

# **An Introduction to Consumer Rights in the Family Care & IRIS Programs**

**Family Care & IRIS Ombudsman Program  
Disability Rights Wisconsin  
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# An Introduction to Consumer Rights in the Family Care & IRIS Programs

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# WISCONSIN'S MEDICAID LONG-TERM CARE OPTIONS FOR ADULTS WITH DISABILITIES

<p><b>1. What is it?</b></p>	<p><b>Family Care</b></p> <p>Managed Care</p> <p>Includes home and community based services and Medicaid "Forward" card long-term care services <b>but not</b> acute/primary medical care costs such as hospital stays, emergency room visits, doctor visits or medications. Instead, members use their Medicaid "Forward" card for these expenses. <i>See below.</i></p>	<p><b>IRIS – Include, Respect, I Self-Direct</b></p> <p>Total self-directed supports option. Not managed care.</p> <p>Includes home and community based services <b>but not</b> all long-term care Medicaid "Forward" card services and no acute/primary medical care costs such as hospital stays, emergency room visits, doctor visits or medications. Instead, members use their Medicaid "Forward" card for these expenses.</p> <p>Participants purchase services, supports and goods within an individualized budget amount. Participants make purchases and hire service providers directly.</p> <p>A Fiscal Services Agency assists with bill paying, taxes, and other employment related services.</p>	<p><b>Family Care Partnership</b></p> <p>Managed Care</p> <p>Integrates a person's long-term care services <b>and</b> acute and primary medical services <b>and</b> prescription medications.</p>	<p><b>PACE – Program of All-Inclusive Care for the Elderly – Age 55+</b></p> <p>Managed Care</p> <p>Coordinates all services, from home to hospital through interdisciplinary team and use of adult day centers.</p>
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<p><b>2. In what counties is the program available?</b></p>	<p><b>Family Care</b></p> <p>Ashland, Barron, Bayfield, Buffalo, Burnett, Chippewa, Clark, Columbia, Crawford, Dodge, Douglas, Dunn, Eau Claire, Fond du Lac, Green, Green Lake, Iron, Jackson, Jefferson, Juneau, Kenosha, La Crosse, Lafayette, Marathon, Marquette, Milwaukee, Monroe, Ozaukee, Pepin, Pierce, Polk, Portage, Price, Racine, Richland, Rusk, Sauk, Sawyer, Sheboygan, St. Croix, Trempealeau, Vernon, Walworth, Washburn, Washington, Waukesha, Waushara, Wood</p>	<p><b>IRIS – Include, Respect, I Self-Direct</b></p> <p><i>Same as Family Care.</i></p>	<p><b>Family Care Partnership</b></p> <p>Chippewa, Columbia, Dane, Dodge, Dunn, Eau Claire, Jefferson, Kenosha, Milwaukee, Ozaukee, Pierce, Racine, Sauk, St. Croix, Washington, Waukesha</p>	<p><b>PACE – Program of All-Inclusive Care for the Elderly – Age 55+</b></p> <p>Milwaukee and Waukesha</p>
<p><b>3. Eligibility Criteria</b></p>	<p><u>Functional Eligibility</u></p> <p>-Frail elders, people with physical disabilities or developmental disabilities who meet nursing home level of care requirements</p> <p><u>Financial Eligibility</u></p> <p>-Medicaid financial levels for long-term care</p> <p><u>Other:</u></p> <p>-County resident</p>	<p><u>Functional Eligibility</u></p> <p>-Frail elders, people with physical disabilities or developmental disabilities who meet nursing home level of care requirements</p> <p><u>Financial Eligibility</u></p> <p>-Medicaid financial levels for long-term care</p> <p><u>Other:</u></p> <p>-County resident</p>	<p><u>Functional Eligibility</u></p> <p>-Frail elders, people with physical disabilities or developmental disabilities who meet nursing home level of care requirements</p> <p><u>Financial Eligibility</u></p> <p>-Medicaid financial levels for long-term care</p> <p><u>Other:</u></p> <p>-County resident</p>	<p><u>Functional Eligibility</u></p> <p>-Age 55+ who meet nursing home level of care requirements</p> <p><u>Financial Eligibility</u></p> <p>-Medicaid financial levels for long-term care</p> <p><u>Other:</u></p> <p>-County resident</p>
<p><b>4. Who Operates the Program?</b></p>	<p>Managed Care Organization</p>	<p>The consumer, with the budget provided. Consumers work with IRIS Consultant Agency and Fiscal Services Agency</p>	<p>Managed Care Organization</p>	<p>Managed Care Organization</p>
<p><b>5. Long-term Care</b></p>	<p><i>Services depend on</i></p>	<p>-Adaptive Aids</p>	<p><i>Services depend on</i></p>	<p><i>Services depend on</i></p>

Services	Family Care	IRIS – <u>I</u> nclude, <u>R</u> espect, <u>I</u> Self-Direct	Family Care Partnership	PACE – Program of All-Inclusive Care for the Elderly – Age 55+ <i>individual's outcomes and may include:</i>
<ul style="list-style-type: none"> <li>-Adaptive Aids</li> <li>-Adult Day Care</li> <li>-Alcohol and other Drug Abuse Day Treatment</li> <li>-Care/Case Management</li> <li>-Communication Aids/Interpreter Services</li> <li>-Community Support Program</li> <li>-Consumer Directed Supports</li> <li>-Consumer Education and Training</li> <li>-Counseling and Therapeutic Resources</li> <li>-Daily Living Skills Training</li> <li>-Day Center</li> <li>-Service/Treatment</li> <li>-Durable Medical Equipment</li> <li>-Financial Management Services</li> <li>-Home Health</li> <li>-Home Modifications</li> <li>-Housing Counseling</li> <li>-Meals: Home-delivered</li> <li>-Medical Supplies</li> <li>-Mental Health Day Services/Treatment</li> <li>-Mental Health Services</li> <li>-Nursing Facility</li> <li>-Nursing Services</li> <li>-Occupational Therapy</li> </ul>	<ul style="list-style-type: none"> <li>-Adult Day Care</li> <li>-Adult Foster Care (1-4 bed)*</li> <li>-Communication Aids</li> <li>-Community-Based Residential Facility</li> <li>-Consumer Education &amp; Training</li> <li>-Counseling &amp; Therapeutic Resources</li> <li>-Customized Goods &amp; Services*▲</li> <li>-Daily Living Skills Training*</li> <li>-Day Services</li> <li>-Home-delivered Meals</li> <li>-Home Modifications</li> <li>-Housing Counseling</li> <li>-Housing Start-Up</li> <li>-Personal Emergency Response System</li> <li>-Pre-Vocational Services (excludes sheltered workshop services)</li> <li>-Residential Care</li> <li>-Apartment Complex</li> <li>-Relocation Related</li> <li>-Respite*</li> <li>-Skilled Nursing*</li> <li>-Specialized Medical Equipment &amp; Supplies*</li> <li>-Support Broker</li> <li>-Supported Employment*</li> <li>-Supportive Home Care*</li> <li>-Transportation*</li> <li>-Vocational Futures</li> </ul>	<ul style="list-style-type: none"> <li>-Adaptive Aids</li> <li>-Adult Day Care</li> <li>-Alcohol and other Drug Abuse Day Treatment</li> <li>-Care/Case Management</li> <li>-Communication Aids/Interpreter Services</li> <li>-Community Support Program</li> <li>-Consumer Directed Supports</li> <li>-Consumer Education and Training</li> <li>-Counseling and Therapeutic Resources</li> <li>-Daily Living Skills Training</li> <li>-Day Center</li> <li>-Service/Treatment</li> <li>-Durable Medical Equipment</li> <li>-Financial Management Services</li> <li>-Home Health</li> <li>-Home Modifications</li> <li>-Housing Counseling</li> <li>-Meals: Home-delivered</li> <li>-Medical Supplies</li> <li>-Mental Health Day Services/Treatment</li> <li>-Mental Health Services</li> <li>-Nursing Facility</li> <li>-Nursing Services</li> <li>-Occupational Therapy</li> </ul>	<ul style="list-style-type: none"> <li>-Adaptive Aids</li> <li>-Adult Day Care</li> <li>-Alcohol and other Drug Abuse Day Treatment</li> <li>-Care/Case Management</li> <li>-Communication Aids/Interpreter Services</li> <li>-Community Support Program</li> <li>-Consumer Directed Supports</li> <li>-Consumer Education and Training</li> <li>-Counseling and Therapeutic Resources</li> <li>-Daily Living Skills Training</li> <li>-Day Center</li> <li>-Service/Treatment</li> <li>-Durable Medical Equipment</li> <li>-Financial Management Services</li> <li>-Home Health</li> <li>-Home Modifications</li> <li>-Housing Counseling</li> <li>-Meals: Home-delivered</li> <li>-Medical Supplies</li> <li>-Mental Health Day Services/Treatment</li> <li>-Mental Health Services</li> <li>-Nursing Facility</li> <li>-Nursing Services</li> <li>-Occupational Therapy</li> </ul>	<ul style="list-style-type: none"> <li>-Adaptive Aids</li> <li>-Adult Day Care</li> <li>-Alcohol and other Drug Abuse Day Treatment</li> <li>-Care/Case Management</li> <li>-Communication Aids/Interpreter Services</li> <li>-Community Support Program</li> <li>-Consumer Directed Supports</li> <li>-Consumer Education and Training</li> <li>-Counseling and Therapeutic Resources</li> <li>-Daily Living Skills Training</li> <li>-Day Center</li> <li>-Service/Treatment</li> <li>-Durable Medical Equipment</li> <li>-Financial Management Services</li> <li>-Home Health</li> <li>-Home Modifications</li> <li>-Housing Counseling</li> <li>-Meals: Home-delivered</li> <li>-Medical Supplies</li> <li>-Mental Health Day Services/Treatment</li> <li>-Mental Health Services</li> <li>-Nursing Facility</li> <li>-Nursing Services</li> <li>-Occupational Therapy</li> </ul>

	<p align="center"><b>Family Care</b></p> <ul style="list-style-type: none"> <li>-Personal Care</li> <li>-Personal Emergency Response System</li> <li>-Physical Therapy</li> <li>-Prevocational Services</li> <li>-Relocation Services</li> <li>-Residential Services (RCACs, CBRFs, AFHs)</li> <li>-Respite Care</li> <li>-Specialized Medical Equipment and Supplies</li> <li>-Specialized Transportation Services</li> <li>-Speech and Language Pathology Services</li> <li>-Supported Employment</li> <li>-Supportive Home Care</li> <li>-Vocational futures planning</li> </ul>	<p align="center"><b>IRIS – Include, Respect, I Self-Direct</b></p> <p>Planning</p> <p><i>* May be provided by a legally responsible adult and/or family member who meets qualifications.</i></p> <p>▲ Definition of: <i>Other Participant Customized Goods and Services</i></p> <p>“a service, support or good that enhance the participant’s opportunities to achieve outcomes related to living arrangement, relationship, community inclusion, work and functional or medical status.”</p> <p>Consumers may use their Medicaid <i>Forward</i> card to purchase <u>personal care</u> services or choose the IRIS self-directed option for personal care and receive an additional budget for this purpose.</p>	<p align="center"><b>Family Care Partnership</b></p> <ul style="list-style-type: none"> <li>-Personal Care</li> <li>-Personal Emergency Response System</li> <li>-Physical Therapy</li> <li>-Prevocational Services</li> <li>-Relocation Services</li> <li>-Residential Services (RCACs, CBRFs, AFHs)</li> <li>-Respite Care</li> <li>-Specialized Medical Equipment and Supplies</li> <li>-Specialized Transportation Services</li> <li>-Speech and Language Pathology Services</li> <li>-Supported Employment</li> <li>-Supportive Home Care</li> <li>-Vocational futures planning</li> </ul>	<p align="center"><b>PACE – Program of All-Inclusive Care for the Elderly – Age 55+</b></p> <ul style="list-style-type: none"> <li>-Personal Care</li> <li>-Personal Emergency Response System</li> <li>-Physical Therapy</li> <li>-Prevocational Services</li> <li>-Relocation Services</li> <li>-Residential Services (RCACs, CBRFs, AFHs)</li> <li>-Respite Care</li> <li>-Specialized Medical Equipment and Supplies</li> <li>-Specialized Transportation Services</li> <li>-Speech and Language Pathology Services</li> <li>-Supported Employment</li> <li>-Supportive Home Care</li> <li>-Vocational futures planning</li> </ul>

	<b>Family Care</b>	<b>IRIS – Include, Respect, I Self-Direct</b>	<b>Family Care Partnership</b>	<b>PACE – Program of All-Inclusive Care for the Elderly – Age 55+</b>
<b>6. Primary Care Services for Acute and Chronic Conditions</b>	<p>No, so members use Medicare and/or Medicaid “Forward Card” to purchase:</p> <ul style="list-style-type: none"> <li>-Hospice</li> <li>-Physician Services</li> <li>-Hospitalization</li> <li>-Prescription Medications</li> <li>-Dental Care</li> <li>-Foot Care – Podiatry</li> <li>-Vision (including eyeglasses)</li> </ul>	<p>No, so members use Medicare and/or Medicaid “Forward Card” to purchase:</p> <ul style="list-style-type: none"> <li>-Hospice</li> <li>-Physician Services</li> <li>-Hospitalization</li> <li>-Prescription Medications</li> <li>-Dental Care</li> <li>-Foot Care – Podiatry</li> <li>-Vision (including eyeglasses)</li> <li>-Nursing Care</li> <li>-Mental Health or Drug and Alcohol Treatment</li> <li>-Physical, Speech or Occupational Therapy</li> <li>-Wheelchair and Other Equipment</li> <li>-Medical Supplies</li> </ul>	<p>Yes, <i>unlike Family Care</i>, Partnership includes:</p> <ul style="list-style-type: none"> <li>-Hospice</li> <li>-Physician Services</li> <li>-Hospitalization</li> <li>-Prescription Medications</li> <li>-Dental Care</li> <li>-Foot Care – Podiatry</li> <li>-Vision (including eyeglasses)</li> </ul> <p>Members must use physicians in their MCO’s provider network. This may include a member’s current physician.</p>	<p>Yes, but members use PACE’s physicians.</p>
<b>7. Funding</b>	<p>Medicaid pays MCO a flat rate to provide services needed to support consumer’s outcomes.</p>	<p>Long-Term Care Functional Screen determines individual’s budget amount based on person’s unique needs.</p>	<p>Medicare and Medicaid pay the MCO a flat rate to provide services needed to support consumer’s outcomes.</p>	<p>Medicare and Medicaid pay the MCO a flat rate to provide services needed to support consumer’s outcomes.</p>
<b>8. Unique features and Choice</b>	<p>-Interdisciplinary Care Team of consumer, any other</p>	<p>-Individuals receive support through an IRIS</p>	<p>-Interdisciplinary Care Team of consumer, any</p>	<p>-Interdisciplinary teams deliver and oversee care –</p>

	<p><b>Family Care</b></p>	<p><b>IRIS – Include, Respect, I Self-Direct</b></p>	<p><b>Family Care Partnership</b></p>	<p><b>PACE – Program of All-Inclusive Care for the Elderly – Age 55+</b></p>
	<p>people consumer chooses, <i>and</i> the MCO’s social worker and nurse; Team develops care plan and coordinate services.</p> <ul style="list-style-type: none"> <li>- Services and providers from the MCO’s provider network, and/or uses self-directed supports option to purchase some or all supports and services.</li> <li>-Includes <u>only</u> home and community based services and long-term care.</li> <li>Members continue to use Medicaid <i>Forward</i> card for medical services, including physician, hospitalization, medications.</li> <li>-Must use MCO’s provider network.</li> </ul>	<p>Consultant Agency, and may choose to purchase services of a support broker, if necessary.</p> <ul style="list-style-type: none"> <li>-Participant “self-directs” care. Participants purchase services, supports and goods within an individualized budget amount.</li> <li>-Includes <u>only</u> home and community based services and some long term care services. Members continue to use Medicaid <i>Forward</i> card for medical services, including physician, hospitalization, medications.</li> <li>-Participants hire service providers and receive support from IRIS consultant for service planning and from a Fiscal Services Agency for bill paying, taxes and other employment related services.</li> </ul>	<p>other people consumer chooses, <i>and</i> the MCO’s social worker, nurse, <b>nurse practitioner</b>, and <b>physician</b>: Team develops care plan and coordinates services.</p> <ul style="list-style-type: none"> <li>- Services and providers from the MCO’s provider network, and/or uses self-directed supports option to purchase some or all of supports and services.</li> <li>-Includes <u>both</u> long-term care and medical services, including physician, hospitalization, medications.</li> <li>-Must use MCO’s provider network.</li> </ul>	<ul style="list-style-type: none"> <li>-Only for age 55+</li> <li>-Strong reliance on adult day centers, which are site of many services</li> <li>Includes <u>both</u> long-term care and medical services, including physician, hospitalization, medications.</li> <li>-Must use PACE’s physicians.</li> </ul>

## **What Are Long-Term Care Outcomes?**

You and your Family Care or Partnership Team will use goals to make your member-centered plan. These goals are called “outcomes.” This helps to make sure that your plan is right for *you*. That’s called being “member-centered.” A member-centered plan shows what you like and how you want to live your life.

There are 12 outcome areas. You and your team will talk about each of these outcome areas together. Your outcomes will guide you and your team as you develop your member-centered plan together.

### ***Outcome Tips:***

- **Think about these outcome areas before you meet with your team.** Take your time to decide what means the most to you.
- **Think about your outcomes, not the services you have now.** There is often more than one way to help reach a goal or “outcome.” Be clear about what your goal is first. Then you can explore different ways to meet that goal.
- **Outcomes are about what YOU want for your life.** What you want for your life may be different from what your friends or family want for you, or what your nurse or social worker want for you. That’s okay!

## **What Are The Outcome Areas?**

1. I decide where and with whom I live.
2. I make my own decisions regarding my supports and services.
3. I work or do other activities that are important to me.
4. I have relationships with family and friends I care about.
5. I do things that are important to me.
6. I am involved in my community.
7. My life is stable.
8. I am respected and treated fairly.
9. I have privacy.
10. I have the best possible health.
11. I feel safe.
12. I am free from abuse and neglect.

## What Are *Your* Outcomes?

The 12 outcome areas provide a guide for you and your Family Care/Partnership team to discuss what is important to you in your daily life. Take time to think about these outcome areas before you meet with your team because it can take a while to figure out what's most important to you.

This worksheet is designed to help you think about the 12 outcome areas and identify your personal outcomes.

### **Remember:**

- **Think about these outcome areas before you meet with your team.** It may take some time to figure out what means the most to you. You do not have to decide on all of your outcomes right away. Focus on the ones that are most important to you.
- **Outcomes are about your point of view.** Your preferred outcomes may be different from those of your nurse, social worker, or friends and family. Put your outcomes in your own words.
- **Outcome areas are not the same as outcomes.** You have to discuss the outcome areas to arrive at your personal outcomes. Consider your goals: what are you trying to accomplish?
- **Outcomes are not services.** A service or support is a way to achieve an outcome. Identify your outcomes first, and then you can discuss the different ways of achieving a particular outcome. If you're stuck on a particular service, think about why that service is so important to you.
- **Identify any difficulties you might face in achieving your outcomes.** Think about how you might work with those difficulties.

### **1. I decide where and with whom I live.**

- Are you living where you want to live now? Are you living with people you want to live with?
  - Can you have the visitors you want when you want?
  - Can you choose when you'd like to go to sleep? Can you choose what and when you'd like to eat? Can you choose the music you'd like to listen to and how you'd *like* to decorate your place?
  - Can you safely move around in all areas of your home?
  - Do you enjoy spending time in your home?
  - Do you want to continue living in this place? Would you like to keep living with the same people?
  - What are your other options?
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**2. I make my own decisions regarding my supports and services.**

- Are you receiving the services and supports you need to live the life you want each day? What do your supports and services help you do?
  - Think about your services and supports. Are they the right type and in the right amount?
  - Do your services and supports help you with the things that are most important to you?
  - Do you have control over your supports and services? Do you receive them when and how you want them? Can you refuse or reschedule them, if you want to?
  - Do you have choices of providers? Do you know about your choices? Do you know how to make a change in providers, if desired? Are you comfortable asking for changes?
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**3. I work or do other activities that are important to me.**

- Do you control your schedule for the day?
  - Do you know your choices for scheduling your daily activities?
  - Are your choices for activities respected and honored?
  - How important is it to you to have a set routine?
  - Are you comfortable with your daily schedule?
  - Can you change your schedule, if you want to?
  - What are the limits on your schedule? Do you have anything else you have to do, such as a job or community activities?
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**4. I have relationships with family and friends I care about.**

- Are there friends and family members with whom you like to spend time?
  - Does the place you live in support real relationships with your friends and family?
  - Do you see your friends and family as often as you would like to see them?
  - Is your time with them the way you want it? For example, do you like the way you communicate with them privately by telephone, letter, email, or in person?
  - Do you get support from friends and family? Is it the right amount – too much, too little, or just right? Do your friends and family think about what you want?
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**5. I do things that are important to me.**

- What types of activities are you involved in? Do you enjoy these activities?
  - Are there activities that you would like to do that you are not currently doing?
  - Are the activities you are involved in important to you? Are they rewarding?
  - Do you feel that your activities are making your life meaningful? Are there activities that could help you find the meaning you want in your life?
  - Are you currently employed? If not, would you like to be employed? If you are employed, do you like your type of employment? Are you working the right amount, not too much and not too little?
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**6. I am involved in my community.**

- What does “community” mean to you?
  - Do you get information about activities in your community? Do people ask you to join in community activities?
  - Are you involved in activities in your community?
  - Do you feel connected to other members of your community? Do you feel included as a member of this community?
  - Do you have a chance to do things that are fun and relaxing?
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**7. My life is stable.**

- What does “stability” mean to you?
  - Is the amount of turnover in people who work with you okay?
  - Are your finances affecting your stability?
  - Are you comfortable with small changes or disruptions that can happen at any time? For example, how do you feel if a worker is out sick for the day?
  - Do you feel ready for changes in the future? Would you like help in making plans for the future?
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**8. I am respected and treated fairly.**

- What does “respect” mean to you?
  - Are you treated with respect in your personal relationships? By service providers? As a member of the community?
  - What could help you be treated with more respect in ways that are important to you?
  - What does fair treatment mean to you?
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**9. I have privacy.**

- Can you choose to be alone or with others, when you want?
- Do you have places you can go to be alone?
- Do you control who comes into your personal space?
- Are you able to communicate in private through letters, email, telephone, or in person?
- Do you control how your personal information is shared with others?
- Are your services and supports provided in a way that makes you comfortable and protects your privacy?

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**10. I have the best possible health.**

- What does “health” mean to you?
- What health concerns are important to you? Would you like to know more about your health conditions?
- What are your health goals?
- What are some potential difficulties in achieving these goals? How might you approach these difficulties?

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**11. I feel safe.**

- What does “safety” mean to you?
- Do you have any worries about safety?
- What do you do to feel safe where you live, work, or in the community?
- Can you safely do the things you want to do at home, work, or in the community?
- What would make you feel safer?
- Are your decisions about safety and risk respected by others?

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**12. I am free from abuse and neglect.**

- What do “abuse” and “neglect” mean to you?
- Do you have any worries about abuse or neglect right now? This includes concerns about abuse and neglect of yourself, your property, and your finances.
- Do you feel threatened by anyone?
- Are you experiencing the effects of any abuse or neglect that occurred in the past?
- Are you worried about abuse or neglect in the future?

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# **The Long-Term Care Functional Screen**

## ***What is the Functional Screen?***

- Aging & Disability Resource Centers use the Screen to determine your functional eligibility for services. The Screen does not determine your financial eligibility, residency, and other non-financial requirements for eligibility.
- The Screen collects information about your ability to perform important daily activities.
- A Screener will interview you about the types of assistance you need from others to complete these activities.

## ***How is it used for people transitioning from Medicaid Waivers to Family Care, Partnership, PACE, or IRIS?***

- Those individuals who are currently receiving services through one of the Medicaid waiver programs (CIP-I, CIP-II or COP-W) must continue to meet the functional eligibility requirements contained in the Screen in order to be eligible for these long-term care programs. This is called “passing the screen.”
- If you are currently receiving services through the CIP-I, CIP-II or COP-W programs, the County or the ADRC will contact you to conduct the Screen.
- If you disagree with the results of your latest Screen, consider contacting an advocate for assistance.

## ***Below are some tips to help you get ready for your Screen.***

### **Be honest.**

- Ask questions when you do not understand what the Screener is asking you.
- Speak up if you feel that the Screener has misunderstood you.
- Give the Screener as accurate a picture as possible of your daily activities.

### **Describe your typical day.**

- The Screener needs to know what your needs are on your best and worst days, and how often you have good and bad days. If you have good and bad days, the screener needs to know how often the amount and type of help you need changes.
- It's natural to want to describe yourself at your best or downplay some of your challenges, but to make sure that your Screen is accurate, so that you qualify for and receive what you need, think of yourself when you need the greatest amount of assistance.

- Even though you may have many “good days” when you can complete an activity independently, the Screener needs to know what your needs are on days when you are having the most difficulty.

**Break down each task.**

- Be sure to explain all the small ways that other people may help you out. For example, if you take medication, does someone help by sorting the pills for you each day? Does somebody pick your medications up from the pharmacy for you? Does your friend make sure you have fresh food in your refrigerator? Does your neighbor carry your laundry up the stairs?
- Tell the Screener about any adaptive equipment you may use in your home, such as a walker, cane, or grab bars.

**Choose a time and place for the interview that makes you comfortable. Invite others to be with you at your Screen.**

- If you would prefer to have a friend, family member, or advocate around while you answer questions, tell your Screener about this preference and reschedule the Screen.
- If the Screen is taking a long time and you feel tired, ask the Screener to finish on a different day.

**Consider asking for a Re-Screen.**

- If you are surprised by the results of your Screen, you can request a new one.
- You may want to contact an advocate or ask a friend or family member to attend the second one to make sure that you are giving the Screener the most accurate picture of how you complete everyday activities.

# Wisconsin Long-Term Care Functional Screen Components

## ACTIVITIES OF DAILY LIVING (ADLs)

- Bathing
- Dressing
- Eating
- Mobility in the home
- Toileting
- Transferring

## INSTRUMENTAL ACTIVITIES OF DAILY LIVING (IADLs)

- Meal preparation
- Medication management
- Money management
- Laundry and/or Chores
- Ability to use the telephone
- Arrange and use transportation
- Ability to function at a job site

## OTHER COMPONENTS

- Living Situation
- Supports (formal and informal)
- Behavior
- Risk Factors

Sources: Wisconsin Administrative Code DHS § 10.33 and DHS LTCFS Instructions  
Disability Rights Wisconsin  
Winter/Spring 2011

# WISCONSIN FAMILY CARE PROGRAM RESOURCE ALLOCATION DECISION METHOD

## 1. What is the need, goal, or problem?

- The member and team staff together identify the core issue. To do so, keep asking, “Why?”
- Whose problem is it? Does the member see it as a problem, or do (some) staff?
- If the member/family is asking for an item or service, explore the reasons for the request.

## 2. Does it relate to the person’s assessment, service plan, and desired outcomes?

- “Desired outcomes” are those in FC’s mission and the person’s assessment and service plan.
- Is it essential to the person’s health or safety? (What would happen if the need weren’t met?)
- How does it relate to ADLs or IADLs, independence, and other desired outcomes in the plan?
- Whose responsibility is it to address this particular need or problem?

## 3. How could the need be met?

- What’s been tried in the past? How do people usually address similar needs?
- How could the member help solve this need/problem? What ideas does s/he have? Could adaptations in people, environment, or equipment help member meet this need? Can s/he afford to pay for this, or share cost if appropriate?
- What informal resources (family, friends, volunteers) might be able to help?
- What other community resources (e.g., thrift stores, senior center, organizations) could be sought?
- What options could MCO consider (e.g., loaner program, rental vs. purchase, incremental goals)?

## 4. Are there policy guidelines to guide the choice of option?

- If yes, those should be followed.<sup>1</sup>

## 5. Which option does the member (and/or family) prefer?

## 6. Which option(s) is/ are the most effective and cost-effective in meeting the desired outcome(s)?

- “Effective” means it works to achieve a desired outcome.<sup>2</sup> Consider both short-term and long-term outcomes.
- “Cost effective” means “effectively achieving a desired outcome (meeting a need) at reasonable cost and effort.”
- “Reasonable” alternatives are those that:
  - Would probably solve the problem, i.e., are effective in meeting the desired outcome for peers (persons with similar needs).
  - Would not have significant negative impact on desired outcomes.
- Note that “cost effective” is always tied to outcomes, and that it does not always mean “least expensive” or “inexpensive.”
- How will we measure success/outcomes in order to gauge cost-efficiency?
- Is member committed to using the suggested service/product?

## 7. Explain, Dialogue, Negotiate Consumer can appeal MCO’s decision.

<sup>1</sup> If related policies seem to lead to unacceptable conclusions in a particular case, the policy needs to be corrected or amended with criteria to allow exceptions. Please refer to management for follow up with DHS.

<sup>2</sup> “Desired outcomes” are the Family Care LTC consumer outcomes as prioritized by the individual and family.



## A Few Good SDS Resources

- Self-Determination Wisconsin (a Wisconsin DD Board project)
  - Dennis Harkins: [dwharks@aol.com](mailto:dwharks@aol.com)
  - Naomi Silver (River Falls): [naomi.wwasd@gmail.com](mailto:naomi.wwasd@gmail.com)
  
- Wisconsin Independent Living Centers
  - IndependenceFirst: <http://independencefirst.org/home/>
  
- Websites & Toll-Free Phone Numbers
  - Self-Determination Wisconsin (a web site on SDS in Wisconsin): [sdwisconsin.org](http://sdwisconsin.org)
  - Wisconsin DHS Long-Term Care: <http://dhs.wisconsin.gov/lc/lcare/>; <http://dhs.wisconsin.gov/bdds/iris/> and “Tell Me More about SDS in Managed Care” <http://dhs.wisconsin.gov/publications/P0/p00088L.pdf>
  - IRIS Information through ICA: 1-888-515-IRIS (4747), or on the web at [wisconsin-iris.com/](http://wisconsin-iris.com/)
  - Waisman Center: <http://cow.waisman.wisc.edu/sdswi.html>
  - Center for Self-Determination: A nationwide alliance of people with disabilities, family members, and trainers and consultants who work together to promote self-determination for people with disabilities. <http://www.centerforself-determination.com/>
  - In Control United Kingdom (the finest web site anywhere on what we refer to in Wisconsin as SDS) – Full of excellent resources for people who rely upon services and supports, and those who provide them: <http://www.in-control.org.uk>

## **Have a Problem with Family Care, Partnership, or IRIS?**

### ***You Have the Right to Written Notice***

Family Care and Partnership members have the right to receive *written notice* of any decision by a Managed Care Organization (MCO) related to their services. This includes a MCO's decision to deny, reduce, or terminate a service. Members have the right to receive this written notice at least *10 days* before the MCO plans to make any change.

### ***You Have the Right to Appeal***

If you disagree with a Family Care or Partnership MCO's decision, you have the right to both a meeting with the MCO's Grievance & Appeals Committee *and* a "fair hearing" with the State. If you want to meet with the MCO's Grievance & Appeals Committee, you must do that first, before your fair hearing with the State. If you do not want to meet with the Committee, you may go straight to a fair hearing.

- ***State Fair Hearing***

If you request a fair hearing with the State's Division of Hearings and Appeals, an informal hearing will be held in front of an independent judge. You may bring an advocate, friend/family member, witnesses, and evidence to this hearing.

- ***MCO's Grievance & Appeals Committee***

If you request a meeting with a MCO's Grievance & Appeals Committee, you will meet with a Committee made up of MCO employees and at least one person who is (or represents someone who is) also receiving services from the MCO. You may bring an advocate, friend/family member, witnesses, and evidence to this meeting. You have the right to meet in-person with this Committee.

### ***You Have the Right to Continuing Your Services during an Appeal***

If you appeal a Family Care or Partnership MCO's decision before the date on which it planned to change your service(s), you can ask that the MCO continue providing your same service(s) during your appeal. The MCO must keep providing the service(s) if you make this request before the date it planned to change your service(s).

Note: You might have to repay the MCO for the cost of a service if you lose your appeal. This won't happen if it would be a significant and substantial financial burden for you.

### ***You May Request a Review by MetaStar***

You may request a review by the Wisconsin Department of Health Services' external quality review organization, MetaStar. MetaStar will review your situation and try to resolve it informally. It cannot change the MCO's decision, but it can make a recommendation to the State. If the State agrees with MetaStar, the State will require the MCO to change its decision. MetaStar reviews your case automatically if you request a fair hearing.

### ***You Have the Right to Request a Change to Your IRIS Budget Allocation***

If you are an IRIS participant, you may request review and approval for time-specific, infrequent expenses or an increase for your on-going monthly individual budget allocation. You must submit this request through your IRIS Consultant.

### ***You Have the Right to Assistance with Your Appeal***

The following independent advocacy agencies may be able to provide you with free assistance with your appeal. These agencies advocate for Family Care or Partnership members and IRIS participants, including representation at MCO Grievance and Appeals Committee meetings, IRIS reviews, and State fair hearings in some cases. For Family Care or Partnership members,

a MCO Member Rights Specialist is available to assist you with filing the paperwork for your appeal, but please note that he or she cannot represent you in your appeal.

Disability Rights Wisconsin Family Care, Partnership, & IRIS Ombudsman Program  
(members age 18 to 59)

**Madison**

131 W. Wilson St., Suite 700  
Madison, WI 53703  
608-267-0214  
TTY: 888-758-6049  
Fax: 608-267-0368  
Toll Free: 800-928-8778\*

**Milwaukee**

6737 W. Washington St., Suite 3230  
Milwaukee, WI 53214  
414-773-4646  
TTY: 888-758-6049  
Fax: 414-773-4647  
Toll Free: 800-708-3034\*

**Rice Lake**

217 W. Knapp St.  
Rice Lake, WI 54868  
715-736-1232  
TTY: 888-758-6049  
Fax: 715-736-1252  
Toll Free: 877-338-3724\*

**\* For people with disabilities and their families.**

Wisconsin Board on Aging and Long-Term Care (Family Care/Partnership members age 60 and older)  
Toll Free (800) 815-0015

## Long-Term Care: Abbreviations and Definitions

Activities of Daily Living (ADLs)	Six ADLs: Bathing, Dressing, Eating, Mobility, Toileting, and Transferring from one surface to another such as a bed to chair.
Aging and Disability Resource Center (ADRC)	ADRCs are designed to be the first place to go with aging and/or disability questions. ADRCs are service centers that provide a place for the public to get accurate, unbiased information related to aging or living with a disability. The ADRC also processes enrollment for those entering long-term care programs. In Milwaukee County, the ADRC is split between an Aging Resource Center (ARC) and a Disability Resource Center (DRC).
Comprehensive Assessment	An initial and on-going process used by the Family Care interdisciplinary team to identify a member's needs and strengths, preferences, natural supports, and outcomes.
Department of Health Services (DHS)	A state agency that contracts with MCOs or an IRIS Consultant Agency to provide Family Care, Partnership, and IRIS services.
Exceptional Expense/Adjustment Allocation (EE/AA) Committee	IRIS process to seek review and approval for time-specific, infrequent expenses, or to increase the on-going monthly individual budget allocation.
Fair Hearing	An informal proceeding before an independent judge in which a consumer or a consumer's representative presents the reasons why an action by an agency or managed care organization is incorrect.
Family Care	Comprehensive managed long-term care (not acute/primary) Medicaid waiver program in Wisconsin for frail elders and adults with physical and/or developmental disabilities; Interdisciplinary team made up of consumer, others consumer chooses, and a social worker and nurse develop care plan and coordinate services.
Family Care Partnership	See <i>Family Care</i> above. A managed care program formerly known as the Wisconsin Partnership Program; Integrates acute health <u>and</u> long-term care support services.

\* Includes excerpts from the DHS website at <http://dhs.wisconsin.gov/programs/ltc.htm>

Financial Services Agency (FSA)	Pays IRIS participants' selected providers out of participants' monthly budgets after participants approve payments; Handles record-keeping, other paperwork, and pays required employee taxes.
IRIS (Include, Respect, I Self-Direct)	A program for frail elders and adults with physical and/or developmental disabilities that allows participants to self-direct publicly funded, community-based long-term care supports and services using an individually assigned monthly budget allocation.
IRIS Consultant (IC)	The individual within the IRIS Consultant Agency who provides information about IRIS, provides support and assistance to IRIS participants, and processes IRIS paperwork.
IRIS Consultant Agency (ICA)	Administers the IRIS program.
Individual Service Plan (ISP)	A document that the interdisciplinary team, including the member, develops and implements based on information received from the ADRC and the MCO's initial assessment of the member's needs; Lists the types of services and supports authorized by the interdisciplinary team, the amount, the frequency and duration of each service, and the providers that will furnish each service.
Instrumental Activities of Daily Living (IADLs)	Six IADLs: Management of medications and treatments, Meal preparation and nutrition, Money management, Using the telephone, Arranging and using transportation, and the Ability to function at a job site.
Interdisciplinary Team (IDT)	In Family Care, at a minimum, the IDT includes the member, a social worker, and a registered nurse; May also include anyone in member's life that is important to him/her. Including the member, ICT determines the support and services needed and then coordinates and oversees the services.
Long-Term Care Functional Screen (LTCFS)	A computer-based tool that ADRCs and MCOs use to determine individuals' functional eligibility for long-term care services; Collects information about individuals' abilities to perform ADLs and IADLs as well as their risk for institutionalization if they do not receive long-term care services.

\* Includes excerpts from the DHS website at <http://dhs.wisconsin.gov/programs/ltc.htm>

Managed Care Organization (MCO)	Non-profit corporation or county agency under contract with Wisconsin Department of Health Services to operate Family Care and/or Partnership managed long-term care programs.
Member	An individual who is enrolled in Family Care or Family Care Partnership.
Member-Centered Plan (MCP)	In Family Care or Family Care Partnership, an on-going plan that documents the process by which the IDT, including the member, identifies, defines, and prioritizes the member's personal and quality of life outcomes; Includes how informal and community resources, as well as services and supports available through the MCO, will be used to achieve the outcomes identified and defined by the member.
Notice of Action (NOA)	Written notice from a MCO explaining the MCO's intention to change, reduce, or terminate a service and the reason(s) for the change in the service.
Ombudsman	An advocate who can provide information, assistance, investigation, negotiation and representation to program participants to protect and promote their rights as program beneficiaries.
Outcome	A desirable situation, condition, or circumstance in a member's life; There are three types: clinical, functional, and personal experience outcomes.
PACE	Program of All-inclusive Care for the Elderly; Available to individuals age 55 and older; A managed care acute health and long-term care program; Most services are provided at an adult day program site; Operates only in Milwaukee and Waukesha counties.
Resource Allocation Decision (RAD) Method	A step-by-step tool the member and the interdisciplinary team use to help determine the most cost-effective way to meet the member's outcomes.
Self-Directed Supports (SDS)	Option in Family Care and Partnership that gives participants choice over how supports and services are provided and by whom; Also called "consumer-directed supports;" IRIS Program is all self-direct supports.

\* Includes excerpts from the DHS website at <http://dhs.wisconsin.gov/programs/ltc.htm>

**For More Information:**

For Disability Rights Wisconsin's materials on the Family Care, Partnership and IRIS Ombudsman Program, including the PowerPoint, go to <http://www.disabilityrightswi.org/archives/category/publications/family-care-ombudsman-program/> or go to [www.disabilityrightswi.org](http://www.disabilityrightswi.org). Then click on PROGRAMS, then on FAMILY CARE OMBUDSMAN, then scroll down to the bottom of the page to PUBLICATIONS.

Wisconsin Department of Health Services information on **Family Care and Partnership** is available at <http://www.dhs.wisconsin.gov/lcicare/>.

Wisconsin Department of Health Services information on **IRIS** is available at <http://dhs.wisconsin.gov/bdds/iris/>.

**Assistance with Appeals:**

**Madison**

131 W. Wilson St., Suite 700  
Madison, WI 53703  
608-267-0214  
TTY: 888-758-6049  
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6737 W. Washington St., Suite 3230  
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*\* For people with disabilities and their families.*

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