



For Immediate Release
 Wednesday, July 14, 2010

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Long Term Care Leaders Applaud Legislative Audit of Family Care Program

MADISON – The [Family Care](#) Program was originally created to improve long term care services for the elderly and the disabled, however, the program has not been implemented as designed, resulting in inefficiencies, duplication of services, and a widespread failure to address the needs of Wisconsin’s most frail citizens. Key leaders in the long term care community – The [Community Alliance of Providers of Wisconsin](#) (CAPOW), [Rehabilitation For Wisconsin](#) (RFW), [Residential Services Association](#), [Wisconsin Association of Homes and Services for the Aging](#) (WAHSA), [Wisconsin Assisted Living Association](#) (WALA), and WHCA – today praised the [Joint Legislative Audit Committee](#) for its vote on an audit of the Family Care Program.

“Family Care has been focused on eliminating waiting lists, but in the meantime it has created wanting lists,” said Tom Moore, Executive Director of the [Wisconsin Health Care Association](#) (WHCA) and [Wisconsin Center for Assisted Living](#) (WiCAL). “In many cases, residents are left wanting for services that meet their expectations, providers are left wanting for payments that allow them to meet their cost of services, and [managed care organizations](#) (MCOs) are left wanting for rates that allow them to fulfill the goals of the program. With a price tag of more than \$2.5 billion over ten years, the committee has wisely chosen to take a closer look at how this program is working.”

"Providers cannot be expected to continue to implement ill-advised care plans at the expense of vulnerable populations, and ultimately, the expectations of the Family Care Program," said CAPOW President Shelley Hansen-Blake. "An audit will determine how consumers and providers are affected by rate cuts and if the goals of the program are being met."

Improvements are needed in six key areas:

Providers of long term care services for the frail elderly and disabled have identified six key areas that need to be dramatically improved in order for Family Care to fulfill its stated mission:

- **Health Care Rationing:** Providers have experienced frozen or slashed rates to employee wages; service cuts below acceptable levels; and consumer choices restricted to the cheapest, not the best, possible options.
- **Long Term Financial Viability of program:** Family Care was designed to manage LTC costs, not help finance them, and it is difficult to see how the program is going to be financially sustainable.
- **Need for Standardization:** MCOs currently operate as separate entities, not as part of a coordinated system, and use differing contracts and standards.
- **Lack of Accountability:** No one currently seems to know if the program is under, over, or operating according to budget.
- **Lack of Safeguards:** Safeguards must be enacted for MCOs that fail to pay for the cost of care and services provided to its enrollees.
- **Proper Use of the Functional Screen:** This assessment tool was created to determine a client’s level of need. Under Family Care, it is being used to determine services and rates.

A consortium of these and additional providers will participate in a series of community forums, sponsored by the [Long Term Care Workforce Alliance](#), to take place from late July through the end of the year to continue highlighting the issues, including Family Care, that have resulted in an imminent crisis in long term care.

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