SAVE IRIS

RUMOR OR REALITY: what do we really know about the proposed changes to Wisconsin's state of the art long-term care system?

rumor IRIS is not going away.

REALITY The budget ELIMINATES IRIS. There is no written Family Care 2.0 plan that the public can review that shows IRIS will be available as it is now.

rumor Participants should not be worried.

REALITY The lives of about 12,000 IRIS participants, over 40,000 Family Care members, and the thousands more who would enter the program from the 7 expansion counties this year, will be greatly disrupted.

rumor Participants will still be able to self-direct their services and supports.

REALITY

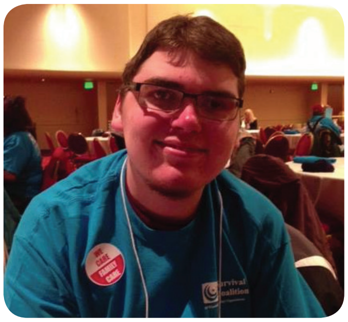
- Self-direction is the opposite of managed care.
- Under this proposal, a key component of self-direction would go away – that is, the ability for people with disabilities and elderly individuals to get care and support from people that they already trust: in many cases, their family, their friends, and their neighbors. That would be replaced by a specific network of providers, and would cause many people to have to consider leaving the doctor(s) they know and trust in order to achieve the Governor's "integrated care" goal.

rumor IRIS is being eliminated because of concerns about fraud.

REALITY The Administration says it's trying to address fraud in the IRIS program, but incidence of fraud is extremely rare in IRIS. In the last six months, substantiated fraud claims account for 0.4% of the IRIS program – less than 50 of nearly 12,000 people. In other words...IRIS has checks in place and a good record!

"Save IRIS" is a non-partisan grassroots movement of IRIS participants and their allies dedicated to preserving IRIS- Wisconsin's only long-term care option in which participants completely self-direct their supports and services.

www.saveiris.org



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rumor No need to worry. The name is changing but participants will still have access to the same quality long-term care services under "Family Care 2.0."

REALITY 8 regional Wisconsin-based MCOs would not be able to meet the requirements to go statewide and provide acute care, primary care, & behavioral health care, in addition to long-term care. Unknown HMOs would assume long-term care services.

Under an HMO, there is no guarantee that those enrolled will have access to the same providers.

Aging and Disability Resource Centers will be privatized and not necessarily be available locally in each county as they are now.

rumor No details of the Family Care 2.0 plan can be developed until the legislature approves the budget.

REALITY Previous long-term care reform occurred over many years and involved all the stakeholders. It included studies and pilot programs. These sweeping changes do not need to be in the budget at this point in order to plan.

rumor The current long-term care system is too expensive and in need of reform.

REALITY The current system is cost-effective and has generated major savings.

- The percentage of Wisconsin's Medicaid budget spent on LTC dropped from 53% in 2002 to 43% in 2011.
- Nursing Home days funded by Medicaid dropped from 8.8 million in 2002 to 5.7 million in 2012 resulting in saving taxpayers $300 million per year.
- More older adults are receiving long-term support in the community resulting in Medicaid spending on nursing homes decreasing from 62% in 2002 to 31% in 2012.
- $14 million in savings is happening through the Family Care/IRIS expansion in the 7 northeastern counties.

rumor These changes will be good for Wisconsin's economy.

REALITY If these sweeping and abrupt changes to long-term care in Wisconsin go through, then the jobs of thousands of hard-working Wisconsin taxpayers are in jeopardy:

- Over 25,000 workers who are employed by IRIS participants
- Over 500 statewide IRIS Consultants and Self-Directed Personal Care (SDPC) staff
- Over 3,200 MCO employees
- Thousands of vendor agency employees

Currently, the state's MCOs operate at an average profit margin of just over 1%. Profit is capped at 2%. There would be no such profit cap for large, national managed care companies and HMOs. And that profit would likely go out of state, instead of staying here in Wisconsin.

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