

## **AGENDA**

Eau Claire County  
Human Services Board Meeting (Educational)

**Date:** May 3, 2021

**Time:** 5 PM

**Location:** Virtual Meeting via WebEx Events

*Those wishing to make public comments must submit their name and address no later than 30 minutes prior to the meeting to alexa.dennis@co.eau-claire.wi.us. Comments are limited to 3 minutes; you will be called on during the public comment section of the meeting. Written comments will also be accepted and should be submitted to alexa.dennis@co.eau-claire.wi.us*

### **Public Access:**

Dial in Number: 1-415-655-0001, Access Code: 145 990 1601

***\*mute your personal device upon entry***

1. Welcome & Call to Order
2. Roll Call
3. Confirmation of Meeting Notice
4. Public Comment
5. Review of April 5<sup>th</sup>, 2021 meeting minutes – **Action Accept/Denial/Revise**
6. Education Session:
  - Topic: Funding and Fiscal components of Human Services Programs -Todd Romenesko, Calumet County Administrator - **Discussion**
7. Adjourn

*Next Human Services Board Meeting: May 24, 2021*

*Education Session: June 7th*

Prepared by Alexa Dennis – Department of Human Services

*Please note: Upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through sign language, interpreters, or other auxiliary aids. For additional information or to request the service, contact the County ADA Coordinator at 715-839-6945 (FAX) 715-839-1669 or (TDD) 715-839-4735 or by writing to the ADA Coordinator, Human Resources Department, Eau Claire County Courthouse, 721 Oxford Ave., Eau Claire, Wisconsin 54703*

**MINUTES**

Eau Claire County  
Human Services Board Meeting (Educational)

**Date:** April 5, 2021

**Time:** 5 PM

**Location:** Virtual Meeting via WebEx Events

Present: Colleen Bates, Katherine Schneider, Donald Mowry, Sandra McKinney, Kimberly Cronk

Citizen Members: Jim Catlin, Kathleen Clark, Lorraine Henning

N/A:

Others: Stephanie Hirsch – Acting Committee Clerk, Diane Cable, Jen Coyne, Luke Fedie, Nancy Huberty, Kerry Swoboda, Lynn Wilson.

Chair Bates called the meeting to order at 5:03 p.m.

Verbal roll call was taken by the Acting Committee Clerk and noted above under present.

Chair Bates confirmed with the clerk the compliance of open meeting law.

No members of the public wished to make comment. Public comment closed.

The Board reviewed the minutes from March 1, March 8, March 15, March 29, 2021. Supervisor McKinney motioned to approve as presented, seconded by Lorraine Henning. No additions, corrections, deletions. All in favor of the motion, minutes approved.

Luke Fedie, the Behavioral Health Administrator, introduced the second half of the Behavioral Health Division education topic. A video was shared on Behavioral Health Programs and Services Division.

Question and discussion occurred by the Human Service's Board and answered by the Behavioral Health Services team that were on the meeting.

Next Education session is first Monday in May.

Adjourned at 6:35.

Respectfully submitted by,

Stephanie Hirsch

# Overview of County Human Services Finances

# Outline for discussion

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- Quick look at Mandates and Revenues
- Budget Process – Future
- What Really Happens – Present
- Yearend Actuals – Past
- Opportunities - Strategy

# Youth Services Mandate

## State Statute Chapter 938

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- Revenues:
  - Coordinated Services Team Grant (CST)
  - Youth Aids, AODA Youth Aids
  - Community Intervention Program

# Child Welfare Services Mandate

State Statute Chapter 48

Federal Title IV-E

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- Revenues:
  - Kinship Care
  - Promoting Safe and Stable Families
  - Coordinated Services Team Grant (CST)
  - IV-E Legal Services and eWiSACWIS Funding
  - Community Aids

# Long Term Support Services Mandate

State Statute 46.995

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- Revenues:
  - Coordinated Services Team Grant (CST)
  - Children's Long Term Support Waiver
  - Children's Community Options Program (CCOP)
  - Transportation Contracts

# Birth to Three Mandate

Individuals with Disabilities Education Act (IDEA) 2004

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- Revenues:
  - Birth to Three
    - Rolling Maintenance of Effort (MOE)



# Aging Services Mandate

State Statutes 46.90(2), 55.043(1d), 46.90(3) and 55.043(1g)

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- Revenues:
  - Alzheimer's Family Caregiver Support Program (AFCSP)
  - Adult Protective Services
  - Congregate, Home Delivered Meals & Nutrition Services Incentive Program
  - Title IIB, IID, IIE, Supportive Services, Preventive Health, Family Caregiver
  - Specialized Transportation (5310 Grant)
  - Elderly Benefit Specialist, Disability Benefit Specialist
  - Aging and Disability Resource Center
  - Transportation Contracts

# Mental Health and Substance Abuse Services Mandate

State Statute Chapter 51  
“Shield Law”

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- Revenues:
  - Substance Abuse Block Grant
  - Intoxicated Driver Program Supplement
  - Mental Health Block Grant
  - Community Mental Health Block Grant
  - Coordinated Services Team Grant (CST)
  - Program Revenues
  - WIMCR (Wisconsin Medicaid Cost Reporting)

# Economic Support Services Mandate

## Title XIX

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- Revenues:
  - Economic Support Administration Funding
  - Day Care Certification & Administration
  - WHEAP (Wisconsin Home Energy Assistance Program) Administration
  - Refunds/Collections on Economic Support Services

# Child Support Services Mandate

State Statute 49.22

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- Revenues:
  - Child Support
    - Cooperative Agreements
    - Federal Incentives
    - 66% Federal Match

# Budget Process – Policy for the Future

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- County Instruction / Guidance
- Department Builds Budget
- Discussion and Approval Process
- Conversation about “Risk”

# What Really Happens - Present

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- Mandates
- Service Needs Change
- Crises Occur
- Projections – Educated Guess

# Yearend Actuals - Past

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- How did we get here?
- Expenses by Program
- Revenues by Program

# Opportunities

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# Questions?

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# Contact Information

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Todd M. Romenesko

Calumet County Administrator

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Phone: 920.849.1448

**MANDATES AFFECTING  
COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES**

1. **Youth Services** - Counties are mandated to provide services to rehabilitate juvenile delinquents and provide protection for the community from juvenile crime with no increase in state funding. Wisconsin State Statute Chapter 938 (Juvenile Justice Code) provides the mandate and related guidance for these services. Counties are required to pay for the cost of children placed by the court in state operated correctional facilities. In the past, state aids have not covered cost increases in state facilities. The cost of care in these facilities is increasing. The state requires counties to pay these additional costs and provides little or no annual increase in the Youth Aids allocation.
  
2. **Child Welfare Services** - Counties are mandated by the state to carry out state responsibilities to protect children from abuse and neglect. Wisconsin State Statute Chapter 48, known as the Children's Code, covers the related mandates and guidance for Counties. This requires conducting child abuse investigations in the manner and timelines prescribed by the state, placing and paying for children in foster care or institutional settings and providing services to the child and family to reunite them if possible and, if not, filing for Court Termination of Parental Rights within the timelines set by the federal government. . Counties experience annual fluctuations in the number of child abuse and neglect cases presented to them. Thus placement and other related costs can be unpredictable. Overall, the counties have seen a gradual trend towards increased numbers and severity/complexity of abuse and neglect cases.

The State requires additional plans to obtain funding through Promoting Safe and Stable families, Targeted Support Safety Program, Title IV-E reimbursement, Community Intervention Program and other targeted funding opportunities. Discussions have started regarding how to fold these sources into funding allocations without all the plan writing.

- 2019 Update – the State budget Increased the Children and Family Aids (CFA) in CY 20 by \$24,125,000 and \$25,500,000 in CY 21. Three funding formulas have been proposed to allocate this funding:

- 1 – Allocation according to the current funding formula,
- 2 – Allocation according to the current funding formula with a minimum of \$100,000 base to each County, and
- 3 – Funding based on a poverty driven formula. A statewide workgroup has been formed to determine the future allocation of this funding source.

2021 – No change in funding formula has been determined.

3. **Long Term Support Services** - Counties are required to provide services for persons with disabilities or the elderly in lieu of institutional care. Over the past 15 years, Wisconsin has been implementing a program called Family Care; a managed care approach to meeting the long term care needs of elderly and disabled across the state. As the program developed, various regions created new managed care organizations (MCO's) that ultimately assumed state contracts for serving 'members' with long term care needs. Over time, counties required financial share of local tax levy earmarked to support Family Care was incrementally decreased to a base level of support (determined by state formula). Counties

have taken a new role as the front door for entry into the LTC system. Counties now operate Aging and Disability Resource Centers as 'one stop shops' for those seeking information and services associated with long term care needs and provide Children's Long Term Support Waiver services for children under State Statute 46.995. There is a new Maintenance of Effort (MOE) for counties going forward to help eliminate waiting lists for children in this service area. As of 2021, children remain on the wait list. The State fund a structured enrollment number each month to eliminate the wait list.

4. ***Birth to Three*** - In Wisconsin, each of the 72 counties are responsible for providing Birth to 3 services as outlined in the [Individuals with Disabilities Education Act \(IDEA\)](#) 2004, a federal law that governs how states and public agencies provide early intervention, special education, and related services to children with disabilities. The Wisconsin administrative code ([DHS 90](#)) is designed to match the federal guidance. Birth to Three is a program that the state agreed to accept from the federal government that, once agreed to by the state, became a mandate for counties to provide. The Wisconsin State budget 2020/2021 included a \$2.25 million one time increase to the base in SFY 2020.
5. ***Aging Services*** - These programs are to ensure that all older individuals, regardless of income, have access to information, services and opportunities available within the county and that services and resources of the county are designed to reach those in greatest social and economic need. Many services are provided or accessed under the umbrella of the Aging and Disabilities Resource Centers. Examples of services provided and purchased in this program area are Elderly Benefit Specialist, Congregate and Home Delivered meals, Transportation and Family Caregiver Support (all under Title III of the federal social security act). Additionally, Counties are responsible to review and investigate all claims of abuse or neglect against vulnerable populations Adult Protective Services Wis. Stat. §§ 46.90(2), 55.043(1d), 46.90(3) and 55.043(1g) There are substantial variations between Counties associated with the 'levels' of 'mandated' services being provided. Some county officials have chosen to support these services at levels beyond minimum required mandates. Counties currently fund both direct and indirect costs associated with these purchased services.
6. ***Mental Health and Substance Abuse Services*** - Counties are mandated to provide services to persons with mental illness or alcohol or other drug abuse as defined by State Statute Chapter 51, known as the Mental Health Act. Counties have some flexibility to determine the type and levels of service but if the appropriate service is not provided to people, the risk to the county is that the person might end up in a hospital with very high costs to the counties. Counties provide specialized treatment services through outpatient clinics, Community Support Programs, Targeted Case Management and Comprehensive Community Services. Medical Assistance is supposed to reimburse counties for the cost of service to eligible people. Right now those Medical Assistance rates are 70% of actual county costs. The State reimburses counties in CCS consortia 100% of costs up to State rates. Medical Assistance rates are nowhere near the deficit amount and will not cover inflationary increases. The Affordable Care Act increased coverage to those, citizens who were previously uninsured or under-insured Counties shifted strategies associated with accepting new patients with insurance and developed provider relationships with new payers. This service area falls under the "Shield Law". State law indicates we provide these services within Federal, State and County funding limits. Medicaid provides funding for Certified Crisis program with increases addressed in the State budget for 2020/2021 when

performed with a regional approach. This funding increases the reimbursement up to 100%.

7. **Economic Support Services** - The Economic Support unit provides mandated state and federal public assistance programs from three state departments; DHS, DCF, DOA. The WI Department of Health Services contract mandates the "Income Maintenance" programs to provide appropriate nutrition and health care benefits for eligible low income persons. These programs include FoodShare (SNAP), Medicaid (BadgerCare) and Caretaker Supplement (CTS). The Department of Children and Families contract requires county administration of WI Shares Child Care subsidy assistance as well as Child Care Provider Certification/Regulation. These DHS/DCF services are mandated to be provided in a multi-county regional Income Maintenance Consortia. Variables on fiscal agent and other regional contracts among counties determine how the services are provided and funded within a region. The Department of Administration contract mandates the "Energy Assistance" program known as WHEAP (WI Home Energy Assistance Program) to provide critical energy and housing benefits for eligible low income households. This contract must be administered by the county however services/benefits may be operated under sub-contracts.

Although all direct benefits issued to individuals are funded entirely by federal/state resources, none of these program operational/services expenses are fully funded by state contract dollars and require county tax levy contributions to support the program.

8. **Child Support Services** - This federally mandated program must be operated by county government under a contract with the WI Department of Children and Family. Mandated services include both case management and financial management services. Required case management services include; locating the other parent and their financial resources; scheduling genetic tests for the child and the potential father(s) of the child, preparing the papers and taking the case to court to legally identify the father and set up a support order, ensuring that one or both parents provide health insurance for the child(ren), using all available and appropriate enforcement tools to collect support owed, reviewing/changing support orders, and ending the support order, when necessary. Required financial management services are; entering the information about the court case and support orders into the Wisconsin data management system, working with employers to withhold income for support payments, processing payments, collecting, recording and sending payments, collecting, recording and sending fees, providing different ways to pay for customers; providing payment information; and correcting/reconciling errors on account balances.

Although the mandated program is funded by state and federal resources, the contract allocations have never fully covered administrative costs and require county tax levy contributions to support the program.

9. **Health Division** - Wisconsin State Public Health Statutes which mandate services include chapters 250 (Health, Administration and Supervision), 251 (Local Health Officials), 252 (Communicable Diseases), 253 (Maternal and Child Health), 254 (Environmental Health), and 255 (Chronic Disease and Injuries). Additionally, there are a host of licensing codes associated with the above statutes that Health Departments must work to assure community compliance. Finally, the Public Health Departments in Wisconsin are guided by

Department of Health Services Administrative rule 140 “Required Services for Local Health Departments” (LHD). Prevention, early intervention and education are some of the primary mandates for LHD. Funding for services comes from local tax levy (over 50%), state grants, fee for service collections and targeted grants. In 2020 funding for COVID came from the CARES act.

## **SUMMARY OF REVENUE SOURCES IN THE DEPARTMENT OF HUMAN SERVICES**

### ***Economic Support Administration Funding***

The Income Maintenance (IM) funding allocation from the Department of Health Services is for department costs to administer the Medicaid (BadgerCare) Food Share (SNAP) and Caretaker Supplement (CTS) benefits as well as designated funds for program integrity (Fraud). This funding does not include the actual member benefits as those are paid directly by the State. The allocation to the county is a combination of federal and state resources. Costs that exceed the contract are funded at 50% Federal match. Beginning in 2016 enhanced federal funding increased the match to 60% - 65% for allowable Medicaid Services. These are not part of the IM contract and are not guaranteed beyond 2021. There is a direct relation to the amount of county levy and the potential funds issued with the enhanced federal funding. Since 2019, additional federal Random Moment Sampling (RMS) funds have been distributed. DHS has retained some of that funding for improvement initiatives and passed some along to the consortia. RMS funding is not guaranteed each year. Significant county funding supports IM. IM is administered through Consortia and funding agreements/MOU's are individualized by consortia.

### ***Refunds/Collections on Economic Support Services***

The State Collections Unit collects all overpayments established by the counties for IM program benefit errors. The counties are reimbursed 15% on actual re-payments from collections. This funding is distributed through the consortia and is passed to counties based on individual agreements.

### ***Medicaid Estate Collections***

Medicaid Estate Collections earn the county 5% of the recoveries made under the recovery program because of the agency's efforts to collect voluntary recoveries, or liens against homes and estates. This is added to the Income Maintenance administration county allocation of the state/county contract and are again distributed based on the consortia model.

### ***Day Care Certification and Administration***

The Child Care contract with the Department of Children and Families has three funding areas supported by both federal and state resources.

Child Care Certification is used to regulate in home day care, including background checks, home visits and administrative work. Counties are able to charge a fee for this service. The amount of funding is dependent on the number of certified providers in your county and is sum certain.

Child Care Administration is used to administer the Child Care (CC) subsidy program, Wisconsin Shares. The funding is based on the number of CC cases from prior years. Although the allocations are sum certain there has been a reallocation of funds at the end of the contract. This "de-ob / re-ob" process is not guaranteed each year and is only able to be achieved when other counties underspend their contract allocation. Although DCF has been predicting since 2017 there will not be enough reallocation funding available to make all Counties "whole", this continues to occur in the most recent contract year. Child Care benefits are made directly by the State and not included in the county allocations.

The final allocation category is Child Care Fraud funding and is sum certain. This allocation is used to prevent and investigate childcare fraud by consumers and providers.

Any cost overruns in any of the three allocation categories are county tax levy.

### ***Wisconsin Home Energy Assistance Program (WHEAP) Administration***

The Department of Administration issues contracts to local counties for the administration of this “energy assistance” program. The program is funded via both state and federal resources as well state energy providers via consumer’s contributions (Public Benefits). Yearly service/administration allocations are sum certain. Actual benefits paid to or on behalf of eligible households are issued by DOA. This program be subcontracted out. The county incurs some administrative costs to oversee the program when services are subcontracted.

### ***Child Support***

The contract Child Support services is with the Department of Children and Families. The Child Support program is funded by a number of state and federal sources. The yearly base allocation is awarded based upon caseload size and the agencies prior performance in federal standards. Expenses over the allocation can be matched at 66% Federal Match funding. The Child Support program also collects revenues from the collection of Medical Support Liability, reimbursement of genetic lab fees, service of process fees and other fees. Additional non-IV-D revenue may include a fee for printed payment histories, certified payment histories, sending of income withholding orders, and crediting account for direct payments and is each County’s decision. There could be other services counties decide to charge for non-IV-D cases only.

### ***Community Aids***

This is the basic allocation of funds for county human services departments. It is used as a general, non-earmarked allocation to be used as match on other Federal programs such as the Medical Assistance Waivers and it pays for part of the cost of programs where earmarked allocations are not adequate such as Youth Aids and Birth to Three. It is also the source of payment for some services for which there is no other source of revenue. While at one time Community Aids was intended to fund county human services at 100%, most counties are in significant overmatch.

### ***Kinship Care***

Benefits for Kinship Care are provided in a sum certain allocation which is 60% Federal and 40% State. There is a process toward the end of the year for counties who are underspending their allocation to reallocate to counties that are overspending their allocation.

The costs to administer the program are only partly reimbursed by the state with a small allocation for assessments. The administrative dollars are 100% Federal.

### ***Coordinated Services Team (CST) Grant***

This grant became available in 2014 to transition the CST initiative to a statewide program. This grant is sum certain and funds CST Service Coordination along with program related expenses. County match of 20% is required.



***Youth Aids, Alcohol and Other Drug Abuse (AODA) Youth Aids***

Youth Aids is a sum certain allocation used to pay for the costs of kids placed in State Correctional facilities as well as community services for delinquents.

***Promoting Safe and Stable Families (PSSF)***

This is a sum certain allocation which is 100% Federal funds. There are restrictions on the use of funds between family support, preservation, and reunification. This program requires Counties submit a plan.

***Targeted Safety Support Program (TSSF)***

This funding source requires Counties to submit a plan of spending. Use of funds are to address in home safety to avoid out of home placements. A family must have a safety plan to qualify for this funding. This is a sum certain allocation awarded from the plan.

***Community Intervention Program***

Community Intervention Program funding is an allocation based on the prior year's youth placements in juvenile facilities. An application must be completed each year to receive the funds. This program runs on a Federal Fiscal Year.

***IV-E Legal Services, Legal Representation and eWiSACWIS Funding***

This funding must be applied for, typically the application comes in September and is due the end of October. IV-E Legal Services for CHIPS and out-of-home (OOH) care are reimbursed at 27% of the total costs. IV-E reimbursement limit for Termination of Parental Rights (TPR) and Adoption activities is limited to 34% of the total costs. IV-E eWiSACWIS reimbursement for staffing and equipment is limited to 38% and changes based on RMS results. In 2020 IV-E Legal Representation for parents and children was added and is limited to 39% for TPR and 26% for out-of-home care (OHC), guardianship and Children in Need of Protection and/or Services (CHIPS).

***Substance Abuse Block Grant***

A sum certain allocation that is 100% federally funded; used to fund AODA treatment and prevention activities. There are funding restrictions including 20% having to be spent on prevention activities and 10% on women.

***Intoxicated Driver Program Supplement***

This is a funding source that is applied for each year to assist with the county deficit spending in the Intoxicated Driver Program.

***Mental Health Block Grant***

This is a small sum certain allocation that is 100% Federal money and is used to offset some purchased services for persons with mental illness and, if additional dollars are available, for some part of Integrated Services costs. The block grant is not a large funding source for Mental Health. Additional revenues for Mental Health also include private insurance, Medicaid and private collections.

### ***Comprehensive Community Services (CCS)***

This is a recovery centered Medicaid program serving adults and children who are functionally and diagnostically eligible. 100% funding for counties that are regionalized. The State reimburses the non-Federal portion up to State approved rates.

### ***Crisis Intervention Services***

This is a Medicaid covered program that is reimbursed by the State to cover up to 100% of the costs beginning in 2020. Counties must be part of a consortium to be eligible for the 100% funding. The definition of what is considered a consortium is loosely defined.

### ***Additional Program Revenue through Medicaid***

Federal share for the following programs are reimbursed at varying amounts dependent on your costs. You receive some of the unreimbursed back through WIMCR:

- Community Support Program (CSP),
- Outpatient Mental Health and Substance Abuse Services in the home or community for adults, and
- Targeted Case Management

### ***Community Mental Health Grant***

In 2016, the State consolidated base funding for several community mental health allocations into a single allocation for community programs under the state's community aids program. In addition, a portion of the Community Options Program (COP) funding was transferred to the newly created Community Mental Health Grant. There are twenty-two identified program areas to which we can apply these funds. The funds must be used for services to adults or children with a mental health diagnosis who have or are at risk of having a serious mental illness (SMI) or a serious emotional disorder (SED).

### ***Birth to Three***

This program is federally mandated. It is a sum certain allocation which is 100% Federal funding that offsets some of the costs of the Birth to Three Program. This program has a MOE (maintenance of effort) attached to it that must be met each year.

### ***Children's Long Term Support Waiver***

This is a Medical Assistance Waiver and serves children with physical disabilities, developmental disabilities and mental illness. This funding source was introduced in 2005. In 2016, Autism services shifted to a Medicaid card service.

Counties are working with the State to eliminate county waiting lists. According to State formulas, counties may receive additional funding for serving clients coming off of the waitlist. While counties received some Fully Funded waiver slots to serve children removed from the wait list in past years, this new initiative is developed to completely eliminate current wait lists for each county. As the children age out of those Fully Funded slots that were awarded in the past, they are being closed. As of the end of 2020 the waitlist was not eliminated, although originally projected to be done in 2018. The State fully funded all the children on the waitlist and Counties have until March to enroll them. Each month kids who have been deemed functionally eligible wait on enrollment until the beginning of the next month when 300 slots are opened to enroll. It is important to note that Counties have an MOE based on levy put in the program in 2016.

***Children’s Community Options Program (CCOP)***

In 2016, the mental health and substance abuse portion of COP was moved to Community Mental Health Grant. The Family Support Program was merged with the children’s portion of COP and renamed Children’s Community Options Program (CCOP). This is an entirely State funded program where we receive a sum certain allocation. We can use it for services not covered under the Waiver or as match to bring in the additional Federal funds under the Waiver programs, or for children who met the eligibility guidelines for CCOP but not the Waiver. There is a Waiver mandate requiring Waiver funding be used before any CCOP funding is utilized if a child qualifies for both programs.

***Alzheimer’s Family Caregiver Support Program (AFCSP)***

This is a 100% State sum certain allocation that can be used to support caregivers of persons living with Alzheimer’s disease and other dementia. This funding source can fund services for the consumer to provide relief to the caregiver.

***Adult Protective Services***

100% State sum certain allocation. This funding was made available after Family Care implementation for county responsibility in investigating reports of alleged abuse, neglect, or financial exploitation of vulnerable adults.

***Congregate, Home Delivered Meals and Nutrition Services Incentive Program (NSIP)***

Funding to provide nutrition services that assist older citizens in the county to live independently, promote better health, and reduce isolation. The funding source assists with funding for home delivered meals five days per week and different congregate meal sites. Created by the Federal Government in the Older Americans Act. Provided by State and Federal funds. NSIP provides funding for the purchase of food for use in the meal program. The funding varies from year to year.

***Title IIIB - Supportive Services; Title IIID - Preventive Health; Title IIIE - Family Caregiver Support***

These various funding sources are received through a contract with the Greater Wisconsin Agency on Aging Resources (GWAAR). They provide for several aging services such as fall prevention, health and nutrition education, medication management, caregiver support for those providing assistance to elderly loved ones, supportive home care, respite, chore services, and bathing services. These also are Older Americans Act revenue sources. The GWAAR contract also includes the State Senior Community Services grant used for services and support for seniors including meals.

***85.21 Specialized Transportation***

The 85.21 grant is received each year through application to the Department of Transportation and funds rural transit system for the county. Funding is for the Specialized Medical Vehicle system and a portion of our volunteer driver program. There is also a grant process for 5310 funding.

***5310 Vehicle Grant and 5310 Operation Assistance Grant***

These programs are funded in part by the Federal Transit Administration, FTA, as authorized under 49 U.S.C> Section 5310 Enhanced Mobility of Seniors and Individuals with Disabilities and is

administered as an annual competitive application process. Local match is provided by the grantee as a cash match and/or in-kind services available to support the project.

***Elderly Benefit Specialist, Disability Benefit Specialist***

Funding for Benefit Specialists to offer information, advice and assistance to older or disabled individuals related to individual eligibility for public benefits and services as well as housing and other financial concerns. Provides legal advice and representation by an attorney, paralegal or law student as supervised by an attorney. The Elderly Benefit Specialist was created out of the Older Americans Act by the Federal Government.

***Aging and Disability Resource Center (ADRC)***

These funds provide seniors and those with disabilities a one-stop customer service center for information, advice and seamless access to opportunities and options counseling. These are sum certain funds, with a portion of expenditures matched with federal Medicaid funding to increase revenue. Some ADRC's have been awarded Dementia Care Specialist funding in addition to the ADRC dollars.

***Transportation Contracts***

Since the implementation of a statewide Medicaid transportation system, we have entered into contracts with nursing homes, assisted living facilities, and Managed Care Organizations for our ambulatory and non-ambulatory van service.

***Wisconsin Medicaid Cost Reporting (WIMCR)***

This is the process the state uses to claim the Medicaid federal match dollars for county costs for providing certain community-based Medicaid services. Through this process, counties receive a majority, but not all, of the federal gain from the WIMCR process. The county bills Medicaid through the usual fee-for-service process and is reimbursed at the basic fee-for-service Medicaid rate. Annually counties submit reports electronically showing the full cost for providing the services. Each year the state reconciles and makes an adjustment to the county to make up for the difference between the fee-for-service reimbursement and the full cost of the service.