

Budget Actions Leave Elderly And Disabled Needing Long-Term Care in the Cold

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Wisconsin lawmakers tweaked Gov. Scott Walker's plan to expand the state's Family Care program and wrap the IRIS program into it on Wednesday, ignoring advocates for the elderly and disabled who have balked at the plan. Change made to allow ADRCs to be operated by out-of-state corporations.

MADISON - Republicans on the Legislature's budget committee Wednesday backed some but not all of Gov. Scott Walker's sweeping proposals to overhaul the state's [long-term care system](#) for elderly and disabled people.

The Joint Finance Committee voted 12-4 along party lines to clear the way for major changes to Family Care and IRIS (Include, Respect, I Self-Direct), two programs that care for tens of thousands of vulnerable individuals outside nursing homes. They also made significant changes to the Aging and Disability Resource Center (ADRC) program.

The action ignored much of the testimony at recent hearings. [Advocates for the elderly and disabled have said](#) the budget proposal could force vulnerable people into turmoil by eventually requiring them to change doctors, care workers who visit their homes, or even the group homes where they live.

They also have pointed to problems that the state encountered after a separate change that shifted to a single statewide provider of medical rides. An audit released earlier this month confirmed complaints about "no-show" and late arrivals for nonemergency medical rides by the contractor, MTM Inc.

Family Care provides long-term care outside nursing homes to some 41,000 elderly and disabled people throughout Wisconsin using state and federal money. Lawmakers backed Walker's proposal to expand Family Care by Jan. 1, 2017, to the state's eight remaining counties without it, including Dane County.

In the biggest change to Family Care, the proposal approved Wednesday would aim to combine both long-term care and ordinary medical care. The program would even seek to coordinate the state program with federal Medicare coverage — an effort that critics said would be difficult to achieve without the consent of patients.

Lynn Breedlove, a leader of the Wisconsin Long-Term Coalition, said he remained concerned that the proposal would shift the system to large out-of-state insurance companies and away from its current network of regional nonprofits that provide most of the care.

"Let's be clear, this new plan is just the governor's proposal in sheep's clothing," Breedlove said. "Thousands of people expressed opposition to dismantling the current system, but the Legislature is doing it anyway."



"Wisconsin ranks 8th in the nation for the quality of our long-term care due in large part to the success of our community-based Family Care program," said Senator **Dave Hansen** (D - Green Bay). "It makes no sense to change it over to a for-profit system unless you are a politician who places the pursuit of corporate profits over the lives of everyday Wisconsinites."

The **IRIS Program** is a Medicaid Home and Community-Based Services (HCBS) which allows adults with long term care needs to self-direct, including hiring their own caregivers, which is not currently available to the same degree in Family Care. The budget proposed would effectively eliminate the IRIS program, requiring the 11,000+ participants to enroll in Family Care if they wish to continue receiving long-term care.



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