with a basic level of quality of life. Without it he would no longer be able to live with my family, receive the care he needs, and function in a life and a climate that is already incredibly hard for both him and my family. The loss of IRIS would be incredibly devastating to all of us.—Carly

ST FRANCIS

The mental health therapy that I receive weekly permits me to keep working as a Certified Peer Specialist in a Housing First Program. I have been under a therapist and psychiatrist's care for 30 years because of a mental health disability caused by depression and PTSD. Because I have medicaid and medicare, it has allowed me to go from disability to working a part-time job because of the supports of therapy and medication. – Mary Lou



CONGRESSIONAL DISTRICT 5

BROOKFIELD

Financially we would not be able to afford the care from the doctors that our son sees. Our son has five specialists that he sees. He has Down Syndrome, and also has several auto immune disorders, including Type One Diabetes. We would not be able to afford his insulin without his Medicaid. Respite care and camp provides us with some sense of normalcy with our other children.—Kimberly

I want to be independent and live on my own. NOT with my parents. Just like my brother. I get help now to help me get ready to live on my own. Plus I have helpers who I know who take me to the Y and out into the community to do the things I need to do (not my parents!) wish how I want to live. I also have a job in the community that I love and I hope to go to Project Search so that I can get a full time job just like the rest of my family.- Kathryn

COLGATE

Jake needs 24/7 care for his severe Epilepsy and Autism. He would lose out on ABA therapy in the home. We would be unable to find anyone to care for him if we cannot pay them. There would have to be an institution for him to live with nursing and 24/7 care. Would be extremely more expensive then keeping him at home.-- Sherri

DELAFIELD

My 21 year old daughter, who has seizures and is on the autism spectrum, was recently diagnosed with mood disorder. With the help of IRIS funding, a work program and wonderful doctors and behavioral therapist, I have been able to take care of my daughter - I'm a single mom - by myself. -- Jolene

FORT ATKINSON

These services help us so that my husband and I can continue to work to pay bills. It also helps my daughter to live the most normal life she can have at this point. born with a brain tumor she has had many struggles all of her life. This help has helped my husband and I be able to transition our daughter to an adult family home which has helped her become stronger and show some independence as she does. we would not be able to pay for her medical needs with out this help. -Gail

HARTFORD

Our son is cognitively disabled, has severe vision problems, diabetes, asthma, foot anomalies, and a thinking disorder in the Autism Spectrum. He cannot drive, so he needs transportation help. His day services provide him with opportunity for meaningful work and intensive social skill training. We are dependent on his doctor and the health care he provides to optimize our son's on going health situation.-- Michael & Roberta

JACKSON

By living in a group home helps to support my sisters independence. With the assistance of the group home caregivers she is able get the help and support to maintain an independent lifestyle according to her needs. She is also able to work at the Threshold, which gives her a sense of participation in the community and belonging. Her family is also able to she is in a safe, healthy environment. -Sandy

JUNEAU

I have a 7 year old grandson who had bilateral strokes in utero. He has many medical needs. He has cerebral palsy in all 4 quads. He is vision impaired and is nonverbal. He is severely epileptic. He is also tubed fed with a special formula to help with his seizures. Without the help from Medicaid this child would die.—Bonnie

MENOMONEE FALLS

Liam has shown us that despite what developmental doctors said about him being at a 10 month developmental level, he understands what most other 9 year olds do. His therapies and personal care workers allow our family to have some respite from his total care needs.—Wendy

NEW BERLIN

We rely heavily on the home physical and speech therapies because our daughter is very developmentally delayed and also has a weakened immune system. Without assistance, we would be bankrupt, as our daughter sees 14 specialties for ongoing care needs. –Ryan

OCONOMOWOC

Tony receives 24 hour care and supervision to prevent him from engaging in unsafe behaviors related to his disability. He works and attends a day program that allows him to be productive and engaging within the community in which he lives. Without the support he receives, Tony would not be able to be a productive, engaging member of his community. We, his parents, are getting older and would not be able to provide the care he needs.—Anthony

SUSSEX

Having an Adult with special needs that required 24 hour care makes it difficult to attend work without help from outside family to care for our child and maintain gainful employment. For her, she is able to maintain a least restrictive environment by being home with her siblings and family. Without her Seizure medications, GI supplies, wheelchair, and other adaptive equipment like communication devices, her life would be seriously restricted and life expectancy would be greatly reduced.—Patrick

WATERTOWN

I can't survive without it. Literally will have to go without meds, and oxygen and nebulizer.—Pamela

WAUKESHA

Ongoing therapies will be the only way that my 10 year old could ever possibly become somewhat independence in a group home type setting, not getting these therapies would be life alternating.—Shannon

WAUWATOSA

My mother had a stroke which affected her right side and her speech. She also has aphasia. Under Family Care she is able to live in an assisted-living community-based residential facility where there is someone available 24 hours. The caregivers help her with medications, dressing, eating, toileting, bathing. I do not know what might happen to my mother if Family Care is no longer an option. Her monthly income alone is not sufficient to cover the cost of her care. –Luann

WEST BEND

Ryan is non verbal, he does not have the ability to even scream. We are confident that he is in safe, non threatening living and working situations, and this gives us peace of mind. we are in our 70's and the cost of our medications requires that we both continue to work. If Ryan were to have to move back in with us, one of us would need to quit our job because he cannot be safely left home alone. He would miss his group home housemates, and friends at work and special Olympics. –Judith

CONGRESSIONAL DISTRICT 6

BEAVER DAM

We adopted our special needs son when he was a baby. He is a survivor of extreme abuse and neglect. He has emotional and behavioral issues that keep him from participating in regular childhood social activities in school and the community. He has received help from Medicaid from the beginning, birth to 3, In-home Autism support, Therapy horse riding, a mentor from CCS program to take him into the community, and soon summer programs he can be with other kids to learn socialization and interaction with peers. He also receives in home psychotherapy and special education services at school-full time and medication support from a psychiatrist. Without these supports our son could not function in the home and we would not be able to manage him. The trauma he sustained will never go away but it can improve with professional help. Our insurance can't cover the total cost of all his medications and programs. We would be financially strapped with out Medicaid. I had to quit my job to stay home with our son, we are a one income family because of it.—Jennifer

I am able to receive respite, support aids he needs that I wouldn't be able to afford. Such has his communication device \$300, his talking program \$250, sensory needs \$300 and more that he needs.—Lisa

BELGIUM

My son, age 52, was born with a defect condition known as Spina Bifida and hydrocephalus which back in the early 60's was not treated like it would be today. The knowledge for treatment was unknown; consequently, most of the patients with this disability died. The survivors had a long, painful, and difficult future to do and accomplish the things that a normal child could naturally do. He is paralyzed from the waist down which involves bladder and bowel incontinency and is confined to a wheelchair. This situation alone presents many physical and medical problems. He is in a shared apartment with support services thru Balance Inc. which help him in his daily living activities as well as the physical problems. The amount of services he receives are geared to his disability and needs. Taking or reducing these services, medications or support would be detrimental to his future. My husband, age 84, and myself, age 74, cannot do for him what these services are able to do. His future definitely depends on these people. –Nancy

CEDARBURG

The transportation provides my son with independence and socialization, which he values. It also affords him more opportunities to participate in activities than I could provide for him. –Joan

FREDONIA

Two adult daughters have autism. One attends Adult Daycare Services full time; the other has parttime jobs. These are all possible for them because of the Family Care program. Medicaid covers the medical care needed for them to stay as healthy as possible given their disabilities.—Donna

GRAFTON

My 32 year old daughter is blind, disabled, developmentally delayed, has a chronic, progressive disease with no cure, needs 24/7 assistance with all ADL's. I am with her at all times and need the respite I receive from home health agencies to get out and run errands, appts for self, and to try to have an enjoyable much needed break. I am a single parent with no "family members help", concerned about my own aging needs and ability to continue taking care of her. Having these support programs have allowed me to stay home and take care of her.—Mary

MENASHA

With my daughter's Medicaid benefits, I know that my she is getting the medical and developmental care she needs without having to worry about if we can afford to have her seen by her medical providers and therapists. If we did not have Forward Health for her, I'm not sure how we would be able to pay the bills we would get from her providers since we have a High Deductible Health Plan from a private insurance company through my husbands employer. We would be in debt with medical bills since I am only working on a very part-time basis in order to be home to care for my daughter to make sure her needs are met. Without Forward Health, we may have to take her only when absolutely necessary and health and development would suffer greatly if we were not getting assistance from Medicaid for her.—Ann

MEQUON

Without the health and community supports my 91 year old parents receive they would need to leave their own home and move into a nursing home.—Michelle

OSHKOSH

Prior to these services our son was not able to do anything independently. The help from several services has not only given our son some independence but it has also helped our family tremendously financially. Without these services we would not be able to afford medication or doctors visits. Prior to these services our son was not getting all the medical care he needed because we were drowning in medical debt. These services have given my son a voice by providing him with speech devices that we could not have afforded on our own.— Cassy

Medicaid pays for my sons ABA Therapy, he is 4, and in the past 3 months he has gained words, is almost potty trained, has been making strides in learning colors, letters, and using sentences.—Amanda

We have used the Long term waiver for supplemental services to help teach skills not covered in the school district that need to be implicitly taught. These services work with family and child with autism. My son needs much more repetitive education to function independently successfully at school, in the community and at home. The intense focus we spend with these interventions have affected our entire family. We use respite funds to allow for a break from parents as well as for us as parents.—Pam

PORTAGE

I'm a single mother. I work outside the home. MA helps us to cover Rx copays; Dr an treatment copays all for my son. He sees a multitude of specialists and is on 14 different medications to help with the effects of his autism and the epilepsy he deals with. I would not be able to work or carry private insurance or pay for any of this help without Medicaid.—Holly

PORT WASHINGTON

The services and supports assist my family members to maintain their skills, improve their personal and social well being, sustain a basic level of quality of live and provide respite to re-energize care givers. Our most vulnerable citizens should not be forgotten in great country. – Carole

RIPON

It keeps me out of a nursing home, as I am bed bound. My home care aides get me out of bed and into my wheelchair.—Name not provided

SAUKVILLE

My son has spina bifida. He has many medical needs including a wheelchair, AFOs, monthly urinary catheter and bladder irrigation supplies, multiple medications. He also receives physical therapy services and special help through school. He has a VP shunt to manage hydrocephalus and has had many orthopedic surgeries in his 12 years. He requires assistance with many activities of daily living, especially bowel and bladder management. –Jenni

SHEBOYGAN

Knowing that she has health care for her medical, transportation, prescriptions, and support for her daily living- If we didn't have this I don't know what we would do!—Michelle

THIENSVILLE

My daughter needs all personal care: dressing, feeding, toileting, bathing. She must be fed 4 times a day, and uses the toilet about 10 times per day. This is an exhausting and demanding schedule for me as her mother. I am grateful that I don't work outside the home, but I do have other responsibilities to other family members, including aging parents. It is critical that I have respite in order to take care of these other responsibilities, as well as to keep myself healthy to continue caring for my daughter as long as possible. Also, specialized formula and feeding equipment, and durable medical equipment such as a wheelchair, as well as doctor appointments really add up. The financial assistance through Medicaid is critical to cover these costs.—Ann

VALDERS

My daughter was diagnosed with Spastic Quadripaligic Cerebral Palsy & has a seizure disorder. Because of IRIS, she can live in our home instead of a long term care facility. She is completely dependent for all ADL, communication, transportation, medication, etc. Without IRIS, she would not be able to live with us. —Victoria

CONGRESSIONAL DISTRICT 7

ARBOR VITAE

Health care coverage provides for the many doctors and medical services my daughter needs. Without this, she would be unable to receive the comprehensive care she needs. Services provide support to train for, obtain and REtain employment. Without this service, she would not be able to be gainfully employed. Assistance for transportation to and from work and for medical appointments helps make sure she can get to work and receive the medical care she needs. Social integration and community services provide the interaction she needs to be as functional as she can be. It is not only the physical needs being met by the services she receives, but also her mental, emotional, developmental, and social needs.—Meg

ASHLAND

My family member is in a safe environment and receiving the care that we would not be able to provide otherwise. They are a person with significant mental illness and other disabilities.
—Stewart

BAYFIELD

Helps my husband to stay at home with help and live as an independent life he can at this time. He gets quality care from our clinic and many preventative treatments to help with his ailments. —Johanna

BOYD

For foster children in my home it allows them to be able to go to the doctor and get the counseling that they need to help them with the trauma they have lived through. I also care for my mom and even though at this point she is not receiving these supports knowing that when memory loss gets worse there is help allows us to keep going. —Kathy

CLEAR LAKE

It is how we survive, To care for someone who requires 24/7 supervision can be the best and worst job you will ever have. When caregivers cost more then you can make working outside the home the stress seems overwhelming. —Karen

CORNELL

My sister has congestive heart failure and is unable to work. She worked part time once she was diagnosed until she could no longer manage that. She is on a BiPap machine, has an oxygen concentrator and multiple medications. She cannot survive without her Medicaid.—Nancy

EXELAND

The services I receive allow me to not only exist but also provide me with the opportunity to give to my society thru my participation, volunteerism and paying for assistance helps to further encourage a support services community by their experience-knowledge base.—Margaret

HOLCOMBE

My mother-in-law could not be living at home without daily in home care. She would also not be able to afford medical care for her diabetes without Medicaid. I also have a grandson who had a brain tumor and was left with cognitive delays who will rely on Medicaid for the rest of his life.— Rose Ann

LADYSMITH

I am totally blind due to a lower back fusion. IRIS program enables me to stay in my own home and work in my non-profit Shedding Hope. I am very blessed to be able to do this and the cost is much less than a nursing home and the activities I am able to participate in would not be offered in that setting either.
—Ralph



MARSHFIELD

I am the caregiver of my adult cognitively disabled daughter. She is unable to stay alone for any length of time. She also has many mental health issues stemming from her disability. She is on the IRIS program that allows for to live at home in an environment that she feels safe in. IRIS also allows her to have respite care which is much needed.—Name not provided.

NEILLSVILLE

The services help my family as I have both a disabled spouse as well as 2 children that are autistic that get therapy 5 days a week that helps them more and more. If this is taken away I would have to get another job plus try and figure out how I can help my family not fall completely apart and get whatever services that helps them advance in there every day life.—Lori

RHINELANDER

Allows for my daughter to live in an apartment, independent of her parents like any other adult. Allows her to be as independent as possible. Many tasks she can do partially for herself but needs help with the other part. Can grocery shop but can't reach the shelves or carry the bags if they are too heavy for her. She is in a wheelchair due to paraplegia and has restrictive lung disease as one example.—Melanie

RICE LAKE

Home Sweet Home served an elderly man who before our services, in one years time had 13 ER visits, 2 hospital stays and a nursing home stay. 16 medications. The following year after Home Sweet Home started providing in home support. He had 0 hospital stays, 1 ER visit and 0 nursing home stays and was down to 4 medications. Happier, well cared for in his own home with his little dog, watching birds, going to baseball games and school picnics too spend time with his grandchildren. Smiling from ear to ear!—Carla

SPOONER

They help me to live independently and participate in my community. Right now I am disabled due to a brain tumor and the side effects from that. With appropriate aids and supports my goal is to return to working again. If I lose the supports my hopes of returning to work will be over because my worker practices my therapies with me because I only get so many sessions per year with a professional. My worker accompanies me to the gym to build strength and I show improvements steadily. My worker helps me get to other natural therapies too which keep me off expensive medicines. The health efforts my worker helps me with keeps me off medications which would cost \$2600 a month the cost of her and the other choices is less than that and won't cause other effects down the line. I react badly to medications if I have to resort to those I will have to go to a nursing facility which would cost thousands a month versus my current budget of \$1300 a month which also keeps someone employed too. —Christine

STONE LAKE

Due to mental health problems, I have had great difficulty finding & keeping employment. I rely on Medicaid for access to medical care & prescriptions without which I would be a danger to myself & others. Also, I have relied on SSI for all my other needs most of my adult life as I struggle to become self supporting through employment. Even with the support of SSI & Medicaid, I have needed extra support from my mother to be able to get to a job when I have able to find work.—Curtis

SUPERIOR

I need total help with everything including help driving my chair. I like to volunteer in the community with my church and need a handicap vehicle which my family have to have in order for me to do what i love. They also keep me active in my yearly physical hoals , with gait walker walks, swimming at family cabin, and i feel safe with the ones i love that have taken care of me and know me best. I don't speak and could be in danger in an institution. I am a real person who should have choices like everyone else, along with quality Drs of my choice, and great medical care. Thank you. Please help us keep what we need to be healthy and happy..in place—Leah.

WASHBURN

The work I do taking care of my disabled young adult son are hours I can't spending working a job or building my business. IRIS pays for those hours, allowing me to provide my son with the best care without sacrificing financial stability. Both my children have disabilities. Medicaid's health insurance has allowed them to receive the medications, surgeries and devices they need to live a healthy and productive life. My daughter has been wearing hearing aids since she was 6 months old. Without Medicaid to cover those hearing aids, her world would be reduced to a chaotic world of whispered and half-heard sounds. –Michelle

WAUSAU

I became ill at 21 with MD and was almost placed in a nursing home because of a delay in getting disability, home care, and accessible living. I did not have family to rely on. However, just before that happened a community advocate got involved with the hospital and arranged all the survives I would need to live in the community. I am so thankful for that because I cannot imagine living in a nursing home at age 21. Prior to getting sick, I was attending an undergraduate program at UW-Madison. So after intensive rehabilitation and the support of numerous long-term programs, amazing in-home caregivers, doctors, DVR, etc. I was able to successfully return to UW-Madison and not only earn my BS but also earn my MS in rehabilitation psychology. While there are definite improvements that need to be made to these programs (problems largely resulting from massive budget cuts, not employing people with disabilities who actually understand what is needed to design and lead programs, lack of continuity of care between programs, the fact that people are largely looked at in terms of dollars and numbers instead of real, feeling people who are not stupid or helpless) there is absolutely no way that I would be living successfully and happily in the community but rather I really would be dead.—Name not provided

CONGRESSIONAL DISTRICT 8

ALGOMA

Honestly with out CCS I wouldn't be getting the help that I need with my son. The children waiver program has been a blessing to us. My son has many different things wrong. I wouldn't have been able to get him the autism services, transitioning skills, and such with out this program. We currently are on Badger Care Plus and in May we risk losing this program because of being over by \$200. I have been on both sides of badger care paying and not paying and I am grateful for the coverage. If we lose Badger Care I don't think I could afford health insurance for my family. We are currently paying in to Badger Care now. At least I know what coverage I get. – Stacie



APPLETON

My child is 10 and while learning to do so, CANNOT bathe, dress or feed himself. The daily living skills that are reinforced through autism therapy are essential. He cannot mimic, imitate, follow directions or problem solve like a non disabled child can. We also receive respite services. The needs of our child are similar to that of a toddler except it's not for just a year or two (he's 10). We cannot just hire a neighbor girl down the street to babysit so we can get a break. Also-the costs of co pays, deductibles, etc that are not covered by private insurance would be financially catastrophic for our family.—Jennifer

My son is currently receiving Autism Treatment Services. We would not be able to afford treatment without Medicaid. He also has a few expensive (over \$100 a month) prescriptions and with our primary insurance we would have to meet the deductible before insurance pays a portion.—Rebecca

I need services the minute I wake up everyday in order to get to the bathroom, take a bath, shave, prepare breakfast, eat it, get my clothes on, my shoes, check my health, make sure I don't fall down, get to work, do my work, etc., etc., etc.—Phillip

My ten year old son receives inhome autism therapy that is allowing him to grow to have the best life skills that he is able to have. We have Medicaid as a secondary insurance which helps to pay our deductible from my husband's employer based insurance. The strides that he has made in the past two years of receiving therapy have been incredible and the idea of losing or having time limited is very upsetting. Not having Medicaid as a backup would be an incredible hardship for our family. —Elizabeth

BLACK CREEK

I am a parent of two children with special needs that we adopted from Wisconsin Foster Care. Both of my children are wheelchair bound. They need help with all personal cares. We need lifts to manage their care and personnel to assist us. They have multiple medical needs - the oldest has cerebral palsy, Asperger's, anxiety, and limited use of limbs. He needs to be taken swimming for exercise and special care for his back due to spinal fusion. Our daughter is even more complex with cerebral palsy, seizure disorder, non-verbal, g-tube fed, eye gaze communication and severe tone issues. She is needing surgery again to relieve pain and give her the ability to stand in a stander. She suffers from digestive problems and sees several specialists in Madison to keep her healthy. We have had to modify our home to accommodate their needs - ceiling and stair lifts, vinyl flooring, ramp, door widening, bathroom remodel, etc. Taking care of our children is expensive and exhausting and taking a toll on my husband and I. We need all the help we can get to keep up.—Name not provided

CLINTONVILLE

I would not be able to work without the help. My daughter is 24/7 cares. She can not be left alone at all. My daughter is 20 years old but has a mind of a 5 year old. She does not realize safety issue. She will walk out in front of a car go with people she doesn't know that is some of her issue.to many to mention on here. she needs the extra help she gets from Medicare other wise we would be homeless because of me not being able to work without the help.— Penny

DE PERE

It would be impossible for my husband and I to both be employed if Our son didn't receive any assistance, and I am also a sister to an adult with disabilities and my mother is aging with medical issues so she would be unable to get out of these services were not available. —Amy

GREEN BAY

The supports allow my son to be able to receive autism therapy. This therapy helps him learn more, and grow more like other children his age. He has made so many gains from this therapy, that if it wasn't for the therapists, he wouldn't be as far along in his learning as he is today. With the cits, we are also able to receive such things as fidget toys and a weighted blanket, which would otherwise be too expensive for our family to afford.— Eileen



GREENVILLE

My severely autistic, non-verbal 10 year old daughter would not be able to function day to day without significant support and therapies. Without them, her quality of life (as well as that of her caregivers) would be severely compromised. She would not be able to communicate or take care of basic needs. She still relies on diapers and drinks from a bottle. It takes 2 people to brush her teeth or bathe her. We have to put her under anesthesia for basic dental check ups. The average person simply has no idea.—Catherine

KAUKAUNA

The Katie Beckett program prevents us from going under financially due to the extremely high costs associated with my daughter's seizure medicine. We have a high deductible health plan and her medication costs \$3600 per month. This would be a devastating expense for us.—Sherri

We carry a primary insurance and Medicaid as secondary. With us having 2 children with disabilities we often run across items that may not be covered by our primary insurance and often then the Medicaid will cover. This helps assure that both my children get the support they need. I have one child with more of a cognitive disability (Autism and seizures) and the other one with a physical disability so we basically cover the spectrum of needs. We also have 2 other children, so being a family of 6 the financial help is a plus. When I specifically look at my son with the physical disability these programs have helped us give him independence (ramp for his wheelchair, hard surface flooring, roll in shower) and the medical supplies to keep him safe (thickener for liquids, Pedisure for calories). I think the one message I would like to convey is with all of the help we get through these programs, there are also 'extra' needs not covered by the programs. So without these programs I don't think we could survive - they help create balance.—Kim

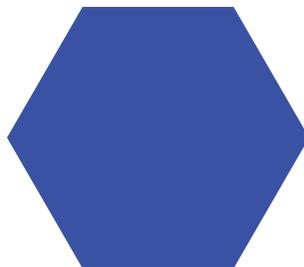
NEW LONDON

Our son is transitioning from school to work. He will always need a caregiver to help him live independently, and be safe in his community. IRIS funds are critical to allowing our son to live independently in his community, to have paid employment, to be a taxpayer and a consumer. He is healthy and thriving thanks to his enrollment in IRIS.—Mary

STURGEON BAY

She is unable to live independently and needs constant supervision to perform the simplest tasks of self cares etc. She is almost 26, needs training and retraining in Life Skills. She is in a temporary Adult Family Home right now. She works 8 hrs a week and has a job coach. She also takes classes at a center for people with disabilities. She will be starting Occupational therapy to work on Gross and Fine motor skills and ADLs to move her towards more independence. She cannot drive and needs to be transported to work, therapy, medical appointments, classes etc.—Nanette

My daughter's therapy saved our family. Four years ago we had a very frustrated young lady who couldn't express herself or ask for many things she wanted. This led to violent meltdowns which resulted in many scratches and bruises on myself, my husband, and our younger son, but also a couple of broken windows, a door, a tv, and multiple holes in our walls. We were blessed because our daughter was able to gain her speech which has virtually eliminated the meltdowns and has made our home a safe place again. I credit this to the countless hours of speech, occupational, and ABA therapy she receives. -Chastity





Wisconsin's Medicaid long-term care programs **make it possible for more than 6,000 children with disabilities and more than 60,000 seniors and adults with disabilities to live in the community** instead of institutions.



Wisconsin is **set to become one of the first states in the nation to end long-term care waiting lists** for both kids and adults with disabilities.





The Survival Coalition of Wisconsin Disability Organizations is a cross-disability coalition of more than 40 state and local organizations and groups. For more than 20 years, Survival has been focused on changing and improving policies and practices that support people with disabilities of all ages to be full participants in community life.

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