

**LONG TERM SUPPORT COMMITTEE MEETING
TUESDAY, MARCH 2, 2010--1:00 P.M.**



**ROCK COUNTY JOB CENTER
1900 CENTER AVENUE
ROOM D/E
JANESVILLE, WI 53546**

AGENDA

1. Call to Order and Welcome
2. Approval of Agenda
3. Approval of Minutes of January 5, 2010 Meeting *
4. Citizen Participation
5. Financial/Statistical Information:
 - A. Human Services *
 - B. Developmental Disabilities *
 - C.
6. Old Business:
 - A. LTC Reform Update
 - B.
7. New Business:
 - A. Approval of COP High Cost Requests *
 - B. 2010 COP Plan Update *
 - C.
8. Committee Member Comments
9. Next Meeting – May 4, 2010
10. Adjourn

* Denotes Attachment

In the event a committee member is unable to attend, please contact Jennifer Thompson (Rock County LTS) at 741-3684.

Long Term Support Update

- 1) LTS will be hiring back 2-LTE-six month positions due to two FMLA's and a possible retirement in spring. Donna Hanson (former intake worker) and Lou Cheplak (former LTS supervisor) will be back in March and May respectively.
- 2) LTS has not heard from DHS recently regarding the push for Family Care in Rock Co. Ms. Thompson attended a conference in which the DHS administrator, Susan Crowley, only mentioned "preliminary conversations" had occurred with Dane and Rock. However, in the meantime, the County Administrators office is working with the DDB and LTS in regards to planning for an ADRC.

3) Cases with Funding

Program	Total Individuals Served 12/31/09	Number Currently Open 2/23/10	Average Daily Census 2009	CBRF %	Waiting List as of 2/23/10
COP Assessments	337	NA	NA	NA	NA
COP Plans	243	NA	NA	NA	NA
COP Services	182	107	123	44%	66
COP-W –	155	118	124		
CIP-II – 295 Slots	299	227	253	29%	144
NH Diversion	17	13	NA	NA	NA
CRI	33	26	NA	NA	9
AFCSP	32	17	NA	NA	19
BCA/Tax Levy LTS with payments	90	25	NA	NA	52

3. Significant Proportion report

	Required	Actual
Mentally Ill	6.6%	19.8 %
Physically Disabled	6.6%	24.1 %
Elderly	57%	56.1 %

Key

AFCSP= Alzheimer's Family Caregiver Support Program (100% State Revenues, local annual cap of \$2,000 per person)
 CIP-II = Community Integration Program (Medical Assistance Waiver program using State GPR to draw down Federal Revenues)
 COP= Community Options Program (100% State General Purpose Revenues)
 COP-W = Community Options Program – Waiver (Medical Assistance Waiver program using State GPR and local match used to draw down Federal Revenues, unlimited slots as long as you have State or local match)
 BCA/Tax Levy = Basic County Allocation and Tax Levy to designate services that are eligible for limited BCA and interchangeable with tax levy used for match and overmatch

Prepared by Jennifer Thompson 2/23/10

ROCK COUNTY HUMAN SERVICES DEPARTMENT
LONG TERM SUPPORT BUDGET STATUS REPORT

01/01/09 - 12/31/09

LTS PURCHASED

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Respite	22	4,539	4,561
Supportive Home Care	42,043	35,644	77,937
Housing/Energy Assistance	802	1,150	2,352
Interpreter Services/Adaptive Equipment	3,151	3,172	6,323
Adult Family Home	2,604	19,637	22,241
Home Delivered Meals		5,322	5,322
Protective Payment/Guardianship		1	1
Community Based Residential	6,441	10,352	16,793
TOTAL LTS	55,063	79,817	135,530

Respite
Supportive Home Care
Housing/Energy Assistance
Interpreter Services/Adaptive Equipment
Adult Family Home
Home Delivered Meals
Protective Payment/Guardianship
Community Based Residential
TOTAL LTS

Alzheimers Family Caregiver

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care	1,920	10,797	12,717
Respite		9,474	9,474
Supportive Home Care	5,369		5,369
Spec. Transportation		140	140
Interpreter Services/Adaptive Equipment		195	195
Outreach		3,000	3,000
Home Delivered Meals	85	535	620
Community Based Residential Facility	2,000	26,583	28,583
TOTAL Alzheimers Family Caregiver	9,374	50,724	60,098

Adult Day Care
Respite
Supportive Home Care
Spec. Transportation
Interpreter Services/Adaptive Equipment
Outreach
Home Delivered Meals
Community Based Residential Facility
TOTAL Alzheimers Family Caregiver

Community Relocation Initiative (CRI)

	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
Adult Day Care		8,424	8,424
Respite		4,717	4,717
Supportive Home Care	22,772	69,541	92,313
Spec. Transportation		282	282
Interpreter Services/Adapt Srv	2,767	25,890	28,657
Adult Family Home	22,281	16,550	38,831
Home Delivered Meals	830	9,049	9,879
Community Based Residential Facility	67,707	186,215	253,922
Financial Management Services	372	0	372
TOTAL CRI	116,729	320,668	437,397

Adult Day Care
Respite
Supportive Home Care
Spec. Transportation
Interpreter Services/Adapt Srv
Adult Family Home
Home Delivered Meals
Community Based Residential Facility
Financial Management Services
TOTAL CRI

Nursing Home Diversion (NHD)

Supportive Home Care
 Interpreter Services/Adapt Srv
 Home Delivered Meals
 Community Based Residential Facility
TOTAL NHD

PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
4,491	44,862	49,353
11,508	1,350	12,858
3,172	2,027	5,199
(416)	103,209	102,793
18,755	151,448	170,203

Community Options Program (COP)

Adult Day Care
 Respite
 Supportive Home Care
 Housing/Energy Assistance
 Specialized Transportation
 Prevocational Services
 Interpreter Services/Adaptive Equipment
 Adult Family Home
 Home Delivered Meals
 Recreation/Alternative Activities
 Protective Payment/Guardianship
 Community Based Residential Facility
 Counseling/Therapeutic Resources
 Supported Employment
TOTAL COP

MENTAL HEALTH	PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
12,323			12,323
	600	291	891
59,256	10,330	44,724	114,310
29,728	596	(47)	30,277
2,705			2,705
6,759	26,377		33,136
604	6,183	535	7,322
143,106	14,933	6,124	164,163
4,232	65	1,355	5,652
500		600	1,100
5,200	1,520	3,968	10,688
299,938	51,385	351,927	703,250
460			460
13,741	16,918		30,659
578,552	128,907	409,477	1,116,936

COP WAIVER

Adult Day Care
 Respite Care
 Supportive Home Care
 Specialized Transportation
 Interpreter Services/Adaptive Equipment
 Adult Family Homes
 Home Delivered Meals
 Community Based Residential
 Counseling/Therapeutic resources
 Financial Management Services
TOTAL COP WAIVER

PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
6,600	87,854	94,454
19,574	9,143	28,717
505,600	448,923	954,523
632	10,311	10,943
39,398	39,823	79,221
41,119	77,428	77,428
149,452	58,151	99,270
2,179	705,976	855,428
0	1,230	3,409
764,554	1,440,481	2,205,035

CIP-II

Adult Day Care
 Respite
 Supportive Home Care
 Specialized Transportation
 Interpreter Services/Adaptive Equipment
 Adult Family Home
 Home Delivered Meals
 Community Based Residential Facility
 Counseling/therapeutic Resource
 Financial Management Services
TOTAL CIP-II

PHYSICALLY & SENSORY DISABLED	ADULT AND ELDERLY	YTD EXPENSES
45,843	40,340	86,183
18,012	11,469	29,481
794,514	789,409	1,583,923
7,368	2,614	9,982
111,022	57,170	168,192
130,872	178,199	309,071
109,803	122,675	232,478
249,204	955,140	1,204,344
16,420	2,080	18,500
1,914	1,508	3,422
1,484,972	2,160,604	3,645,576

SUMMARY

	ANNUAL BUDGET	PHYSICALLY			ADULT AND ELDERLY	ALL TG'S	YTD BUDGET	VARIANCE
		MENTAL HEALTH	& SENSO RIOUSLY DISABLED	DISABLED				
BCA PURCHASED	135,000	650	55,063	79,817	135,530	135,000	(530)	
TOTAL BCA/TAX LEVY	135,000	650	55,063	79,817	135,530	135,000	(530)	
COP	1,005,781	578,552	128,907	409,477	1,116,936	1,005,781	(111,155)	
COP CASE MANAGEMENT	29,184				15,147	29,184	14,037	
COP PROVIDED ASSESS/PLANS	78,551				78,551	78,551	0	
COP ADMINISTRATION	75,643				75,643	75,643	0	
TOTAL COP	1,189,159	578,552	128,907	409,477	1,286,277	1,189,159	(97,118)	
COP-WAIVER	2,047,559		764,554	1,440,481	2,205,035	2,047,559	(157,476)	
COP-WAIVER CASE MANAGEMENT	627,912				465,824	627,912	162,088	
COP-WAIVER ADMINISTRATION	187,283				188,051	187,283	(768)	
TOTAL COP-WAIVER	2,862,754	0	764,554	1,440,481	2,858,910	2,862,754	3,844	
CIP-II	3,446,947		1,484,972	2,160,604	3,645,576	3,446,947	(198,629)	
CIP-II CASE MANAGEMENT	1,128,053				883,687	1,128,053	244,366	
CIP-II ADMINISTRATION	319,623				318,789	319,623	834	
TOTAL CIP-II	4,894,623	0	1,484,972	2,160,604	4,848,052	4,894,623	46,571	
ALZHEIMER'S	58,040	0	9,374	50,724	60,098	58,040	(2,058)	
ALZHEIMER'S CASE MANAGEMENT	14,140		366	13,774	14,140	14,140	0	
GRAND TOTAL PURCHASED	9,153,716							



TO: Members of the Rock County Long Term Support Committee
FROM: LuAnn Kane, Director
Rock County Developmental Disabilities Board
DATE: February 24, 2010
RE: Year End December 2009 COP Expenditures

The following are the COP expenditures and data as of December 2009:

CIP 1A/COP Match 2009 Budget	CIP 1B/COP Match 2009 Budget	COP 2009 Budget Only	COP 2009 Budget Amount
\$75,495 +	\$763,340 +	\$8,000 =	\$846,835

CIP 1A/COP Match as of December 2009: \$76,299
Number of Consumers being served in CIP 1A/COP: 3

CIP 1B/COP Match as of December 2009: \$733,543
Number of Consumers being served in CIP 1B/COP: 41

COP Assessments Amount as of December 2009: \$7,944
Number of Consumers receiving COP Assessments: 24

Waiting List:

Currently, there are **337** consumers on the COP waiting list. This reflects an increase of 38 consumers from December 31, 2009.

Prepared by: Joanne Jones-Financial Office Manager
Rock County DD Board

DEPARTMENT OF HEALTH SERVICES
Division of Long Term Care
F-21353 (11/2008)

STATE OF WISCONSIN

cop exceptional expense request

Completion of this form is voluntary. County agencies can use this form to request COP Exceptional Expense funding.

Name - Participant	Date of Request 2-23-2010
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Current Funding Source
 COP-W CIP II BIW CIP IA CIP IB COP CLTS DD CLTS PD CLTS SED

**Do not use this form for CIP IB ICF-MR relocation requests—
those costs need to be included in the rate submitted on the plan**

Name - Agency and Care Manager
Rock County Human Services Dept - Amy Woodstock

Item(s) and/or Service(s) to be purchased (must be over \$1000 total)
**Acton Gel Pad, mattress overlay
(Custom size 54" x 80")**

Total Amount Requested

Please describe how this request meets the following priority: very expensive one-time need or completely unexpected happening or emergency, including an explanation of why these costs were not part of the original support plan.

**Expensive 1x need which client needs right away
& cannot wait until his name comes off
the waiting list for additional funding.
The mattress he has is in very poor condition
& he needs a new one to help prevent
future skin breakdown.**

Please describe efforts to obtain Medicaid approval or other funding to address this need
this item not covered by Medicaid

Date Request Approved by LTS Planning Committee	<input type="checkbox"/> Requested item (ramps, home modifications) has been approved by TMG, CIS, or CSS (if applicable)
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Attach additional sheets if necessary. Where applicable, attach detailed estimates by vendors, Medicaid denials, and appeals.

2010 COP PLAN UPDATE

The county's COP Plan is a description of the county's Community Options Program, including services available, client group specific outreach, local coordination and local methods of program implementation and monitoring. The plan update process provides an opportunity to review the current provisions and make needed changes to ensure the plan is up to date. In addition, the Lead Agency is required to submit to the Department of Health and Family Services data required for program monitoring.

Please submit one copy of the completed Plan Update to:

Kimberly Schindler
BLTS – Room 450
P. O. Box 7851
Madison, WI 53707-7851
e-mail: Kimberly.Schindler@dhs.wisconsin.gov

and one to the appropriate regional office Human Services Area Coordinator no later than **February 26, 2010**. Copies may be sent via e-mail.

County Rock

Lead Agency Rock County Humans Services / Rock County DD Board

Person Completing this Form Jennifer Thompson

Date Submitted to BLTS 2/24/10

To Regional Office 2/24/10

2010 COP PLAN UPDATE

Part 1 Lead Agency Staff Contact Information: The following information is requested in order to keep BLTS correspondence lists current. Please complete all that apply or note where one person has multiple responsibilities.

COP Lead Agency:	<i>Rock County HSD</i>
Address:	<i>PO Box 1649</i>
	<i>Janesville, WI 53547</i>
Phone:	<i>608 757-5271</i>
FAX:	<i>608 757-5374</i>
E-mail	

Lead Agency Director:	<i>Charmian Klyve</i>
Address:	<i>PO Box 1649</i>
	<i>Janesville, WI 53547</i>
Phone:	<i>608 757-5270</i>
FAX:	<i>608 757-5374</i>
E-mail:	<i>klyve@co.rock.wi.us</i>

COP Contact:	<i>Jennifer Thompson</i>
Address:	<i>1900 Center Avenue</i>
	<i>Janesville, WI 53546</i>
Phone:	<i>608 741-3684</i>
FAX:	<i>608 741-3534</i>
E-mail:	<i>thompsnj@co.rock.wi.us</i>

COP-W/CIP II Contact:	<i>Jennifer Thompson</i>
Address:	<i>1900 Center Avenue</i>
	<i>Janesville, WI 53546</i>
Phone:	<i>608 741-3684</i>
FAX:	<i>608 741-3534</i>
E-mail:	<i>thompsnj@co.rock.wi.us</i>

CIP 1A, 1B, BIW Contact:	<i>Luann Kane</i>
Address:	<i>PO Box 1147</i>
	<i>Janesville, WI 53547</i>
Phone:	<i>608 757-5048</i>
FAX:	<i>608 758-8482</i>
E-mail:	<i>kanelu@co.rock.wi.us</i>

CLTS Contact:	<i>Tera O'Connor</i>
Address:	<i>3530 N. Cty Trunk Hwy F</i>
	<i>Janesville, WI 53547</i>
Phone:	<i>608 757-5477</i>
FAX:	<i>608 758-8418</i>
E-mail:	<i>oconnor@co.rock.wi.us</i>

Primary Fiscal Contact:	<i>Jennifer Thompson</i>	
Address:	<i>1900 Center Avenue</i>	
	<i>Janesville, WI 53546</i>	
Phone:	<i>608 741-3684</i>	
Fax:	<i>608 741-3534</i>	
E-mail	<i>thompsnj@co.rock.wi.us</i>	

Planning Committee Chair:	<i>Anna Marie Johnson</i>	
Address:	<i>1353 Wisconsin Ave</i>	
	<i>Beloit, WI 53511</i>	

Part 2 Care Management/Support and Service Coordinator Rate

In 2004, the Division issued a numbered memo (DDES 2004-11) and a Waiver Wise (COP-W) technical assistance guide (Volume 4 Issue 05) relating to the need for a cost-based hourly rate for care management/support and service coordination. Many counties submitted the required documentation for an updated care management/support and service coordination rate.

1. What is your county's care management/support and service coordination rate?
\$104.60
2. Are you requesting approval of an updated care management/support and service coordination rate?
 yes
 no

If yes, please attach the required documentation. Please check the following websites for clarification:

http://dhfs.wisconsin.gov/dsl_info/NumberedMemos/DDES/CY_2004/NMemo2004-11-DDES.htm

http://dhfs.wisconsin.gov/LTC_COP/waiverwise.htm

Part 3 Technical Assistance

Are there ways in which Department or Bureau staff can either arrange for or provide technical assistance in managing LTS programs such as fiscal management, HSRS reporting, determining care management/support and service coordination rates, outcomes, Alzheimer's/dementia or any other topic?

no
 yes

If yes, please describe:

Part 4 Other Plan Changes (This section is only required for county agencies that will not have completed managed care transition by December 31, 2010.)

Have any other implementation changes been made in CY 09 to your COP Plan?

yes

no

If yes, list the topics and attach the change. Please submit any changes anticipated for 2010 if known as well. This will enable Department records to be current.

*The LTS waitlist policy was updated and approved in March 2009. The only change to this policy was in regards to who would provide case management to waitlist cases within the LTS Division. **However, due to the fact DLTC Memo 2009-11 was issued, the Rock LTS policy is now void.** A copy of the LTS policy is attached for reference with high-lights indicating the March 2009 update.*

No changes anticipated for 2010 as we will be planning for Managed Care.

Part 5 COP Cost Sharing Plan: Complete and submit a new cost sharing plan (form attached) **only if there are changes.**

2010 COP Cost Sharing Plan

Complete Only If There Have Been Changes
(100% of the maximum allowable client cost sharing contribution is required.)

County: _____

Lead Agency: _____

Local Decision

What special non-medical long term support expense items will be allowed by the county to lower the monthly resources that will be considered available for participant cost sharing?

Signature of Lead Agency Director

Date

Signature of LTS Planning Committee Chairperson

Date

Signature of DHFS Representative (Approval of Plan)

Date