



August 27, 2021

Ms. Grace Moore

Ms. Kelly Van Sicklen,

Wisconsin Department of Health Services

Sent via email: grace.moore@dhs.wisconsin.gov kelly.vansicklen@dhs.wisconsin.gov

Dear Ms. Moore and Ms. Van Sicklen,

Thank you for the opportunity to review and provide comment on the proposed January 2022 MCO amended contract. DSPN is the state's leading trade association for organizations that provide support to people with disabilities. DSPN represents the interests of disability service providers that provide both residential and non-residential services. These services include community-based and center-based vocational and day services, supported employment, job development, training and placement, competitive integrated employment, care management, Community Based Residential Facilities (CBRFs), Adult Family Homes (AFHs), supported living arrangements, Adult Day Care Center (ADCC) services, early intervention, and other services that enable people with disabilities and economic disadvantages to live and work in their local communities.

On behalf of our members, we provide feedback on the following items in the proposed amended contract:

1.#17 – Article XVIII – Payment to Managed Care Organization – Competitive Integrated Employment (CIE) definition

a. Location:

Providers continue to explore new innovative partnerships, programs, and services to increase employment opportunities for people with disabilities. We continue to have concerns about language in the contract excluding locations owned or operated by providers. We wish to work with DHS and other stakeholders to establish a narrower definition that does not penalize providers, and respects concerns from some disability stakeholders.

b. Individualized position:

We suggest a narrower definition that includes if all other CIE definitions are met, the business is a business similar to other businesses in the community with a workforce of 51% of more without disabilities and a job that is posted for persons with and without disabilities that location could be on the grounds of a service provider organization.

c. Employer of Record:

Lastly, we continue to have concerns about language in the contract excluding locations owned or operated by providers and excluding them as the “Employer of Record.” We request this language be removed.

2. ***Article V – Case Management – Required Contacts for Members residing in a 1-2 bed Adult Family Home***

- a. DHS uses the measurement of “significant” changes in both health care condition and staffing to trigger an IDT visit. We ask DHS to establish a clear metric on the threshold to trigger a visit. Additionally, we suggest a compliance visit occurs once a complaint is filed by the member, member’s legal representative, outside service provider or credible community member.

3. ***Article VII, “Services” - Provision of Services in the Family Care Benefit Package***

i. ***2. Services for Members at the Non-Nursing Home Level of Care – Family Care***

- a. We suggest language to highlight and include member choice guiding the provision of services.

“The MCO shall promptly provide or arrange for the provision of all services in the benefit package, consistent with the Member-Centered Plan, and member choice.”

4. ***Article VIII – Provider Network – Certification and Contracting with 1-2 bed AFHs***

- a. We support the new language in this section to improve MCO oversight and reporting of 1-2 bed AFHs.

b. ***Provider Certification and Standards – Wisconsin Provider Standards – Clarifying HCBS settings rule compliance requirements***

We ask DHS to modify this language to specify providers in the remediation process remain eligible to contract with MCOs.

5. ***Article III – Medicaid Deductibles or Cost Share***

- a. We recommend the residential provider be notified as soon as possible when member Medicaid eligibility is in jeopardy. We ask this notification occurs prior to a member being disenrolled.

Thank you for the opportunity to share provider perspective on these proposed changes. We welcome the ongoing dialogue to ensure transparency and sustainability in Family Care.

Please feel free to contact me with any additional questions you may have.

Sincerely,



Lisa M. Davidson
CEO