

SPECIAL SERVICES ADVISORY COMMITTEE MINUTES

February 18, 2016

Waukesha County DHHS – Room 114

12:00 – 1:30 PM

Members Present: Sara Barron, Wendy Heyn, Patrick Jauquet, Murrene Payten, Eryn Petersen, and Jennifer Siderits

Members Absent: Jennifer Bertram, Eden Christman, Kim Coronado, Jane DeGeorge, Amy Elfner, Emily Enockson, Lisa Fusco, Jason Gahan, Benhi Khabebe, Missy Kueht-Becker, Julie Kunath, Ann Shurte, and Bonnie Siegel

DHHS Liasons Present: Chelsee Bates, Emily Klunick, Courtney McIntosh, Diane Scheerer, Nikki Volk, and Casey Vullings

Guests Present: Karen Mazeika, Daina Mundt, Irma Perez, Mike Potter, Paul Reed, and Jan Sanchez

Agenda Item #1: What to Expect in the Guardianship Program

Jan Sanchez, ADRC and Kerrie Mazeika, APS

A referral is made for the guardianship program by either the parents or a staff member from Children with Special Needs contacting ADRC when the child reaches the age of 17.6. It is then assigned to an ADRC specialist who will work with staff, as well as have direct communication with the family. The ADRC specialist will do a long term care functional screen to determine eligibility, as well as begin discussing guardianship, which cannot be started until age 17.9. A Statement of Incapacity must be met in its entirety as well.

Guardianship is governed by Chapter 54. At age 17.9, a referral is made to Waukesha County APS. If the client has the finances to secure a private attorney, they can also go that route to complete the guardianship process.

If the ward has less than \$5000 in assets, APS gets involved. If there is more than \$5000 in assets, they would secure APS to petition for guardianship. The parents may pay for attorney fees out of their own funds, and then once the case is heard and the guardian is entered into the court, there would be court orders to pay for the guardianship fees.

If the ward meets the criteria for guardianship, APS will submit the petitions.

A “Guardian of Person” is used when, because of the impairment, the ward is unable to effectively receive and evaluate information, or to make or communicate decisions to the extent that the individual is unable to meet the basic essential requirements for their physical health and safety.

A “Guardian of Estate” is used when, because the impaired person is unable to effectively receive and evaluate information, or make or communicate decisions related to the management of his/her own property or financial affairs to the extent that the following applies - the individual is unable to provide for his/her own support, unable to prevent financial exploitation, and has property that will be dissipated in full or in part.

When considering when a person should petition for guardianship, they should ask what the parent is hoping will change or is trying to achieve as a result of becoming their guardian. Also, even though the child is turning 18, is there something that could put them into harm's way? These are factors that are taken into consideration.

A guardian ad litem is then assigned, representing the person's best interests and making sure they understand their rights. Following that, a court-appointed psychologist is appointed, and then a court date is scheduled in front of a court commissioner. A Statement of Acts will need to be completed by the proposed guardian.

If the ward does not contest, it is heard in front of a commissioner. All proposed guardians must be present. Once it is reviewed by the commissioner, it would be granted.

If the ward contests the matter, it will be heard in front of a judge. Probate will then assign a second attorney called advocate counsel. The fees then also increase. The court will then order the fees be paid from the ward's estate/income.

Temporary Guardianship is a 60-day appointment with one possible 60-day extension. Guardian of Person and Estate can be requested at the same time and by the same petitioner. A ward has the right to request to transfer, retain, or move their rights in full.

Incompetence is defined as having a diagnosis of developmental disabilities, serious and persistent mental illness, Degenerative Brain Disorder, or other like capacities. It can include an intellectual disability or other neurological condition which has contributed or can be expected to continue indefinitely and prevents the person from adequately providing for his/her own custody. The conditions can be incurred at any age. Only a judge can declare a ward to be incompetent.

Guardian of the Estate alternatives include (from least to most restrictive): Self, POA-Finances, POA-Health Care, Trust (resources are given directly to a trustee that can only use them as the trust directs), Rep Payee/Dual Signature Accounts (allows person to make their own transactions, but requires another's signature), Conservatorship (not used often. Person has to be competent enough to know what their financial picture looks like and be able to explain that to a judge. It is a voluntary agreement allowing someone to manage their finances for them. It can be terminated at any point in time), Guardianship. They always want to provide for less restriction, so they will review what has been done or could be done to achieve that.

When finances are reviewed, it is not just the money. Other factors are reviewed as well.

Patrick Jauquet mentioned that Katie Beckett covers until age 19, however if the guardianship is not in place once the person is 18 years old, there can be difficulty handling medical and financial aspects. Once the child reaches age 18, they can apply for social security.

Kerrie Mazeika recommends being as diligent with tracking finances and other paperwork if you are the guardian, as you are with your own finances and paperwork, in case there is a dispute later.

Patrick stated that an estate consists of everything - virtual or not. This includes personal belongings and income.

Diane Scheerer reminded everyone that there are times that parents are not the only guardian options. There can also be a corporate or volunteer guardians. There are also attorneys that can be guardians that usually handle complicated estate issues. Agencies, such as Easter Seals, also have guardians that work there, although they may have many people on their caseload. There are volunteer guardians that are usually reserved for cases without a lot of case management.

Kerrie will contact Corporation Counsel to find out if there are parameters to when the court hearing to appoint a guardian can occur, if it is the month of the 18th birthday or the week of the 18th birthday, as it can get tricky after the 18th birthday.

Jan Sanchez commented to make sure not to apply for SSI before the 18th birthday because it will complicate matters.

Guardianships can be modified. Also, as a guardian, you can determine if, for certain circumstances (using the example of a fishing license), you will be the guardian or if the ward would be the guardian.

The ward files their own taxes, however the guardian will sign them.

Agenda Item #2: Introductions

Members introduced themselves and their roles (parent or professional).

Agenda Item #3: Solicitation of Agenda Items/Approval of Minutes from 11/19/15

Sara Barron moved to approve the minutes. Seconded by Chelsea Bates and approved.

Camps Listing by Broadscope

Sara Barron

Sara passed out a listing for camps for children and adults. Casey Vullings reminded everyone that just because it is on a list that the committee members distribute, does not mean it is funded by the program, and potential participants should contact their service coordinators.

Agenda Item #4: Children's Community Options Program (Formerly FSP) Update

Casey Vullings

The CCOP staff at Waukesha County consist of Casey, Chelsea, and Courtney McIntosh. Per DHS requirements, an extension had to be requested for the 2015 Family Support Plan this year. The state had to be notified that we are operating under the same procedures and guidelines as last year with Family Support. It has been submitted and processed. The new Children's COP plan will be due no later than September 30th, 2016. In this transition year, they want more information about the benefits in quarter 2, and in quarter 3, they want a draft of the CCOP manual.

40-50 families have been served with initial home visits and have gotten some things funded. Approximately 160-170 families have returned questionnaires. Last year, Waukesha County was able to serve 120-130 families. This year, they are hoping to reach 160 families.

The goal is to meet the families, address the health and safety needs, and meet those needs if possible. Unless it is required or needed, a case will not be opened for 6-8 months. Needs requested should be in mind at the beginning so that once the family is served, they can move onto the next family, serving more families on the waiting list.

Birth to 3 is still its own program. It has been discussed about having Birth to 3 assume more of a role on this committee. The CCOP staff is coordinating with Birth to 3 to work with the clients and let them know about SSAC, since the families they are serving right now are typically families that will be coming up in their programs later.

Based on the surveys that have come back, people are interested in the committee. A list is currently being assembled. Patrick stated that in the past, some committee members contacted those interested families to discuss it. Wendy commented that, based on what she talked to people about, if the website was updated and more user-friendly, it would be much more helpful. Diane Scheerer mentioned putting the agenda on the ListServ.

Agenda Item #5: CLTS Waiver/Card Covered Benefit Update – How things are going?

Casey Vullings & Diane Scheerer

Casey announced that kids that were currently receiving services through the waiver, May is the first month to transition to Medicaid services. Parents should contact service coordinators to find out when their month is. Providers should be submitting prior authorizations to Medicaid for pre-approval of services. From there, service coordinators will be meeting with families to assess the needs for possible continued waiver participation.

Under CMS, medical in home behavior treatment services can no longer be paid for with Medicaid. The change encompasses the two largest areas of the waiver. It is not autism - it is a behavioral health benefit under services. Behavioral health has always been covered only for children with a straight mental health diagnosis. The waiver has been paying for dual-diagnosis (developmental disabilities and/or mental health) because it was not covered by the card. The biggest change will be for the ABA therapy/intensive services. It is now a card-covered service, on top of in-home behavioral therapy is a card-covered service for children with developmental disabilities.

As of January 1st, any family not on the waiver takes their Medicaid card and contacts the provider. Waukesha County is involved with any open CLTS case because they are doing transition planning under the State guidelines from CMS. It would not be possible to take the open 300 cases and transition them all at one time. The 300 Waukesha County cases were divided out over 6 months. This way, providers are working on the prior authorizations, and Waukesha County CSN staff then met with the families to determine other service needs. Once the services have shifted to Medicaid, the waiver will no longer pay for them. The transition to move certain waiver services to the card will be complete by December, 2016.

In the past, there were limited places that could provide services to dually-diagnosed people. Now, parents will be working with the provider directly, rather than having a case manager work with the provider, and it will also eliminate the wait for services under the CLTS Waiver.

Part of the prior authorizations are not just the hours, but also IFPs and IEPs. It might not match the waiver, so be sure to speak with the service coordinator for consistency.

Agenda Item #6: Agenda Items

Should the schedule be changed to have something in the summer?

There was discussion about how to bring in attendance – e-mails, flyers, etc. The committee's purpose is to provide feedback on the programs and address unmet needs.

Casey will reach out to NAMI Basics to attend May's meeting.

There is a public hearing on April 7th at 7pm at WCDHHS when the public can come and give the board feedback and information.

Emily Klunick motioned to adjourn, seconded by Sara Barron. Meeting adjourned at 1:34 PM.

The next meeting is May 19, 2016 from 12:00 – 1:30 PM.