

# Milwaukee County

# Legislation Details (With Text)

report providing an update on the Childre	
File created: 1/13/2011 In control   On agenda: Final act   Title: From the Interim Director, Department of report providing an update on the Childre Disabilities Services Division (INFORMA COMMITTEE)   Sponsors: Indexes:   Code sections: Code sections:	I: County Clerk's Office ion: 1/26/2011 Health and Human Services, submitting an informational n's Long-Term Support Waiver Program expansion in the
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1/26/2011 1 Health and Human Needs Committee	
1/13/2011 1 Board Chairman	DISCUSSED WITH NO ACTION TAKEN

From the Interim Director, Department of Health and Human Services, submitting an informational report providing an update on the Children's Long-Term Support Waiver Program expansion in the Disabilities Services Division (INFORMATIONAL ONLY UNLESS OTHERWISE DIRECTED BY THE COMMITTEE)

# Introduction

This report provides an update on the expansion of the Children's Long Term Support (CLTS) Waiver Program within the Department of Health and Human Services Disabilities Services Division (DSD) and an overview of the State of Wisconsin's Third-Party Administrator Payment pilot project currently under development.

#### **Background**

2009 Wisconsin Act 28 provided funding for the CLTS waiver program to permit counties to serve additional eligible children and families with disabilities. Over the past six years, DHS has funded new slots for the CLTS Waiver program on a limited basis and DSD has added a few children and families each year from the children's waitlist. However, this has not been sufficient to address the waitlist of over 500 families. Prior to the start of this expansion, DSD had been funding approximately 65 children and families through this program. With the expanded funding available during the current biennium, it is anticipated that over 130 additional children will receive funding for services. In addition, DHS will fund CLTS Youth Transition slots for eligible young adults who are making the transition to Family Care. It is anticipated that over 100 new additional slots will be available to children for up to 12 months to provide transition services to Family Care.

The accumulated expansion of new resources is over 200 new slots available to children with disabilities and their families. It should be noted that the number of slots available will be determined by the average cost per child.

#### Children's Long Term Support Waiver Services

With the expansion of available slots, DSD has begun opening cases and will continue this process until summer of 2011. Approximately ten new cases are being opened per month during this period of expansion for CLTS Waiver services and about 15 cases per month for the CLTS youth transition funding.

As a result of this additional caseload expansion, DSD has included three human services worker positions in its 2011 budget. The expanded positions provide ongoing service coordination, which is required under the CLTS Waiver guidelines. The timing of these expanded service coordination functions also reduced the number of staff that were budgeted to be transferred to the Department of Family Care as included in the 2010 adopted budget.

In 2010, DSD earned approximately \$790,818 in new revenue to reflect the expansion of the CLTS Waiver and CLTS Youth Transition programs.

In 2011, the first full year of the CLTS and Youth Transition expansion, DSD anticipates \$4,646,777 in new revenue and \$4,182,765 in expenditures. The difference of \$464,000 is administrative funding which will be used to offset the cost of the three human service workers.

DSD will reduce the children's waitlist for services with the new additional funded slots. In order to best facilitate this process, DSD has established several program modifications that will enhance and maximize its ability to effectively fund services. DSD has worked with both stakeholders and DHS to develop the following guidelines:

- 1. DSD will focus on a child's needs first and then address providing needed services through all appropriate funding options. Children will not be put on multiple waiting lists for different funding sources.
- 2. DSD will maintain one Children's Services waitlist (except for CLTS Autism services that are managed by the state). This list will include the names of children waiting for services, whether the child's service need is short-term or long -term. Once a child is removed from the waiting list and receives services, his or her name will be removed from the wait list. If the child/family who receives short-term or one-time funds (via the Family Support Program) has new significant needs in the future, he or she could be referred back on the wait list at that time.

DSD will continue the practice of considering hardship and crisis situations.

3. If a child is being served through the CLTS Waivers (including Autism), Family Support Program funds might be able to be used if the child's needs exceed what is allowable under the CLTS Waiver. Families would contact their service coordinator if the child has additional service needs.

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- 4. DHS currently requires that a child be eligible for services based on his or her level of functioning before the child's name can be placed on DSD's Children's Services waiting list. Once a family sends a completed application to DSD and the child is considered eligible to be considered for Children's Services, the child must have a Children's Long Term Care Functional Screen (CLTS-FS). DSD staff would contact the family to arrange a home visit, perform the screen and if functional eligibility is determined, the child's name would be placed on the waiting list. When the child is removed from the waiting list, another functional screen may be needed as part of the assessment process.
- 5. DHS has provided some resources to Milwaukee County to focus on youth ages 17 to 21, transitioning into adult services. These resources will allow DSD to provide services earlier by helping them ease into the adult publicly funded long-term care service system. Youth will come off the Children's Services wait list based on their age, "hardship" to wait criteria, date the youth was added to the Children's wait list and/or the Adult wait list. In addition to the enhancements developed for the additional CLTS Waiver funding, DSD is also working to develop specific referral protocols for the CLTS youth transition slots. These protocols will support a smooth transition for young adults and families who will be making the transition from children's funded services to adult funded services under the Family Care program.
- 6. Beginning 2010, DSD established a new, dedicated phone number for children's services, including services funded through CLTS Waivers, Autism, Family Support Program and Birth to Three Services. The new contact/referral line is answered by staff trained in children's services and referral linkages.

DSD is also working in partnership with DHS and the University of Wisconsin-Milwaukee on a Medicaid infrastructure grant project to develop protocols and long range planning practices for families with school age children who have disabilities to transition to adult services including vocational and employment options.

# Current Expansion Progress

As of December 2010, DSD has made significant progress in the expansion effort by adding over 100 children in new CLTS Waiver slots and approximately 100 children in new youth transition slots. In addition, the waitlist for children's services has been reduced allowing children and families to be contacted within three months. This is a significant reduction from earlier in 2010 when the waitlist time was about two and one-half years. Further, the waitlist that was comprised of over 500 children and families at the start of 2010 has been reduced to 75. The changes in the waitlist time have been attributed not only to the additional slots available, but also to the changes noted above in managing the waiting list more effectively. It is anticipated that this waitlist will be reduced further and potentially eliminated.

#### Third Party Administrator Payment Pilot Project

In February 2010, DHS requested Milwaukee County's participation in a new children's Third Party Administrator (TPA) Payment pilot project in which the State wanted DSD and several other counties to participate. This project was being driven by the State's requirement to collect and provide to the Center's for Medicare and Medicaid (CMS) certain information about services provided under the home and community based waiver programs, which includes the CLTS program. Beginning in April 2010, DSD began working with three other pilot counties to roll out the new payment system.

The TPA system requires that counties no longer make payments directly to the agencies who provide services

under the CLTS waiver benefit. Rather, the counties will provide prior authorization to a third party payment agency who will process the payments on behalf of the county. A similar system of payment is utilized by the Family Care program in Milwaukee County. DHS has entered into a contract with WPS to provide the payment function also known as claims processing.

This pilot project has resulted in the need to make numerous changes to DSD procedures and business practices.

#### <u>Summary</u>

The expansion of Children's Long Term Support Waiver funding is providing a unique opportunity for DSD to reduce waitlist for services and to enhance the availability of services to children with disabilities and their families. The 2011 DSD budget reflects this expansion initiative and will help to retain staff positions required to support this program.

DHS has initiated a new Third Party Administrator Payment system for the children's programs that will require new procedures and information technology to implement. As a result of this new system, certain functions performed by DSD will no longer be required resulting in a decreased need for support staff. It is anticipated that this new system will be implemented late in 2010 and fully implemented in 2011.

### **Recommendation**

This report is for informational purposes only. No action is recommended unless otherwise directed by the Board.

Respectfully submitted:

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