

Each family has a voice. Together, our voices will be heard.

Did You Know? Now You Know!

An introduction to health care and long-term supports for children and youth with disabilities and/or special health care needs



Circles of Life Conference 2023

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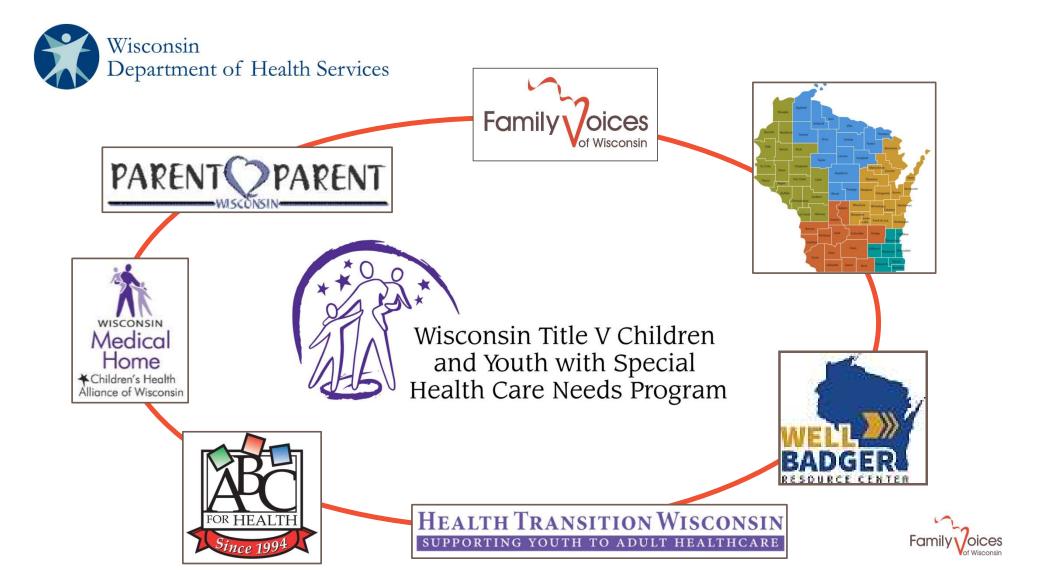


familyvoiceswi.org

Family Voices helps families navigate health care and community supports and services by providing learning sessions, information and resources.

As a family-run organization, we support families in their own leadership and advocacy journey, and we promote familycentered care and family/professional partnerships.

Visit our website to view our fact sheets, newsletters and online learning.



Did You Know? Now You Know!

- 1. Systems of support for children with disabilities
- 2. Private health insurance
- 3. Medicaid
- 4. Long-term supports and Medicaid waiver programs
- 5. Prior authorization and the coordination of services
- 6. More than health care



Systems of Support



Systems of Support

What?

Funding and regulation structures

Why?

 Understand why programs have eligibility requirements that sometimes seem unfair





How Are Formal Supports Organized?





EXAMPLE: Children's Long-Term Support Waiver

Federal Rules and Funding

• <u>Centers for Medicare and Medicaid Services (CMS)</u>

State Accountability and Funding

• WI <u>D</u>epartment of <u>H</u>ealth <u>S</u>ervices (DHS)

County Implements Program to Families

• County Waiver Agency



EXAMPLE: Children & Youth with Special Health Care Needs Resource Centers

Federal Rules and Funding

- Health Resources and Services Administration (HRSA)
- Maternal and Child Health Title V Block Grants

State Accountability

• WI Department of Health Services (DHS)

Regional Funding

• Five Regional Centers



EXAMPLE: Children's Community Options Program

No Federal Involvement

State Funding

WI Department of Health Services (DHS)

County Funding and Administration

• County Waiver Agencies



No Need for Citizenship—That's a Federal Requirement

Private Health Insurance



Private Health Insurance

What?

- Choosing a health insurance plan
- When to purchase health care
- What is in a benefits plan

Why?

• It is important to get the most out of the insurance plan that you are paying for



Know your family's needs before you begin your search

Choosing a Health Insurance Plan





When Do I Buy an Insurance Plan?

<u>Open Enrollment</u>: An annual window during which individuals and employees may add or drop their health insurance or make changes to their coverage.

- Open enrollment period for the Marketplace is November 1 – December 15*
- Employers have variable Open Enrollment times
- Outside open enrollment you need a qualifying life event to buy health insurance
 - Have a baby
 - Get married
 - Lose a job

* These dates may change annually. Be sure to check with your insurance carrier.



Healthcare Navigators Call: 211 or Go to: coveringwi.org/enroll

Family

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What's the Benefits Plan?

- It defines what is, and what is not covered
 - Insurance will **ONLY** cover what's written in the Benefits Plan
- It's a legally binding contract between you and your insurance company





What is in Your Benefits Plan?

What's covered and not covered, or excluded

Who makes medical decisions if you choose to go out of network*

Whether the policy can be automatically renewed or cancelled

Contact information if you have a question about the policy

Amount of your deductibles, co-pays and co-insurance

The appeal process if a claim is denied

Which providers are in network*

Limits on services and therapies

*<u>Network</u>: A group of providers that your insurance company works with most often. If your insurance plan includes a network, you may have to pay more to see a provider who isn't in your plan's network.



Medicaid



Medicaid

What?

- What is Medicaid
- Three common sources of Medicaid
- What Medicaid can pay for
- Medicaid and your private insurance

Why?

- Being on Medicaid can open other doors
- Getting the most from the Medicaid Program





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What's Medicaid?



- Goal: To provide **basic** health care services
- It's called: Katie Beckett, Title 19, BadgerCare Plus, Medical Assistance and MA
- A federal program
- Managed and partially funded by individual states
 - Different in every state

Wisconsin's Medicaid is handled by the Department of Health Services (DHS)



WISCONS

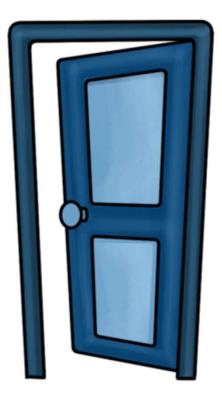
Is My Child Eligible for Medicaid?

There are 3 ways to define eligibility for Medicaid*

- 1. Disability: (Katie Beckett) Considers only child's income
- 2. Income: (BadgerCare Plus) Considers family income Do not need a disability
- **3. Disability and Income**: (SSI) Supplemental Security Income Considers both disability and income

*Proof of citizenship is required for all programs

There are "Different Doors" to Medicaid





- Your child must have a "marked and severe" limitation in functioning for at least 1 year
- Your child's disability must require an "institutional" level of care
 - This will be assessed every year using the CLTS Functional Screen tool
- Your child is under the age of 19
- Only child's income is considered; not family income and assets
- Children may also be covered under private insurance

Is My Child a Good Fit for the Katie Beckett Program?



Contact: Katie Beckett Eligibility Specialist



888.786.3246

<u>(hs.wisconsin.gov/</u> <u>kbp/index.htm</u>



Is My Child a Good Fit for BadgerCare Plus?

BadgerCare Plus:

A health care coverage program for low-income Wisconsin residents.



Family income limit based on 306% of the Federal Poverty Level for child eligibility

• Limit will vary annually

To apply, go to ACCESS.wi.gov

When can I enroll my child?

• Any time—BadgerCare Plus does not have an open enrollment period

Supplemental Security Income (SSI): A program offered through the Social Security Administration that provides monthly cash benefits and Wisconsin Medicaid to those who qualify.

Disability Standard

- Your child must have a "marked and severe" limitation in functioning
 - This limitation, or condition, must last for at least 1 year

AND

Income Standard

- For children *under* 18-years old, family income is considered
- For youth *over* 18-years old, individual's own income is considered



Is My Child a Good Fit for SSI?



Mandatory Services in Wisconsin's State Medicaid Plan (Red indicates mandatory federal services):

- Case management services
- Chiropractic services
- Dental services
- Family planning services
- EPSDT (Health Check), including autism treatment services
- Home and Community-Based Services Waivers (including CLTS)
- Home health services or nursing
- Hospice care
- Inpatient hospital services
- Inpatient hospital, nursing home
- Intermediate care facility services
- Laboratory and X-ray services
- Drugs listed in Wisconsin's Medicaid drug index
- Medical supplies and equipment

- Mental health and psychosocial rehabilitative services
- Nurse midwife services
- Nursing services
- Optometric
- Outpatient hospital services
- Personal care services
- Physical and occupational therapy
- Physician services
- Podiatry services
- Prenatal care coordination
- Respiratory care services
- Rural health clinic services
- Skilled nursing home services
- Speech, hearing and language disorder
- Substance abuse services



• Transportation to obtain medical care

MEDICAID: Covered Mental Health Services

Medicaid covers a variety of supports, services and medications for children with mental health or behavioral health challenges:

- Visits with private or community-based mental health providers
- County-administered, mental health programs
 - For children with more complex mental health, behavioral or substance abuse needs
 - <u>Coordinated Services Teams</u> (CST): "Wraparound" program-intensive, holistic care planning
 - <u>Comprehensive Community Services</u> (CCS): Community-based supports and services
 - Family is an important team member as treatment and service plans are made



<u>HealthCheck Other Services</u> (HCOS): An option to cover mental health services not typically covered by Medicaid card, like residential or day treatment programs

Do You Know What the Medicaid Card Pays for?



- Diapers for children age 4 and over
- Medical transportation
- Over-the-counter medications*
- Services needed due to "medical necessity" including:
 - Mental Health Services
 - Personal Care Services
 - Behavioral Therapy

*"Health Check Other Services" may need to be used to access services.



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Respite Care vs Personal Care: *What's the Difference?*

Respite Care Services

- Short-term relief or "time off" from caregiving responsibilities for parents and families
- Can be provided at home or in the community
- Paid for by state and county programs including CCOP and CLTS Waivers

Personal Care Services

- Assists a child with daily-living activities like feeding, toileting, bathing and dressing
- **MUST** be provided in the home
- Paid for as a Medicaid Card benefit



MEDICAID: What if Your Child has Both Medicaid & Private Insurance?



Medicaid is the <u>Payer of Last Resort</u>!

- All other insurance plans pay claims first
- Medicaid will only pay claims that private insurance has formally denied
 - All services must be billed to private insurance first, or Medicaid will not pay
- Medicaid can cover private insurance co-pays
- Medicaid can cover additional therapies and services for your child above those covered by your private health plan

Children's Long-Term Supports & Medicaid Waivers



Children's Long-Term Support Medicaid Waivers



What?

- Eligibility
- CLTS Functional Screen
- What do they provide
- What are outcomes/goals

Why?

- Knowing how to apply can streamline the process
- If eligible, these programs can reduce stress on families



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Long-Term Support Programs

Programs for Children

- <u>C</u>hildren's <u>C</u>ommunity
 <u>O</u>ptions <u>P</u>rogram (CCOP)
- <u>C</u>hildren's <u>Long-Term</u>
 <u>S</u>upport Waivers (CLTS)

Programs for Adults

- Family Care
- Include, <u>R</u>espect, <u>I</u> <u>S</u>elf-Direct (IRIS)





What Is the CLTS Waiver Program?

Long-Term Supports: Programs and services that help an individual live in the community.

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Family

Some Examples:

- Adaptive aids
- Home modifications
- Parent training and education
- Peer supports
- Respite
- Specialized equipment
- Vehicle modifications

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What's The Children's Community Options Program?

- State funded
- Administered by counties
 - Benefits:
 - Flexible, can pay for the supports that aren't paid for by Medicaid
 - Useful for a one-time need
 Families who aren't eligible for Medicaid may use the program

<u>Children's Community Options</u> <u>Program (CCOP): Assists a</u> family's capacity, resilience and ability to support a child with disabilities.

Family

• Extra staffing and supervision

- Special toys and art supplies
- Communication devices
- Safety equipment
- Other materials to support a child's goals & exceptional needs

Paying for Additional Costs while at Daycare



Family

CLTS: How do I enroll my child?

Contact Your County's Human Services Department

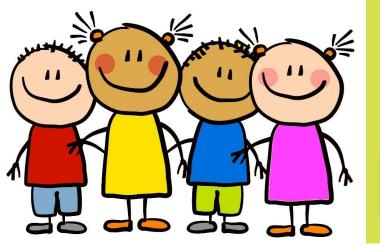
dhs.wisconsin.gov/clts/contact.htm



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Is My Child Eligible for Long-Term Supports?



- CLTS Waivers require the child to be living with his/her family
- Like the Katie Beckett Program, the child must meet the institutional* level of care in one of three areas:
 - Physical disabilities
 - Developmental disabilities
 - Severe emotional disabilities
- A parental cost share is placed on a sliding fee scale
 - Ensures that cost is based on family income

*The institutional level of care is the same standard used to access Medicaid through the Katie Beckett program. This is decided using the "CLTS Functional Screen." REALITY CHECK: CLTS Functional Screen <u>CLTS Functional Screen</u>: A tool that determines a child's functional eligibility for programs.

- You have the right to **appeal the decision** if your child does not meet the eligibility standards
- Your child may repeat the functional screen in the future
 - Changes in needs or abilities as your child gets older
- You have the right to ask for the functional screen to be done for your child
 - Even if the screener doesn't think that your child will qualify



Rosy vs. Realistic: Completing the CLTS Functional Screen

Rosy	VS.	Realistic
Ben can dress himself independently.	<u>vs.</u>	Ben can dress himself independently about one day a week, if I have the right clothes out for him.
Mikayla can communicate her needs to me.	<u>vs.</u>	Most of the time, people who aren't familiar with Mikayla do not know what she wants or can't understand her words or signs.

Decisions about CLTS eligibility are made using the "Functional Screen"



What Outcomes or Goals Do I Want for My Child?



Think about what you want your child to achieve, accomplish or learn in the next six months, a year or longer

- What are your fondest dreams for your child?
- What do you find most challenging about your child's condition?



Individual Service Plan

We were just told that our child is eligible for CLTS! ...Now what?



Individual Service Plan for CLTS Programs

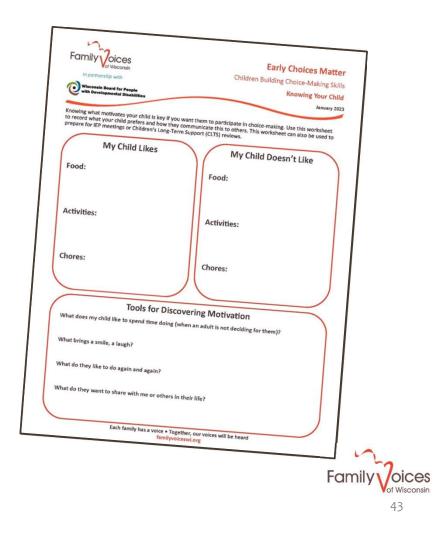
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1 Program(s) 1a Plan Type C1tS Valver Program New Recettfication CCDP Sek-Muth Revel Update												37 PARTICIP	ANT-INFORMED RIGHTS AND CHOICE QUIRED at initial plan development and	recertification. Al	lines apply to both CLTS Waiver and CCC	DP, unless otherwise ir	ndicated.
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Prepare Yourself for the ISP

You're already an expert!

Take time to organize your thoughts

familyvoiceswi.org/learn



Deciding Together Guide



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Which options are helpful and would not cause harm or hardships? Which options would help your child live their best life, now and into the future? Of the options that would work well, decide which one(s) are allowable and promote quality, long-term results at the best value.

DEVELOP THE PLAN TOGETHER

Let's develop your child's plan. Together we will identify who will be the providers of supports. Establish goals, timelines, and team members' responsibilities. Maximize community resources (like Medicaid services, school, housing assistance, FoodShare, and natural supports). It's important we understand all perspectives, seek solutions, and discuss options to appeal if we are unable to agree.

EVALUATE EFFECTIVENESS

We will schedule times to meet together as a team to talk about how the plan is working. Is there progress? Are the supports helping to reach the goals or outcomes? Should the plan be adjusted? Are there new concerns or goals? We will discuss what needs to be changed and go through the steps togethe again whenever needed.

P-02246 (09/2018)

What is Deciding Together?

A step-by-step guide to decision-making as the team develops the supports plan with your family.

What is the guide for?

To make the decision-making process transparent-clear and open-to everyone. To ensure the voice of families and youth as equal partners at every step. To use the expertise of every member of your supports team. To promote the goal of every child living their best life.

How does it work?

The planning discussion starts wherever you're at-with your concerns and/or with your hopes and goals.

Your child's views matter, too-especially for older children and youth.

You might have something challenging or stressful you want to work on, or perhaps you have an upcoming change you want to prepare for-like your child changing schools or preparing to become a young adult.

Team members will seek to understand your child and family and situation. Outcomes might include things such as feeling comfortable that your child will know how to be safe when walking in the community or finding a way to let go of stress and take care of yourself, so that you can return home energized or relaxed. Once goals and outcomes are clear, the rest of the steps guide the team through creative thinking and planning.

Everyone on the team has expertise and can be helpful to develop the best plan. By combining the knowledge that you have as the expert with the most knowledge about your child, along with the information your service coordinator has about available community supports and services, you are able to develop a unique plan that best matches your family.

As a team, everyone takes part in a guided conversation through the steps to develop the support plan

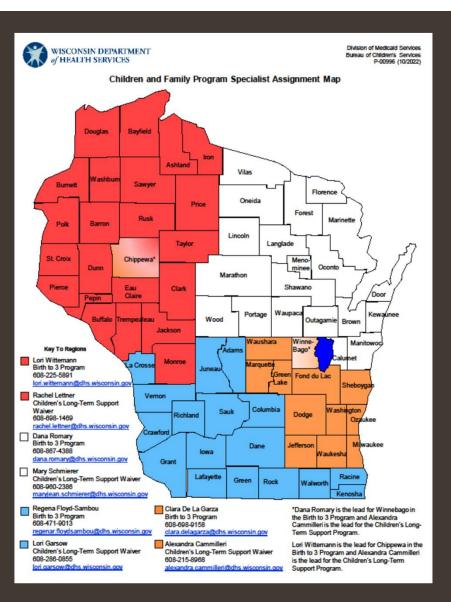
Get Ready for a Lot of Questions! You'll be Asked Questions, Such As:

What's going well? What could be improved? What results would you like to see? What would success look like? What makes your child smile? What does your child enjoy? What types of activities do you and your family enjoy? What kinds of opportunities do you want for your child, yourself, and your family? What are your family traditions, beliefs, or preferences? What changes are coming up for your family? What are your prries about trying something new? Are there family members or neighbors who are interested in having a bigger role in your child's life? Feel free to ask questions of your own.

Every Child Lives Their Best Life

The supports and services needed to assist your child and family will likely change over time. Plans need to adapt and change as a child and family's lives change, so this decision-making process is intended to be repeated at least every year and more often when needed. The goal of the Deciding Together Guide is to develop an individualized support plan for your family to help your child to live their best possible life now and into the future.





Children and Family Program Specialist

https://dhs.wisconsin.gov/publications/p00996.pdf

A little extra help when you need it!



Prior Authorization & Coordination of Services



Prior Authorization & Coordination of Services

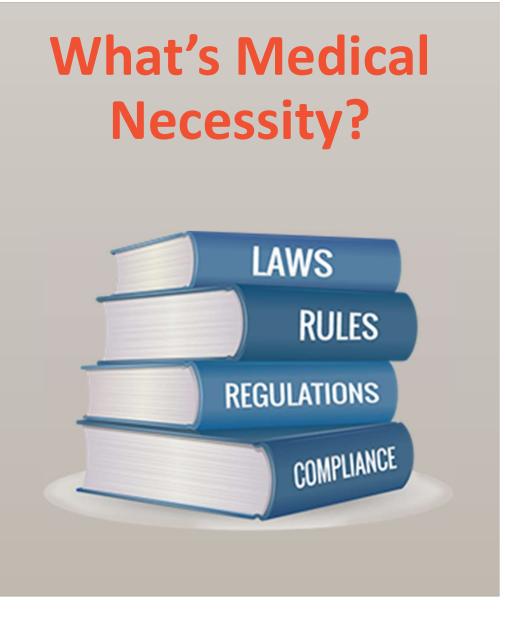
What?

- Who approves prior authorizations
- What is medical necessity
- Duplication of service
- How to appeal a decisionWhy?
- Denial of services is upsetting





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Wisconsin has its own definition of Medical Necessity



Who Approves Your Prior Authorization?

- Medicaid has dedicated staff at the Department of Health Services to review PA's
- Private insurance companies have their own reviewers for PA's
 - Staff specialize in different area of disability
 - Decisions on PAs are individualized
 - Staff may request extra information to help decide
 - PAs include the time period and amount of services to be approved



<u>Prior Authorization</u> (PA): A written request between either your private insurer or Medicaid, and the health care provider asking to explain why a service is medically necessary before payment can be approved.

Avoiding Duplication of Services

The PA must show that these two goals are different

Educational Necessity



Medical Necessity

Medicaid will check

- Medicaid will request a copy of the IEP with the PA
 - Medicaid will NOT pay for a service that is already being provided at school
 - A good check because schools also bill Medicaid for services



Let's Practice! Is this a Duplication of Services?

Physical Therapy Goal

Community-Based:

Lucy will independently transfer herself to the toilet and in and out of the bathtub, bed and car.

Treatment: Improve muscle and trunk strength

IEP:

Lucy will move independently throughout the school building using a walker and attend classes on time.

Treatment: Gait training with a walker in empty and crowded hallways



Let's Practice! Is this a Duplication of Services?

Speech and Language Goal

Community-Based:

Eduardo will improve speech intelligibility.

Treatment: Specific bilabial therapy (two-lip consonants, b, p, m and w)

IEP:

Eduardo will be understood by his teachers.

Treatment: Work on diction and production of specific consonants



Let's Practice! Is this a Duplication of Services?

Occupational Therapy Goal

Community-Based:

Keesha will strengthen and relearn how to use her right hand following surgery.

Treatment: Mobility exercise and ongoing caregiver training

IEP:

Keesha will independently complete classroom assignments using adapted writing instruments.

Treatment: Use of a weighted pencil, positioning adaptations and therapeutic techniques to improve coordination

Family

How Can I Appeal a PA Denial?

Medicaid recipients can request a Fair Hearing from the state

A Fair Hearing is **NOT** going to court, and you do **NOT** need an attorney

- Often done as a phone meeting
- You can have someone participate to support you

1st Write a letter directly to "Wisconsin Department of Administration, Division of Hearings and Appeals"

2nd Complete the request using the form found on the DHS website

Important Reminder: Respond ONLY to the reason for the denial as it's written in the letter that you received

The Role of Family: More Than Health Care



Your Role as a Family Member

What?

- Dream, Imagine, Create
- Advocacy

Why?

It's not all about programs





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- Dream with your child
- Imagine different possibilities
- Take opportunities
 - Use "teachable moments"
 - Role play
- Create experiences
 - Extra curricular activities
 - Community activities
 - Leadership activities
- Plan for the future
 - Build skills for independence

What do You Want to do When You Grow Up?





Advocacy Leads to a Bright Future

Knowing your child's dreams and goals will help you to be an advocate and a voice for your child:

- In the emergency room
- With your insurance company
- At the school IEP meeting



Your Voice is Powerful!



Be an Effective Advocate

- Speak up and share your opinions
 - You are knowledgeable!
- Don't worry about what you don't know
- Use your experiences in your advocacy
 - It's very powerful
- Choose issues that you feel passionate about





Thank You

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