



Dane County

Minutes - Final Unless Amended by Committee

Aging & Disability Resource Center Governing Board

Consider:

Who benefits? Who is burdened?

Who does not have a voice at the table?

How can policymakers mitigate unintended consequences?

Monday, September 14, 2020

2:00 PM

Remote Meeting

A. Call To Order

Staff and guests present: Jennifer Fischer, Josette Belant, Melissa Muliken

Present 8 - SARAH BOCHER, Supervisor RICHARD KILMER, CAROL LORENZ, ESTHER OLSON, CHAN STROMAN, BARBARA KATZ, PAUL YOCHUM, and ALAN FERGUSON

Absent 3 - DONNA BRYANT, TERENCE ESBECK, and CASEY THOMPSON

B. Consideration of Minutes

This matter was approved with conditions: STROMAN's name will be corrected where it was misspelled. Passed with All ayes.

1. [2020](#) 27 JULY, 2020 MINUTES
[MIN-164](#)

Attachments: [2020 MIN-164](#)

Minutes approved, with correction to spelling of STROMAN'S last name where it is misspelled.

MULIKEN joins meeting at 2:08, THOMPSON joins by phone at 2:14.

C. Action Items

1. DCDHS Vision and Mission Statement

YOCHUM states that he and several other board members were interviewed by county staff to get their input on what recommendations and concerns they had. YOCHUM also discusses two thank you letters that were distributed to board members prior to the meeting. KATZ thanks the county for reaching out to stakeholders for feedback on mission and vision statement input.

2. Graduation Rates

FISCHER reports that the ADRC has compared referral rates by student within Special Education by race compared to those enrolled in Special Education in the MMSD. Fischer went over the data the ADRC collected. The ADRC compared people referred to the ADRC versus who is enrolled but one issue with the

comparison is that MMSD reports people with multiple races as having multiple races – the ADRC does not.

Data shows the largest difference in Latino students being enrolled in special education but not being referred to ADRC for Long Term Care Services. Pre Covid we were going to attend a Latino specific event through MMSD to do more outreach. Hopefully this will be rescheduled. FISCHER stated that the ADRC needs to collect more data to see how these numbers progress through time to see what the trends are as this was a once time data collection and the ADRC plans to do so. Due to Covid, initially children were allowed to remain in the Children's Long Term Care programs, but the state has changed that direction and now all of those students enrolled in CLTS need to be referred to adult services, and we are working with CLTS workers to transition those who should have transitioned by October.

One thing to notes is that children with mental health issues are served through CLTS programs. If issues are only related to MI not IDD/PD they will not pass into adult Long Term Care Services as the primary reason for needing assistance in this Long Term Care Waiver needs to be related to IDD, or PD.

STROMAN says she would like to look at actual numbers rather than charts in order to get more information. Interest in this topic predates Covid. STROMAN believes the past grad policy would have had the effect of excluding black and brown students from enrolling into Long Term Care. STROMAN's question is what, if any, discrepancy did the grad policy lead to in terms of the proportions of people of color with disabilities who are now young adults that have not received services. Graph provided is limited in

terms of time frame, nothing for current school year, also how many actually enrolled vs were referred.

Do we show more equitable access?

FISCHER states that the ADRC does not have records/data pre family care, but she will see what is still kept/available. The ADRC did not handle enrollments pre family care so we do not have that data.

FISCHER offered to check the NPO office for what records they still may have. STROMAN states no need to get data the ADRC does not have. Would like a breakdown of enrollments that is disaggregated by ethnicity for the year or two before family care and then what we have now. Would like to identify the extent of disparities then vs now. FISCHER states that if ADRC did enrollment we will have that data but if we did not do the enrollments we would not have that data.

KATZ states that she sees an issue with the need for diagnosis prior to a screen. Thought that anyone that needed a functional screen could get one. FISCHER states that anyone can, but a person will not pass into a

target group without a diagnosis.

KATZ states barriers for families of color due to belief, or in general lack of access to a diagnostician.

FISCHER states testing is often provided through the school or referring back to physicians. Fischer reported there are sometimes issues getting records from school for people later in life (not through transition, a decade later) schools may no longer have records.

KATZ asks what if a kid receives school services due to MI or emotional disturbance, but school refuses to test. FISCHER states that she believes most referrals from schools have been given testing. She is not aware of children in school district that have not received needed testing it has been, mostly for adults trying to

get past records. KATZ asks if people have not passed functional screen and were refused services exclusively because of not having a diagnosis. FISCHER states she is unsure and cannot give that answer without looking at data to see if that is the case.

THOMPSON states he has run into issues with students who have tenuous immigration status and may not have permanent residency till after they age out of youth services at 21. Asks what has been relaxed

during Covid. FISHER states just diagnosis has been relaxed, not citizenship. You still need to qualify for Medicaid to enroll in Long Term Care.

STROMAN states access to diagnosis for autism is very income based. Even in educational autism diagnosis Black students are significantly underrepresented for a number of possible reasons.

D. Presentations

1. Developmental Disabilities Coalition

MULIKEN reports from DD Coalition of Dane County. The DD Coalition of about 40 providers in Dane County. Their mission is supporting and advocating on behalf of the people that they serve. She provides a timeline of Covid 19 to lend context to what she discusses, beginning with Feb 5. Discusses business and school closures in March. Direct support employees were seeing service disruptions and work disruptions due to Covid.

Mentions PPE, and the challenge of no gov't aid, and national shortage of PPE. As PPE was distributed, MULIKEN states that DHS kept forgetting about the Long Term Care Service providers. She shared that DD providers felt invisible, to the point where they were told by a state employee that residential service staff could just be sent home, which is not possible, as they had clients to care for. Providers needed to source their own PPE through donations, go fund me campaigns, importing through Chinese suppliers. When trying to serve people in their homes, they did not experience support from the gov't in obtaining PPE.

Many providers applied for PPP funds. They were a lifeline for many providers. There were questions of if or how much would need to be paid back. MULIKEN states that in particular the funding allowed vocational agencies to retain staff during shutdown.

When DD consumers were not going to work, they needed more residential support. Per MULIKEN, they continue to struggle with DHS and MCOs in order to get either increased rates for increased service. There is a gap in payments that mean can't make timely changes to funding as services change. CARES Act money does not cover the changes in services.

MULIKEN reiterates that PPE is a necessity, and states that there will be a shortage.

Per MULIKEN, they are seeing a great deal of isolation, and wanting to make sure we keep that front and center as well.

Believes there will be a budget repair needed (big hole in budget) possibly 2 billion dollars. MULIKEN is concerned that there will be budget cuts, and fears Disability services may be on the chopping block.

MULIKEN reports that the State of WI is contemplating changing geographic service regions. There are currently 14 regions that are offering managed care. The state has presented options to reduce to 5 regions in the state. MULIKEN states there are clearly preferences for larger organizations over smaller ones, and worries about IRIS in a new world. The contracts that are coming out have a lot of managed care language, and not a lot of IRIS language. TMG (The Management Group) (IRIS Consulting agency) has been bought by a large national company. Per MULIKEN, DD Coalition will be considering their opinion on the changes in service regions.

KATZ asks what timeline is for a proposal to come out. MULIKEN states: GSR was introduced with a PowerPoint at the last LTC council meeting last Tuesday. Betsy Gentz and Kim Schindler from the state presented the power point. MULIKEN reports that the state plans to bring it back at the LTC council meeting in November.

STROMAN asks about GRS, where is it coming from? STROMAN states it sounds like there hasn't been a lot of transparency in terms of disclosure to providers & consumers, would like to know if proactive digging should be done.

MULIKEN states she is unsure if it is a lack of transparency, as presentation last week was the first time any presentation had been made public. Timeline is important in terms of how quickly this will be rolled out. MULIKEN states her sense is that Secretary Palm is very focused on expanding Medicaid. LTC is not an area of expertise for her, or a focal point of the governor.

E. Reports to Committee

1. [2020 RPT-259](#) August 2020 SAMS Statistics

Attachments: [August 2020 SAMS Statistics](#)

2. [2020 RPT-258](#) August 2020 ADRC Statistics

Attachments: [August 2020 ADRC Statistics](#)

3. [2020 RPT-257](#) July 2020 SAMS Statistics

Attachments: [July 2020 SAMS Statistics](#)

4. [2020 RPT-256](#) July 2020 ADRC Statistics

Attachments: [July 2020 ADRC Statistics](#)

F. Chair's Report

G. Board Members' Report

KATZ reports. Per KATZ, In today's WI health news there was mention of Medicaid being restructured. Wonders if that may have a connection to Melissa's discussion of GSR. KATZ states she was on vacation for the last meeting, and asks if there was discussion of virtual listening sessions. FISCHER states there was not, can be added to next month's agenda for discussion.

KILLMER Wednesday at 6pm is the Health and Human needs budget hearing meeting. People interested in attending can register on the Dane County Website.

H. Manager's Report

FISCHER reports: Calls still down with Covid 19, calls came up some after the initial few months of March and April, but now are going back down. Currently the ADRC is doing TV, radio, and newspaper advertisements to help people know that we are still here and providing services. The ADRC is also doing advertisements on Facebook.

The ADRC is continuing to do contactless visits. For walk in clients to the ADRC, the clients come into an interview room and I&A calls the desk phone in the room the person is in.

The ADRC is continuing to work with IT to set up where we can do virtual visits in the rooms and virtually see

people who walk in to see us. The majority of walk in consumers are homeless looking for services.

Fischer discussed current open positions at the ADRC due to the lower phone volume it is not currently an issue with the open positions. The ADRC receives change routing forms from MCOs when people leave the programs. Did some evaluation and noted that deaths coming from the MCOs and ICA's were 3 times higher than last year.

In general the ADRC is concerned about social isolation and the community's mental health during this pandemic. The ADRC has reached out to UW extension regarding their Taking Care of You program to try and offer it to residents of Dane county as a sponsored event. They are interested in this partnership. Class size would be around 15 people. The Extension office is getting back to the ADRC once they meet with their certified instructors regarding holding classes. The ADRC is also working with community partners to try and bring a suicide prevention class to both staff and the community at large.

KATZ states she didn't see anything about Covid resources on ADRC website. Katz asked if we should we have self care resources there? FISCHER says this can be added.

FISCHER states because we haven't spent training budget she is hiring a speaker to come in and do a series for employees. Will include board if there is room. UW Milwaukee SW professor. Series is on unlearning racism.

I. Future Meeting Items and Dates

Next meeting will be: 10/12/20 2:00

Items to include in next agenda are:

Virtual listening Sessions
Regional changes from 14 to 5
Social isolation ideas
County Budget Process

J. Public Comment on Items not on the Agenda

K. Such Other Business as Allowed by Law

L. Adjourn

This matter was approved with all ayes.

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NOTA: Si necesita un intérprete, un traductor, materiales en formatos alternativos u otros arreglos para acceder a este servicio, actividad o programa, comuníquese al número de teléfono que figura a continuación tres días hábiles como mínimo antes de la reunión.

LUS CIM: Yog hais tias koj xav tau ib tug neeg txhais lus, ib tug neeg txhais ntawv, cov ntawv ua lwm hom ntawv los sis lwm cov kev pab kom siv tau cov kev pab, cov kev ua ub no (activity) los sis qhov kev pab cuam, thov hu rau tus xov tooj hauv qab yam tsawg peb hnuv ua hauj lwm ua ntej yuav tuaj sib tham.

Jennifer Fischer, ADRC Manager, 608-240-7460 WI Relay: 711