

Keep Family Care Focused on Community Living

Reduce Unnecessary Institutional Placements in Wisconsin's Family Care Program

People enrolled in Family Care should have a meaningful opportunity to receive the services and supports they need while living in their communities.

Wisconsin's Family Care program is designed to provide Medicaid-funded long-term care services to older adults and adults with disabilities.

For many members, those services make it possible to live independently in a home or community setting rather than an institution.

WILN is concerned that community-based Medicaid waiver dollars are being used to pay for institutional placements through Family Care—even when community living may be possible with the right services and supports.

Wisconsin should ensure that Family Care continues to fulfill its community-living purpose.

The Problem

Having a community-based long-term care program does not guarantee that every member has a viable community-based option.

Family Care members may need a combination of personal care, supportive home care, transportation and other long-term services to live successfully in the community.

Those services depend on having providers available to deliver them.

When Managed Care Organizations do not have sufficient provider networks to meet members' needs, community living can become more difficult to sustain.

WILN is concerned that some Family Care members are instead living in institutional settings paid for with Medicaid waiver funds intended to support community-based long-term care.

The issue is not whether institutional care should ever be available. Some individuals may need or choose that level of care.

The concern is **unnecessary institutionalization when a person could live successfully in the community with appropriate services and supports.**

WILN's Solution

Strengthen state oversight of Family Care to ensure community living remains a meaningful option.

WILN recommends that the Wisconsin Department of Health Services strengthen monitoring and enforcement of Managed Care Organizations in three areas:

1. Monitor institutional placements.

DHS should ensure that Family Care members are not unnecessarily living in institutional settings when their needs could appropriately be met in the community.

2. Require sufficient provider networks.

Managed Care Organizations should maintain and use provider networks capable of meeting the needs of their members.

A community-based benefit only works when qualified providers are actually available to deliver the services members need.

3. Ensure providers are fairly reimbursed.

WILN calls for monitoring and enforcement to ensure providers are paid fair rates for the services they provide.

Maintaining an adequate provider network requires a system in which providers can sustainably deliver community-based services.

Why it Matters

A person's ability to live in the community depends on whether the services they need are actually available.

A Family Care member may be capable of living successfully in their own home or another community setting but still need daily assistance and other long-term supports.

If those services cannot be found, authorized or sustainably provided, the person's choices become much narrower.

For people with disabilities and older adults, that can mean leaving a home, neighborhood and community even when institutional care is not their preferred or necessary option.

WILN believes Wisconsin should ensure that Family Care members have meaningful access to the community-based services the program is intended to provide.

The Ask

WILN calls on the Wisconsin Department of Health Services to:

Strengthen monitoring and enforcement of Managed Care Organizations to reduce unnecessary institutional placements, ensure sufficient provider networks and ensure providers are fairly reimbursed for community-based services.

Family Care should provide members with a meaningful opportunity to receive the services and supports they need in the community.

The Bottom Line

Community living requires more than eligibility for Family Care. It requires having the providers and services necessary to make living in the community a real choice.