

November 7, 2016

CHILDREN'S COMMUNITY OPTIONS PROGRAM ADVISORY COMMITTEE
Douglas County Health and Human Services Department
Wednesday, November 16, 2016, 2:00 p.m., Courthouse Room 207C,
1313 Belknap Street, Superior, Wisconsin

If you are unable to attend, please call the County Clerk's Office (715-395-1569) prior to meeting.

MEMBERS: Debora Carroll, Chair
Susan Hendrickson, Vice Chair
June Finsland
Shari Piore
Kristina Lampi
Patty Dodge
Wanda Woodhull
Mary Chialastri
Carrie Lott
Paulette Alseth

A G E N D A

(Committee to maintain a two-hour meeting limit *or* take action to continue meeting beyond that time).

1. Roll call.
2. Approval of minutes from the June 8, 2016, meeting (attached).
3. Action item: Review and approve Children's Community Options Program Five-Year Plan (attached).
4. Adjournment.

cc: Andy Lisak Susan Sandvick Douglas County Website
Pat Schanen Erika Leif Shelley Nelson (Telegram)
County Board Supervisors Samantha Roark

Note: Attachments to agenda are available in County Clerk's Office for review or copying, and are also available on the county's website www.douglascountywi.org. Action may be taken on any item listed on the agenda. The County of Douglas complies with the Americans with Disabilities Act of 1990. If you are in need of any accommodation to participate in the public meeting process, please contact the Douglas County Clerk's Office at (715) 395-1341 by 4:00 p.m. on the day prior to the scheduled meeting. Douglas County will attempt to accommodate any request, depending on the amount of notice we receive.

Posted: Courthouse, Government Center, Telegram copied



11-7-16

Name

Date

CHILDREN'S COMMUNITY OPTIONS PROGRAM ADVISORY COMMITTEE
Douglas County Health and Human Services Department
Wednesday, June 8, 2016, 1:00 p.m., Room 207C, Douglas County Courthouse,
1313 Belknap Street, Superior, Wisconsin

Meeting called to order by Chair Debora Carroll.

ROLL CALL: Present – Debora Carroll, Susan Hendrickson (left at 1:29 p.m.), June Finsland, Shario Pioro (arrived 1:15 p.m.), Mary Chialastri. Absent – Paulette Alseth, Patty Dodge, Wanda Woodhull, Carrie Lott. Others present – Erika Leif, Mark Liebaert, Kaci Lundgren, Committee Clerk.

APPROVAL OF MINUTES: Motion by Finsland, second Hendrickson, to approve minutes from the March 9, 2016, meeting, with the following correction under Budget: “...only 10% of administrative costs are charged to program; county levy provides 90% of funding” should read “up to 10% of administrative costs can be charged to program; additional administrative costs covered by county levy”. Motion carried.

ACTION ITEM: Meeting Date and Time Change: Later time is easier for members to attend.

ACTION: Motion by Chialastri, second Finsland, to change next meeting time to 2 p.m. on Wednesday, September 14, 2016. Motion carried.

INFORMATIONAL ITEMS:

Program Report: 20 children in program; 18 families being served. Short staffed due to resignations; still awaiting new guidelines and changes for Children’s Community Options Program versus Family Support Program.

Budget: Under-budget through April 2016.

Survey: Not many responses on survey; discussed potential to include electronic and hand-carry options.

New Member Recruitment: To follow-up with members that have not been in attendance.

FUTURE AGENDA ITEMS: Children’s Community Options Program guidelines; survey results; meeting date and time; new member recruitment.

ADJOURNMENT: Motion by Pioro, second Chialastri, to adjourn. Motion carried. Meeting adjourned at 1:35 p.m.

Submitted by,
Kaci Jo Lundgren, Committee Clerk

Scott Walker
Governor

Kitty Rhoades
Secretary



State of Wisconsin
Department of Health Services

DIVISION OF LONG TERM CARE

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Date: May 19, 2016
To: CLTS County Waiver Agency Leads
From: Deborah Rathermel, Director
Bureau of Children's Services

**Children's Long-Term Support Waiver Implementation Plan:
Home and Community-Based Settings Rule**

Purpose

The purpose of this communication is to provide information to waiver agencies administering the Children's Long-Term Support (CLTS) Waiver Program regarding new setting requirements included in the federal Medicaid Home and Community-Based Services Final Regulation (CMS 2249-F/2296-F).

Background

In 2014, the Centers for Medicare and Medicaid Services (CMS) released new federal requirements for home and community-based services (HCBS) settings. CMS requires all states that operate Medicaid HCBS waivers to comply with the federal HCBS settings rule by March 17, 2019. The purpose of the new rule is to ensure that people receiving services through HCBS waiver programs have access to the benefits of community living and are able to receive services in the most integrated setting.

Since Wisconsin operates several programs under Medicaid HCBS waivers, the Department of Health Services (DHS) is required to implement the new rule. Under the new requirements, DHS must ensure that waiver providers meet the HCBS requirements. Approximately 65,000 people in Wisconsin receive services under Medicaid HCBS 1915(c) waiver programs. The ability of DHS to continue to provide home and community-based services depends on ensuring compliance with the rule by the deadline of March 17, 2019. Wisconsin's plan for meeting the rule's requirements is described in the Statewide Transition Plan.

The CLTS Waiver Program is included in the home and community-based settings rule. The following information includes an outline of the CMS requirements, the process DHS has designed to meet the requirements, and the waiver settings that are subject to the rule.

Overview of the HCBS Settings Final Rule

The final rule requires all HCBS settings to meet certain qualifications. These qualifications for the setting include:

- Is integrated in and supports full access to the greater community.
- Is selected by the individual from among setting options.
- Ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint.
- Optimizes autonomy and independence in making life choices.
- Facilitates choice regarding services and who provides them.

The final rule also includes additional requirements for provider-owned or controlled HCBS residential settings. These requirements include:

- The individual has a lease or other legally enforceable agreement providing similar protections.
- The individual has privacy in their unit, including lockable doors, choice of roommates and freedom to furnish or decorate the unit.
- The individual controls his/her own schedule, including access to food at any time.
- The individual can have visitors at any time.
- The setting is physically accessible.

Any modification to these additional requirements for provider-owned home and community-based residential settings must be supported by a specific assessed need and justified in the person-centered service plan.

Outline of Wisconsin's Transition Plan

Wisconsin will use a comparable process for both residential and non-residential settings that includes a multi-phase process to assess compliance with the HCBS settings requirements. This approach includes:

- An assessment of all waiver settings for compliance with the rule.
- An assessment of the regulatory and policy framework for residential settings with regard to compliance with the rule.
- Provider self-assessment.
- Validation of the self-assessment response.
- Ongoing monitoring and re-evaluation of settings.

Waiver Settings Subject to the Rule

DHS has determined the following residential settings are subject to the rule:

- Licensed community-based residential facilities (CBRFs)
- Licensed 3-4 bed adult family homes (AFHs)
- Certified 1-2 bed AFHs
- Certified residential care apartment complexes (RCACs)
- Level 5 exceptional treatment foster homes

Per the rule, these settings must meet conditions that ensure specific rights of people living in those settings.

DHS has also determined that all non-residential waiver services are subject to the rule. However, the non-residential settings most affected by the rule are:

- Adult day services
- Adult day care providers
- Pre-vocational providers
- Children's day services

Per the rule, all settings must meet conditions that ensure specific rights of people receiving HCBS waiver services in those settings. Mainly, the setting must not isolate CLTS Waiver participants.

Additional Resources

For the complete language of the HCBS Settings rule see: Code of Federal Regulations: *Title 42: Public Health: PART 441-SERVICES: REQUIREMENTS AND LIMITS APPLICABLE TO SPECIFIC SERVICES-Subpart G-Home and Community-Based Services: Waiver Requirements.* Or at: <http://www.ecfr.gov>

You can also access further information on the CMS-HCBS settings final rule on the CMS website found at:

<http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Supports/Home-and-Community-Based-Services/Home-and-Community-Based-Services.html>

DHS has also posted HCBS settings information, including Wisconsin's Statewide Transition Plan on the DHS Website found at:

<https://www.dhs.wisconsin.gov/hchs/index.htm>

If you have questions or concerns regarding the final settings rule, please contact the Bureau of Children's Services, CLTS Inbox at DHSCLTS@wisconsin.gov.

CENTRAL OFFICE CONTACTS:

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Division of Long Term Care

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Attachments: CLTS HCBS Settings Rule FAQ

Scott Walker
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Kitty Rhoades
Secretary



State of Wisconsin
Department of Health Services

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Date: June 14, 2016

To: County Department of Human Service Directors
County Department of Social Services Directors
County Department of Community Program Directors
Long-Term Support Supervisors and Leads

From: Deborah Rathermel, Director
Bureau of Children's Services

Subject: Children's Community Options Program Implementation Planning – Allowable Services and Related Updates

Background

Effective January 1, 2016, the Family Support Program funding merged with the portion of Community Options Program (COP) allocated to children to form the Children's COP. The statutory authority and program requirements for Children's COP are established in 2015 Act 55 in the biennial budget, which created Wis. Stat. § 46.272.

This memo provides ongoing guidance to county agencies as they develop their local Children's COP. This communication focuses on the allowable services and related Human Services Reporting System (HSRS) codes and reporting requirements for the program.

Overview of Allowable Children's COP Services

The determination of allowable services in Children's COP was derived from an analysis of the allowable services that were covered under the Family Support Program (FSP) and COP. Previous guidance issued to county agencies indicated that beyond the limitations detailed in statute, the 2016 county Children's COP allocations may be used to fund supports and services that have been allowable under FSP. The updated guidance provided in this memo does not reduce the allowable supports and services; it does, however, expand the instructions for utilizing these services.

Key policy factors used in the development of the Children's COP benefit package are:

1. Children's COP funding is funding of last resort.
 - The home and community-based services (HCBS) Medicaid waiver program funding must be used first as this will capture more federal money and serve more people. This requirement is often referred to as the waiver mandate.
 - Waiver program eligibility and funds must be pursued before Children's COP funds can be used.

2. Children's COP funding can be more flexible than waiver funding—This general purpose revenue (GPR) funded program, within limits, can be used to meet the long-term support needs of eligible children and families to pay for goods and services that are not waiver allowable.
3. Children's COP funding can be used as local match for services for Children's Long-Term Support (CLTS) Waiver participants—When Children's COP is used as local match for CLTS Waiver services, all waiver criteria apply to the services.
4. Funding can be used for individuals eligible for Children COP but not eligible for CLTS Waiver Program—When Children's COP program funding is not used as CLTS Waiver match, often referred to as 'pure' COP or 'straight' COP, all Children's COP guidelines and program rules apply.

The allowable services in the Children's COP benefit package are listed in the attached. Please note the following factors:

- All CLTS Waiver services and codes except HSRS code 609.02 Consumer and Family Directed Supports.
 - o Families will be able to direct supports in Children's COP. The code for any consumer and family-directed supports will be the code applicable to the service that is being directed. The 609.02 code will not be used for these services.
 - o This approach allows us to identify the specific services being utilized
- All FSP services are included in the Children's COP benefit—The alphabetic codes used in FSP have been cross walked to the updated HSRS Children's COP codes. The services are all included, only the coding will need to be revised for Children's COP reporting purposes.
- Many, but not all, COP services are included in the Children's COP benefit. Not included in Children's COP:
 - o Mental health services available under through Comprehensive Community Services (CCS) in regional service delivery systems.
 - o Juvenile court and corrections-related services that are the responsibility of the courts/county.
 - o Congregate residential settings not allowed in waiver funding or for use with children.
 - o Protective Payment/Guardianship and Advocacy and Defense Resources as "Legal Services" that are the responsibility of courts/county
 - o Prevocational/vocational: responsibility of the Department Workforce Development, Division of Vocational Rehabilitation and schools.

Program Eligibility

If a child is eligible for either FSP or COP, s/he is eligible for Children's COP. The CLTS Functional Screen (CLTS FS) establishes eligibility for various children's long-term support programs. The screen currently does not list the Children's COP; however, the CLTS FS system updates are expected to occur during 2016. In the meantime, when seeking to establish eligibility for Children's COP, either FSP or COP CLTS FS eligibility is adequate for determining Children's COP eligibility.

Advisory Committee

As instructed in the memo dated December 14, 2015, January 2016 Children's Community Options Program, county agencies are to have appointed their advisory committee in the first quarter of 2016 and to hold an initial advisory meeting in the second quarter of 2016.

The composition of the committee must include the members outlined in Wis. Stat. § 46.272(4)(a)(1-2).

Annual Program Plan

The requirements for the Children's COP plan are outlined in Wis. Stat. § 46.272(4)(b). County agencies will need to develop their proposed Children's COP plan in 2016 and obtain the approval of their advisory committee. The county agency's proposed Children's COP plan must be submitted to the Wisconsin Department of Health Services (DHS), Division of Long Term Care, Bureau of Children's Services, no later than September 30, 2016, for review and final approval. A DHS template for creating the Children's COP plan will be available in June 2016.

Reporting and Coding Instructions

The new Children's COP codes will be available in HSRS beginning August 1, 2016. Counties should begin reporting Children's COP expenses to HSRS monthly beginning in August 2016.

County agencies using Children's COP funding as a local funding match for CLTS waiver services will use the funding source "CC" on the corresponding authorizations and claims submitted to the CLTS Third Party Administrator (TPA). County agencies are expected to use the funding source code "CC" on any new Children's COP authorizations and to update any existing 2016 FSP (FS) and COP (CP) authorizations to "CC" for use of Children's COP funding as CLTS match at their earliest convenience.

County agencies reporting Children's COP expenses that are NOT waiver matched (100% GPR) will use the HSRS Long-Term Support (LTS) module. County agencies will use the LTS code 7 (field 26) with a fund source code of "cc" (field 27).

Effective January 1, 2016, for CY 2016 expenses, county agencies will no longer use the Family Support module to report expenses for services to children when the funds are used as straight GPR. (Reporting requirement for CY 2015 expenses for children has not changed.)

Please contact the Bureau of Children's Services at DHSCLTS@dhs.wisconsin.gov if you have outstanding questions.

Children's Community Options Program 2016 Allowable Service Categories

Allowable Services
Child Care
Respite
Supportive Home Care
Housing Assistance
Housing Start Up
Transportation
Daily Living Skills Training
Personal Emergency Response System
Assistive Technology/ Communication Aids
Specialized Medical and Therapeutic Supplies
Home Modifications
Adaptive Aid - Vehicle
Dental and Medical Care
Specialized diet/ nutrition
Specialized Clothing
Adaptive Aid - Other
Consumer Education and Training
Adult Family Home/ 1-2 bed (not room and board) - needs prior approval
Adult Family Home/ 3-4 bed (not room and board) - needs prior approval
Child Foster/ Treatment Home (not room and board) - needs prior approval
Recreation Activities
Counseling and Therapeutic Services
Mentoring
Community Integration Services
Assessment
Plan
Case Management/ SSC
Health Screening and Accessibility
Housing Counseling
Supported Employment
Financial Management Services
Day Services Children
Nursing Services

Scott Walker
Governor



DIVISION OF LONG TERM CARE

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Linda Seemeyer
Secretary

**State of Wisconsin
Department of Health Services**

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August 30, 2016

To: County Department of Human Service Directors
County Department of Social Services Directors
County Department of Community Program Directors
Long-Term Support Supervisors and Leads

From: Deborah Rathemel, Director
Bureau of Children's Services

Subject: Children's Community Options Program (CCOP) Updates:
CCOP Plan Template and Children's Long-Term Support Functional Screen

Background

This memo provides updated information regarding the implementation of the Children's Community Options Program (CCOP), which went into effect on January 1, 2016, by merging funding from the Family Support Program (FSP) and the Community Options Program (COP). The statutory authority and program requirements for the CCOP are established in 2015 Act 55 § 46.272.

The purpose of this memo is to provide notice regarding changes to the Children's Long-Term Supports Functional Screen (CLTS FS) that are scheduled to move to production via the Functional Screen Information and Access (FSIA). This memo also provides operational updates regarding the submission of the county agencies completed CCOP Plan to the Division of Long Term Care's Bureau of Children's Services (BCS).

CLTS Functional Screen Updates

The CLTS FS system is being updated to reflect a child's level of care eligibility for the CCOP. (The CLTS FS level of care eligibility for FSP and COP will be removed). With these system changes, a child who was previously found eligible for either FSP or COP will be found functionally eligible for the CCOP. The CLTS FS level of care logic flow determination includes the following changes:

- A child who is adjudicated as a delinquent may meet CCOP eligibility.
- A child who resides in a foster care setting may meet CCOP eligibility.
- A child who is not a U.S. citizen may meet CCOP eligibility.

In addition, updates have been made to the "Living Situation" section of the CLTS FS to reflect current terms and phrases for the current residence of the child, while more closely aligning with the adult Long-Term Care Functional Screen (LTC FS).

These CLTS FS changes are targeted to move to system production on **September 8, 2016**.

CCOP Plan Requirements

The requirements for the Children's COP Plan are outlined in § 46.272(4)(b), Wisconsin statutes. County agencies need to develop their Children's COP Plan with their advisory committee and obtain their preliminary approval. The Department of Health Services has developed a Children's Community Option Program Five-Year Plan template, based on the statutory requirements, which are detailed in § 46.272(4)(b) Children's COP Plan Template

County are to submit your agency's completed CCOP Five-Year Plan to BCS for review and approval no later than **November 30, 2016**. Submit the completed plan via email to the CLTS inbox at DHSCLTS@dhs.wisconsin.gov and include in the email subject line "2017 Children's COP Plan - (County Name)." Be sure to identify the county agency that will administer the CCOP and a contact person within that agency has been identified.

If you have any follow-up questions regarding the changes to the CLTS FS, please contact the CLTS FS email box at DHSCLTSFS@dhs.wisconsin.gov.

Please send any questions regarding the Children's COP Plan to the CLTS inbox at DHSCLTS@dhs.wisconsin.gov.

Attachments:

- *County Agency Children's Community Options Program (CCOP) Five-Year Plan (F-01813):*
Children's COP Plan Template
- *Functional Eligibility Screen for Children's Long-Term Support Programs (F-00367):*
CLTS Functional Screen

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Secretary



State of Wisconsin

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Date: October 14, 2016

To: County Department of Human Service Directors
County Department of Social Services Directors
County Department of Community Program Directors
Long-Term Support Supervisors and Leads

From: Deborah RATHERMEL, Director
Bureau of Children's Services

Subject: Children's Community Options Program Implementation Planning—Expense Reporting Update

Background

Effective January 1, 2016, the Family Support Program funding merged with the portion of the Community Options Program (COP) allocated to children to form the Children's Community Options Program (CCOP). The statutory authority and program requirements for CCOP are established in 2015 Act 55 in the biennial budget, which created Wis. Stat. § 46.272.

This memo provides guidance to county agencies regarding CCOP expenditure reporting and related Human Services Reporting System (HSRS) codes.

Service Expenditure Reporting and Coding Instructions

Third-Party Administrator Reporting

County agencies using CCOP funding as a non-federal funding match for Children's Long-Term Support (CLTS) Waiver Program services will use the funding source "CC" on the corresponding authorizations and claims submitted to the CLTS Third-Party Administrator (TPA).

HSRS Reporting

The new CCOP codes will be available in HSRS beginning October 17, 2016. County agencies reporting CCOP expenses that are not waiver match, i.e., 100 percent General Purpose Revenue (GPR), will use the Long-Term Support (LTS) Module within HSRS. County agencies will use the LTS Code 7 (Field 26) with a fund source code of "CC" (Field 27).

Transition Guidance

Due to the delay in operationalizing the new coding structure, county agencies may enter calendar year (CY) 2016 CCOP costs as follows:

- Enter costs as a total amount by child, by Standard Program Category (SPC) to the HSRS LTS Module.
- Expenses must be entered into HSRS no later than March 31, 2017.

- County agencies are strongly encouraged to report expenses to date as soon as possible to ensure reporting accuracy and county funding maximization.

Program Reporting Requirements

County agencies will be required to report CCOP CY 2017 and costs for subsequent years as follows:

- Expenses must be reported on a monthly basis for each child.
- Expenses must be reported as they are incurred based on date of service, not date of payment.

Please refer to Appendix 03C of the State-County Contract for more detailed CCOP reporting requirements.

Beginning November 1, 2016, counties will have access to the CCOP L-330 report, which will be updated the first of each month going forward. The monthly report is cumulative of calendar year expenditures and provides participant-specific expenditure data by county.

For assistance with registering participants in CCOP, please see the HSRS Terminal Operator's Guide: <https://www.dhs.wisconsin.gov/hsrs/terminaloperatorsguide.pdf>

The HSRS Long-Term Support module form F-22018 has been updated and can be accessed at <https://www.dhs.wisconsin.gov/hsrs/hsrsformsdeskcards.htm>. Please note the following new codes that are available for use in Fields 9, 13, 14 and 20:

- Field 9—Level of Care: Codes for children to align with the children's functional screen (for COP regular LTS code 7, no funding source code and LTS code 7 with fund source cc when CCOP is used to support services for children)
 - R = Developmentally disabled (DD)—children all levels
 - S = Psychiatric hospital—children—mental health (MH)
 - T = Nursing home—children—physically disabled (PD)
 - U = Hospital—children—PD
- Field 13—Type of Movement
 - 3 = Relocated from residential care complex (RCC)
 - 4 = Relocated from Institute for Mental Disease (IMD).
- Field 14—Special Project Status (required field)
 - 1 = On Children's Wait List
 - 2 = On CLTS Waiver
 - 3 = Not on Children's Wait List or CLTS Waiver
- Field 20—Closing Reason
 - 62 = All needs met
 - 63 = Remains on Children's Wait List

Assessments and Plans

Wisconsin Stat. § 46.272 requires that prior to receiving CCOP-funded services, a child must have a completed assessment and plan.

Existing Program Participants

The LTS module will accept the existing date of the completed assessment and plan. If the county agency has not registered the child's data in HSRS, the county must enter the date of the completed assessment and plan in the LTS Module. If the assessment and plan occurred before January 1, 2016, the county agency will enter zero costs for those activities. If the assessment and plan occurred after January 1, 2016, the county agency may enter the actual cost of the activities.

New Program Participants

There are three ways a county agency can pay for the cost of an assessment and plan:

1. Bill the cost to the CCOP program.
2. County agencies may bill CCOP for the cost and also bill Targeted Case Management (TCM) (second modifier code "U5"). When federal revenue is received, that revenue must be put back into the CCOP program. During the year-end reconciliation, the revenue will be subtracted from the county agency's claim, therefore ensuring only the match amount will be actually charged to the CCOP.

If county agencies bill TCM and do not bill CCOP, they will use the second service modifier code "U6." County agencies do not need to report this revenue back to the program as there is no billing to the program to reimburse. At year end, the Department of Health Services (DHS) will send county agencies an annual report with the amount of revenue received for these activities.

3. When children are enrolled in CLTS and accessing CCOP funds:
 - Enter the most recent CLTS assessment and plan dates into HSRS.
 - Assessment and plan costs are not charged to CCOP.

Please send any CCOP program-related questions to the Bureau of Children's Services' CLTS inbox at DHSCCLTS@dhs.wisconsin.gov.

Please send any CCOP fiscal-related questions to the Bureau of Long Term Care Financing's CLTS fiscal inbox at DHSCCLTSFiscal@dhs.wisconsin.gov.

Children's Community Options Program 2016 Allowable Services

SPC	Service
95.01	Cost Share
95.02	Refund
95.05	Parental Fee
101.00	Child Care
102.00	Adult Day Care
103.22	Respite—Residential
103.24	Respite—Institutional
103.26	Respite—Home-Based
103.99	Respite—Other
104.10	Supportive Home Care/Days
104.11	Supportive Home Care—Personal Care/Days
104.12	Supportive Home Care—Supervision Services/Days
104.13	Supportive Home Care—Routine Home Care Services/Days
104.14	Supportive Home Care—Chore Services/Days
104.20	Supportive Home Care/Hours
104.21	Supportive Home Care—Personal Care/Hours
104.22	Supportive Home Care Supervision Services/Hours
104.23	Supportive Home Care—Routine Home Care Services/Hours
104.24	Supportive Home Care—Chore Services/Hours
106.00	Relocation Services
106.02	Housing Assistance
107.30	Specialized Transportation and Escort/One-Way Trips
107.40	Specialized Transportations and Escort/Miles
107.50	Specialized Transportation—Items
110.00	Daily Living Skills Training
112.46	Personal Emergency Response
122.47	Assistive Technology/Communication Aids
112.50	Dental and Medical Care
112.51	Specialized Diet/Nutrition
112.52	Specialized Clothing
112.55	Specialized Medical and Therapeutic Supplies
112.56	Home Modifications
112.57	Adaptive Aid—Vehicle
112.99	Adaptive Aid—Other
113.00	Consumer Education and Training
113.01	Natural Supports Training
202.01	Adult Family Home/ 1-2 bed (not room and board)
202.02	Adult Family Home/ 3-4 bed (not room and board)
203.00	Child Foster Home (not room and board)
403.01	Recreation Activities
503.00	Inpatient Services

SPC	Service
507.03	Counseling and Therapeutic Services/Hours
507.04	Counseling and Therapeutic/Items and Services (includes one-time consults)
513.00	Mentoring
514.00	Community Integration Services
603.01	Assessment
603.02	Plan
603.03	Community Connections Coordinator/Abbreviated Assessment
603.04	Community Connections Coordinator/Abbreviated Plan
604.00	Case Management/SSC
604.01	SSC—Face to Face contact (optional)
604.02	SSC—Collateral Contact (optional)
604.03	SSC—Face to Face/Home Visit (optional)
604.04	SSC—Other (relocation related)
604.05	SSC—Community Connections Coordinator (one-time or intermittent)
606.00	Health Screening and Accessibility
610.00	Housing Counseling
615.10	Supported Employment—Individual
615.20	Supported Employment—Group
619.00	Financial Management Services
706.00	Day Services Children
710.00	Nursing Services

COUNTY AGENCY CHILDREN'S COMMUNITY OPTIONS PROGRAM (CCOP) FIVE-YEAR PLAN

The *County Agency Community Options Program (CCOP) Five-Year Plan* must be submitted to the Department of Health Services, Division of Long Term Care, Bureau of Children's Services for review and approval by **November 30, 2016**. Please complete the step-by-step CCOP Plan instructions detailed below:

A. County Agency Contact Information

Please provide your County Agency CCOP Coordinator's contact information, as indicated below:

County Agency Douglas County	Name of CCOP Coordinator Samantha Roark-Isenhart		
CCOP Coordinator Phone Number 715-395-1316	CCOP Coordinator Fax Number 715-395-7371		
CCOP Coordinator Email samantha.roark@douglascountywi.org			
County Agency's Street Address 1316 N 14 th Street Suite 327	Mailing Address	WI	Zip Code 54880
Date the Full Plan was Reviewed and Approved by the County CCOP Advisory Committee*	(MM/DD/YYYY) 11/16/2016		

**If the county's CCOP advisory committee has not met, please submit the plan without the approval of the committee, and indicate the date of the scheduled CCOP advisory committee meeting.*

B. County CCOP Administration

For each numbered item below, please check the box to indicate a brief summary has been completed and any required documentation has been included with the plan submission.

1. County CCOP Operations

- Describe your county agency's proposed CCOP operational policies including guidelines that address cost-effectiveness, the CLTS Waiver Program mandate, quality services, and maximum flexibilities in addressing local needs regarding the following activities:
- Access
 - Intake
 - Assessments

Brief summary: Families wishing to access CCOP funds will contact the Douglas County Department of Health and Human Services Intake and Assessment (I&A) Unit for a referral to the CCOP Coordinator. The I&A Social Worker will gather referral information such as name, address, phone number, diagnosis of the child, a summary of the current situation and a referral date. The CCOP Coordinator will attempt contact with the family within five business days to set up an assessment. Upon contact, the CCOP Coordinator will provide any information or referrals to services that could help meet the family's need.

2. Estimated number of families that will be assessed and served

- Provide an estimated number of families that will be assessed and served utilizing CCOP funds during 2017.

Brief summary: Douglas County estimates that 30 families will receive assistance through CCOP funds.

3. Priority for Available Funding

- Provide a list of the specific groups, if any, that your county agency will give priority for available funding, including any local cost-effectiveness guidelines, the CLTS Waiver Program mandate, quality services, and maximum flexibilities in addressing local needs.

Brief summary: Priority funding will be made available for the following groups: families in a crisis situation within their own family unit; families considering out-of-home placement for the child; families planning to bring a child home from an out-of-home placement. CCOP funding will be considered in cases where the CLTS Waiver Program mandate does not apply.

4. Outreach Procedures for Children with Disabilities

- Provide a description of your county agency's local outreach procedures that will be used to ensure families are informed and aware of the CCOP funding availability. Describe the county agency's operational guidelines to ensure funds are used cost effective manner and are available to children with physical, emotional and developmental disabilities.

Brief summary: Brochures regarding CCOP will be available to community health agencies, schools and local health and human services units. Information is also shared at local health and community resource fairs. Children with physical, emotional and developmental disabilities who are found eligible by the Children's Long Term Care Functional Screen may be eligible for CCOP funding. CCOP funding will be considered for use after a needs assessment is completed, the use of informal supports are not available or will not fully meet a child's need and the service is not able to be funded by the Children's Long Term Support Program.

5. Determining Family Needs

- Describe your county agency's local operations and cost effective procedures that will be used to assess and determine the family's needs.

Brief summary: In order to determine a family's need, the CCOP Coordinantor will conduct a needs assessment. This needs assessment will involve discussions with the family to learn about the child's functional abilities, family life, physical environment, current services being provided and medical issues. The CCOP Coordinator will help determine if informal supports are available or if formal services need to be implemented. Enhancing informal supports is most cost-effective in ensuring a family's need is met. Formal supports will be explored after it is determined that informal supports are not available or not able to fully meet a child's need.

6. Methods for Developing/Monitoring Service Plans and Coordinating Services

- Provide a description of the cost-effective methods your county agency will use to develop, coordinate and monitor the provision of quality services and goods to children and families.
- Include your county's local CCOP written policies and procedures and/or other materials to document the coordination with other county or locally administered programs to ensure the CCOP funds are used as the payer of last resort (e.g., the Birth to 3 Program, Children's Long-Term Support [CLTS] Waiver Program, Comprehensive Community Services [CCS], Economic Support programs, Juvenile Justice, child welfare services, Department of Public Instruction school-based services, or other locally funded services).

Brief summary: Service plans will be developed by the Children's CCOP Coordinator after the completion of a needs assessment. CCOP funding will be used as a last resort and eligible services will be funded through the CLTS Waiver Program unless the child is on the waiting list. All service plans will be signed by the CCOP Coordinator, supervisor and family prior to the delivery of services. All services will also include a projected outcome. Quarterly contacts will be made with families who only utilize CCOP funds. Families who utilize CLTS Wavier funds will be subject to contact requirements set forth through the CLTS Program. Service plans will be updated every six months and annually.

7. Methods used to Promote Informal Support and Advocacy Systems

- Provide a description of your county agency's methods used to promote cost effective informal support and advocacy systems for families. Include documentation and/or materials that describe your county's methods of enhancing informal supports and advocacy for families with children with disabilities.

Brief summary: The CCOP Coordinator will assist families in enhancing the use of informal supports. Information and referrals will be given to local service providers such as the Boys and Girls Club and Mentor Superior. The CCOP Coordinator will also provide referrals to the local Independent Living Center for any opportunity that families have in networking through support groups.

8. County's CCOP Monitoring Methods

- Describe the methods that your county agency will use to monitor the cost effectiveness and quality of the CCOP operations. Include documentation and/or materials that describe your county agency's CCOP monitoring protocols.

Brief summary: In order to monitor the cost effectiveness and quality of the program, the supervisor of the CCOP Coordinator will randomly solicit feedback from parents participating in the program. Annual satisfaction surveys will also be administered. The CCOP Advisory Committee will assist in ensuring quality services are provided by assisting in the development and revision of program policies.
Children's Long Term Support Waiver eligibility and funds will be pursued before CCOP funds will be used unless the child is on the waitlist and has an intermittent need.

9. County CCOP Advisory Committee

The County CCOP Advisory Committee shall include, but is not limited to, the following members:

- A. **Parents/guardians of children with disabilities** including, if possible, parents/guardians from families that participate in the CCOP. To the maximum extent possible, the parents/guardians will represent various disabilities, racial, and ethnic groups in the service area. Parents/guardians of children with disabilities shall represent a majority of the committee membership.
- B. **County agency representatives** under Wis. Stat. § 46.23, 51.42, 51.437, 46.215, or 46.22, school districts, and local health departments, as defined in Wis. Stat. § 250.01(4). At least one of the committee members selected under this section shall be a person providing community social services to children with disabilities who are eligible for the program.
- C. **Providers** of social or educational services to children who have disabilities, other than the providers specified in section B

In the box below, please provide a brief summary of your county's CCOP Advisory Committee, including a description of the following details:

- Role of the county's CCOP Advisory Committee and its members
- Frequency of the CCOP Advisory Committee meetings
- Any other information about the activities of the Advisory Committee

If you have attached separate documentation or materials that provides this information, please indicate "Attached" in the box below.

Brief summary: The role of the Douglas County CCOP Advisory Committee will provide recommendations to the Douglas County Health and Human Services Department regarding the development of the CCOP plan as well as monitor the program. The Advisory Committee will assist in developing and revising policies and procedures. The CCOP Advisory Committee meets quarterly at a time determined by the Committee.

- List all members of the county's CCOP Advisory Committee and all relevant details on the membership roster detailed on Item 10, Page 5.

10. County Children’s Community Options Program Advisory Committee Membership Roster

Complete the County CCOP Advisory Committee Roster below. Identify the CCOP Advisory Committee Chairperson and include each member’s name, affiliation, address, phone number and email address. You may attach your local County CCOP Advisory Committee roster, if it contains all the information listed below.

Name	Affiliation	Complete Address, Phone, Email
Deb Carroll	Chairperson	7 Royalton Rd. Superior, WI 54880 715-392-6093
Shari Pioro	Health Care Provider	5808 Cumming Ave. Superior, WI 54880 715-392-7626
June Finsland	Parent	901 N 21 st Street. Superior, WI 54880 715-392-4263
Carrie Lot	Parent	3282 S County Rd A. Superior, WI 54880 218-428-8931
Mary Chialastri	Health and Human Services, Birth to Three Program	1316 N 14 th Street. Suite 400, Superior, WI 54880 715-395-1616
Patty Dodge	Advocate/Educator	3626 Hammond Ave. Superior, WI 54880
Wanda Woodhull	Parent	5533 S Westline Rd. Poplar, WI 54864 715-364-2529
Kristina Lampi	Parent	1213 Tower Ave. Apt. 702, Superior WI 54880 218-460-9525
Paulette Alseth	Parent	5927 E County Road B. South Range WI 54874 715-817-0119

11. CCOP Five-Year Plan Preliminary Approval and Submission to DHS

Your county’s CCOP plan must be reviewed and receive preliminary approval by your local CCOP Advisory Committee prior to submitting the CCOP Plan to the Department of Health Services (DHS).

Please submit this completed CCOP Plan and all supporting documentation via email to the Bureau of Children’s Services, at: DHSCCLTS@dhs.wisconsin.gov by **November 30, 2016**. Please include the following information in the subject line of your email message: “2017 CCOP Five-Year Plan for Douglas County”