



The Milwaukee Mental Health Task Force is committed to being a leader in identifying issues faced by all people affected by mental illness, facilitating improvements in mental health services, giving consumers and families a strong voice, reducing stigma, and implementing recovery principles.

**Statement from the Milwaukee Mental Health Task Force on
Proposed Closing of Long Term Care Facilities at the Milwaukee Mental Health Complex
March 7, 2013**

In the recent State of the County Address, County Executive Abele introduced a plan to close the long term care facilities at the Mental Health Complex over the next three years and develop person centered plans to serve each resident in the community. This includes Hilltop, the 70 bed long term care center (ICF-MR) for people with co-occurring mental health and intellectual and developmental disabilities and Rehab Central, which serves people who need skilled nursing home care and also have a mental illness. Most residents will be eligible for services from Family Care, which provides community based services and supports to three target groups: frail elderly, people with developmental disabilities and people with physical disabilities.

The proposal to close the long term care facilities and development community placements over the next three years, is in line with state and national trends to support people with disabilities in the community in a more integrated setting. Wisconsin's ICF/MR population has dropped by 2/3 in the last 8 years as more people have been served in community settings. Milwaukee has lagged behind and continues to maintain an institutional capacity that most other counties have largely stopped using. Developing a comprehensive person centered plan to downsize Hilltop and Rehab Central is also in line with the recommendations in the report from the Human Services Research Institute and Public Policy Forum, as well as the Mental Health Redesign and Implementation Task Force.

Furthermore, this direction is also in line with the Supreme Court decision in *Olmstead v. L.C.*, a ruling that requires states to eliminate unnecessary segregation of persons with disabilities and to ensure that persons with disabilities receive services in the most integrated setting appropriate to their needs. The Department of Justice under President Obama has taken aggressive action to enforce the Olmstead decision and to ensure the right of people with disabilities to live in the community in the least restrictive environment.

As advocates, we support the right of residents at the Mental Health Complex to have the opportunity to live in the community because we believe this can provide an increased quality of life and offer additional opportunities for community engagement and to be near friends and family. To realize the potential of a better life in the community, it is vital that the community setting includes quality services, supports, including adequate staffing levels, carefully developed to meet the residents' needs and with the input of each resident and their guardian or family.

FAMILY CARE HAS A KEY ROLE TO PLAY

The vast majority of residents of the Mental Health Complex Long Term Care facilities are eligible for Wisconsin's Family Care program which is a Medicaid waiver that provides community based long term care services. Family Care is an entitlement in Milwaukee County which means that we no longer have waiting lists and any county resident who is functionally and financially eligible must be served. Individuals in Milwaukee County residents who are eligible for Family Care receive options counseling regarding their choices for long term care. Residents who are eligible for Family Care, and their guardians, will have a choice of two Family Care Managed Care Organizations (MCOs), two Partnership programs, and IRIS which support self-direction of community long term care services. These programs will oversee the community based services that residents will receive.

To be successful in relocating Hilltop and Rehab Central residents to the community, it will be essential for the Family Care and Partnership Managed Care Organizations to develop the resources and capacity to meet these important and specialized needs and to provide the level of funding needed to support appropriate staffing and needed supports, and adequate rates to secure experienced proven providers. As a managed care program, Family Care uses a capitated rate set by the state which pays a "per-member-per-month" rate, regardless of the number or nature of services provided. Advocates have long been concerned that the capitated rate may be a disincentive to service people with complex and costly needs - and we strongly believe that an adequate Family Care capitated rate is essential to serving residents of Hilltop and Rehab Central in the community.

RECOMMENDATIONS FOR MOVING FORWARD

The Milwaukee Mental Health Task Force has long supported the right of people with disabilities to live in the community in the least restrictive setting. We support the proposed concept of developing a plan to close Hilltop and Rehab Central in three years while concurrently developing quality community based placements for each resident. However, our support is contingent on the following safeguards:

- It is essential that all stakeholders proceed slowly and carefully to ensure that effective and appropriate supports and services are developed to provide residents with the best possible chance to have a good life in the community. This should include a careful review of best practices and lessons learned from previous institutional downsizings, and an examination of how these can be incorporated into the current closure given the relatively new role of Family Care.

We recommend that a forum be held within the next three months to highlight lessons learned from past institution closings and share best practices, so that these can be used to benefit residents as we move forward with the Hilltop and Rehab Central closures. This should include strategies for supporting and educating guardians, who have a very important role to play in this transition.

- The state mandated team for institutions closings, which includes representatives of advocacy groups (Disability Rights Wisconsin and the Board on Aging and Long term Care) must be front and center as an essential watchdog, ensuring the integrity of this effort. We support their efforts and critically important oversight role.
- Although there have been large institution closings in the past in Milwaukee County, this is the first closing of this size and complexity since Family Care has been in place. It will be important to determine how Milwaukee County and the Family Care MCOs can work collaboratively to develop and support the essential resources needed to successfully serve Hilltop and Rehab Central residents in the community.

This should include development of a robust continuum of community services including housing, specialized behavioral health services, crisis services including the Mobile team and respite beds. The planned closure will require significant development of new resources and that will require ensuring provider rates that will support experienced and high quality providers.

- **Funds saved from downsizing must be invested in developing community services and supports.** This is in line with county board resolution (RES 11-516) signed by the County Executive which states in part: "The county must commit to continued funding of mental health care services at current levels with any savings produced as a result of the transition to a community-based service delivery model reinvested into the program to allow for expanded community services". Similar language was in the adopted 2012 budget.

This is especially critical for the minority of residents who are not eligible for Family Care. Milwaukee County must be the safety net for these residents and for others moving forward who have a mental health disability and are **not** eligible for Family Care. This will require a commitment for a long term increased investment in community services and supports including residential services. For the closure to move forward, Milwaukee County must make a commitment to develop and support community housing and services for residents who do not qualify for Family Care, and for other community members moving forward.

- The vast majority of residents of Hilltop and Rehab Central have multiple disabilities and complex needs. For Family Care to be successful in serving individuals with complex needs, an adequate capitated rate is essential. We urge Milwaukee County to advocate with DHS regarding the need to provide an enhanced capitated rate to ensure the success of this institution closure. Advocates stand ready to work with Milwaukee County leadership to make the case to DHS for an enhanced rate for residents which will cover the actual cost of relocating residents to the community and developing specialized residential settings.

Note: Until 2011, a special "first year" enhanced rate was provided for Wisconsinites who were relocating from an institution. This recognized that one-time investments were needed to develop specialized resources, provide environmental modifications, develop behavior plans, and recruit and train staff with specialized skills. The enhanced rate for Year 1 is a good investment because it supports development of capacity and placements for people with complex needs – we should develop a strategy to make the case to the Department of Health Services (DHS) to reinstate the enhanced rate.

- Ensuring a comprehensive community based continuum of services. This would provide technical assistance and crisis back-up in the community and reduce the “revolving door” where the only option in a crisis is to re-admit people to an institutional setting. This “Community Ties” model is used by Dane County Human Services in partnership with the Waisman Center to support people with developmental disabilities and challenging behaviors. It includes development of person centered behavior support plans, training providers on crisis response strategies, use of environmental adaptations and modifications, a mobile team, and a Safe House and robust quality assurance.
- Independent external advocacy resources must be available for guardians and residents.
- The plan for closure must address Milwaukee County’s continuing responsibility under Chapter 55 to either directly provide or contract with another entity to provide emergency protective placement.
- We urge Milwaukee County to fund and operationalize increased oversight and quality assurance given this major expansion of community services.

The Milwaukee Mental Health Task Force was formed in 2004, in response to a crisis in inpatient psychiatric services that exposed major gaps in Milwaukee's system of mental health care. It includes over 40 organizations who work collaboratively to identify issues faced by people affected by mental illness, facilitate improvements in services, give consumers and families a strong voice, reduce stigma, and implement recovery principles.