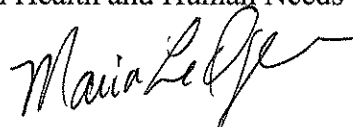


**MILWAUKEE COUNTY
INTER-OFFICE MEMORANDUM**

Date: February 21, 2013

To: Supervisor Peggy Romo West, Chair, Committee on Health and Human Needs

From: Maria Ledger, Director, Department of Family Care 

Subject: Report on the Milwaukee County Department of Family Care Community Relocations

The Family Care program integrates home and community-based services, institutional care services (i.e., nursing homes), Medicaid personal care, home health, and other services that were previously funded separately. The Milwaukee County Department of Family Care (MCDFC) Managed Care Organization (MCO) currently serves more than 7,893 members.

The Department has provided previous updates to the Board on our success in helping older adults and younger people with disabilities return to small community residential settings from institutional settings.

The Department has a very effective process in place to insure that these residential transitions are as comprehensive and well planned as possible.

After an individual enrolls into the Milwaukee County Department of Family Care MCO, they are assigned to an Interdisciplinary Team (IDT), comprised of no less than a care manager and a nurse. The IDT and the member then put together a Member Centered Plan. The Plan is compiled from worksheets completed by the nurse and/or the care manager in these areas:

- Advance Directives
- Behavioral Health/Cognition/Communication/Restrictive Measures
- Cardiovascular
- Caregiver Strain Tool
- Depression Screening
- Diabetes
- EENT (Eyes, Ears, Nose, and Throat)
- Employment
- Environmental/Community Integration/Safety
- Financial
- Gastro Intestinal
- GU / GYN
- Medication Management and Administration
- Musculoskeletal
- Neurological
- Nutrition and Fluids

- Pain
- Respiratory
- Social HX/Support Network/Spirituality
- Support Contacts
- Wound and Skin

In each of the areas noted above, the Member Centered Plan details the following:

- Member Assessment
- Member Strengths or Identified Barriers; their Outcomes
- Member Role in Meeting Outcomes
- Identified Risks/Concerns or Clinical/Functional Outcomes
- Member desire to address this concern at this time
- Interventions, Existing Supports or Supports Needed to Maintain or Achieve Desired Outcomes

An outcome is a desirable situation, condition, or circumstance that maximizes a member's highest level of independence or that a member identifies as important to him/her. Examples of outcomes might include such things as maintaining or improving independence (e.g. "remain in my own home"); maintaining or improving health (e.g. "stay out of the hospital"); or in some other way maintaining or improving quality of life. Outcomes are not "things." A scooter is not an outcome whereas being more mobile in the community is.

For people whose desired outcome is living in a more integrated setting, the IDT works with the Department's Placement Team to work towards that change. This Placement Team is comprised of Registered Nurses who assist our IDTs in identifying appropriate community settings for members.

In 2011, the IDTs, in conjunction with the Placement Team, relocated 570 members from nursing homes to the community.

In 2012, 758 MCDFC members were relocated to the community from Skilled Nursing Facilities (SNFs) and Intermediate Care Facilities for persons with Mental Retardation (ICFsMRs).

It should be noted that in 2012, 12 of the individuals referenced above relocated from either the Milwaukee County Behavioral Health Division (BHD) Hilltop or Central facilities. The majority of these community relocations (10 of the 12) occurred before the BHD downsizing was announced and reflect the Department of Family Care's ongoing commitment to providing services in the most independent and cost effective setting to meet members' outcomes.

One of the individuals who moved to a group home from BHD in 2012 had a history of institutionalization dating back to 1944. He is now in a small group home, and attends a day program every day.

Another is a 22-year-old year old young man living in a group home and attending an intensively staffed day program each day.

MCDFC is fortunate to have a very active and experienced Contracts Division. These staff have successfully negotiated cost effective contracts with over 950 providers. While the MCO continues to add new providers as needed, existing providers have been more than willing to increase their capacity to meet the needs of new enrollees if necessary.


The Department of Family Care recognizes that while we must be good stewards of public dollars, we must also closely monitor the quality of services provided. One of the ways in which we do so is through the member satisfaction survey.

Throughout 2012, 1,985 members were surveyed about their satisfaction with the MCDFC Family Care program. Of the members surveyed, 619 members (31%) responded and provided the following information about the quality of the program:

- 93% of members surveyed are happy with the quality of the services they receive
- 91% of members surveyed would recommend the MCDFC MCO to a friend
- 95% and 91% of members surveyed receive help from their CM and RN when they need it
- 95% and 94% of members surveyed report their CM and RN listen to their concerns

The Department recently became aware of another facility in Milwaukee that will be filing a relocation plan with the State. The Department is committed to working cooperatively with members, families, the State, the facilities and our sister Departments to help our members achieve successful community placements from this facility as well as from BHD and all other contracted nursing homes.

If you have any questions, please call me at 287-7610.



Maria Ledger, Director
Milwaukee County Department of Family Care

cc: County Executive Chris Abele
Chairwoman Marina Dimitrijevic, Milwaukee County Board of Supervisors
Amber Moreen, Chief of Staff, Office of the County Executive
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Jodi Mapp, Committee Clerk, Milwaukee County Board of Supervisors
Jim Hodson, Chief Financial Officer, MCDFC