

**Summary of Comments at DRW Board Public Listening Session
Eau Claire, Wisconsin
June 25, 2010**

There were 39 people present at the DRW Board's lively Public Listening Session held in Eau Claire, Wisconsin on June 25, 2010. Twenty individuals chose to speak and an additional three individuals sent comments. They included:

- Consumers
- Family members of Family Care and Partnership members
- Parents of children in special education
- Local parent organization representatives
- Independent Living Center staff
- Disability service providers
 - ✓ adult family home provider
 - ✓ community rehabilitation program administrators
 - ✓ supported employment providers

Comments included:

Schools

- Kindergartens teachers resistant to having my child evaluated. They were surprised to discover a diagnosis of autism in 8th month of school year.
- Inadequate IEP in first grade.
- Staff used inappropriate restraints and placed student in segregated classroom as a "first resort," not last.

DVR

- I've been through many counselors but got no help.

Aging and Disability Resource Centers

- Not telling consumers about the IRIS (Medicaid self-directed long-term waiver) option.

IRIS

- IRIS consultants don't know enough about service options so IRIS participants can't make informed choices.

Family Care and Family Care Partnership

- Client's Bill of Rights being routinely violated in Family Care – denial of consumer choice and self-determination
- Provider residential rate cuts from managed care organizations lead to:
 - Involuntary moves
 - Reduced quality
 - Danger of reduced use of positive behavioral supports and increased use of psychotropic medications.
- Vocational provider rate cuts from managed care organizations

- Managed care organization forced move from one residential provider to another
- Managed care organizations ignoring views of guardians regarding placements
- Managed Care organizations creating categories of “preferred providers,” which appear to be cheapest – limits consumer choices.
- Managed care organization conducting functional screen without letting guardian and family know – resulting in errors in screen
- Design of functional screen is wrong – leaves out a lot of factors relevant to assessing individuals’ need for support
- Cuts in supportive home care and personal care hours from managed care organizations
- Managed care organization ignoring a family member’s past experience as victim of sexual assault and therefore increased vulnerability.
- Managed care organizations not developing enough transportation providers, which is precluding access to services and jobs.
- Mix-ups in billings when Family Care members are hospitalized
- State staff appears to favor Family Care over IRIS
- Family care case managers are not advocates for people with disabilities the way county case managers were in the old system.
- Some options not available to Family Care members that are available to IRIS participants, e.g., Wisconsin Neurodevelopmental Specialty Clinic at Sacred Heart Hospital in Eau Claire; this is inequitable.

Providers

- Rate cuts from managed care organizations
- Community Rehabilitation Programs concerned about state eliminating their programs and that people with disabilities won’t have access to broad array of service choices during the day.
- Need more transportation options so clients can get to services and from home to work

Other

- Parent with disabilities concerned about child custody issues