



WISCONSIN LEGISLATIVE AUDIT BUREAU CONTRACT EVALUATION

November 2000

WISCONSIN FAMILY CARE IMPLEMENTATION PROCESS EVALUATION REPORT

Section 9131(3m) of 1999 Wisconsin Act 9 requires the Legislative Audit Bureau to contract with an organization to evaluate the cost-effectiveness, access to services, and quality of care provided by the Family Care pilot projects. In collaboration with staff from the Department of Health and Family Services, the Legislative Audit Bureau released a request for proposals and, from among the five competitive proposals submitted, selected The Lewin Group to evaluate the Family Care program. As contract administrator, the Legislative Audit Bureau approves each work product delivered by The Lewin Group to ensure objectivity and independence. However, the findings, conclusions, and recommendations in the report are those of The Lewin Group.

The evaluation process has three stages. The first stage was the development of the enclosed Wisconsin Family Care Implementation Process Evaluation Report. The second stage will be the development of an impact evaluation, which will assess the extent to which the pilot projects are meeting the stated goals of Family Care. That stage is currently scheduled to begin in June 2001. The final stage of the evaluation will assess the benefits and costs of the program. Work on it is currently scheduled to begin in January 2002.

The enclosed report is the first of five The Lewin Group will develop on the status of Family Care implementation. The report contains background information on the Family Care program as a whole, as well as evaluative information on the development of each pilot project. The report also contains a glossary of terms and a research methodology section that demonstrates the contacts made by The Lewin Group in the five pilot counties—Fond du Lac, La Crosse, Milwaukee, Portage and Richland—in order to assess the current status of the Family Care program.

Through contact with these pilot projects and numerous interviews with staff from the Department, The Lewin Group advances the following key findings about the implementation of Family Care:

- In the five pilot counties, enrollment in the Care Management Organizations (CMO) that arrange and manage services for individuals enrolled in Family Care was essentially limited to the conversion of Community Options Program (COP) clients and the removal of individuals from existing waiting lists. Through September 8, 2000, 1,513 individuals were enrolled in Family Care in the four pilot counties with fully operational CMOs. (Richland County is not yet operating its CMO.) The pilot projects were not able to enroll new consumers from all target populations as efficiently as they had anticipated.
- The number of actual contacts made by Resource Centers, which provide one-stop shopping for information and assistance in obtaining long-term care services, exceeded projected goals. From March to June 2000, 15,734 contacts were made by the Resource Centers in Fond du Lac, La Crosse, Milwaukee, and Portage counties. The projected goal was 3,223. The extensive use of the Resource Centers indicates that they are meeting a need for information about long-term care choices.
- While the Resource Centers have improved consumers' ability to make informed choices about long-term care, there is significant variation among pilot projects in the manner in which information is organized and provided. There are also some needs that the pilot projects report are unmet. These include transportation, short-term case management, and supported employment for the developmentally disabled population.
- Consumer direction and advocacy are important components in the structural design of Family Care. However, these components have yet to be fully implemented. The pilot projects have been focused on administrative

issues such as staffing and case conversion and are just beginning to concentrate on incorporating other requirements. Similarly, quality assurance and improvement efforts are just beginning in the pilot projects.

- Pilot projects are making progress in integrating the management of medical and social care. However, it is too early to discern when changes in care management will actually occur. Pilot projects have reported that care management is much more time-intensive than expected because of the need to develop a care plan with significant consumer input and because there are more services to manage and monitor under the Family Care model.
- A capitated rate-setting methodology has evolved over time, and the Department appears to have made an effort to include the pilot counties in the process. The report chronicles the creation and refinement of the methodology and defines its components in detail.
- Unresolved governance issues have emerged as a central issue in the implementation of Family Care. The Department continues to work to resolve issues involving potential conflicts of interest when a county board oversees both the entity that receives capitated funds to provide Family Care services and the entity that determines the necessary level of care and provides enrollment counseling.

The report is available on the Legislative Audit Bureau's Web page at <http://www.legis.state.wi.us/lab>. If you are interested in receiving a copy, please contact our office and request the Family Care report. If you have further questions, please contact Kate Wade at (608) 266-2818.

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[full report, PDF file \(475KB\)](#)