

OPEN MEETING MINUTES

Name of Governmental Body: Council for Children with Long-Term Support Needs (CLTS)			Attending: Wendy Heyn, Chair; Patti Becker, Parent; Kelly Blaschko, Provider, Genesee Community Services; Kerry Blondheim, Provider, Innovative Services, Inc.; Anouvong “Toto” Chanthavixay, Milwaukee County Children Youth & Family Services; Christina Courtney, Brown County, LTC PAC Representative; Lisa Hanks, WI Department of Children & Families; Pamela Hencke, Parent; David McGinley, Parent; Angela Milne, Provider, Encompass Family Solutions; Katy Morgan-Davies, Parent; Cherie Purdy, Parent; Angela Radloff, Dane County Human Services; Jessica Seawright, Parent; Lisa Stephan, Manitowoc County; Sandra Tierney, Parent; Danielle Tolzmann, Family Voices of WI; Sally Flaschberger, WI Board for People with Developmental Disabilities; Jill Jacklitz, Councils and Organizations, Disability Rights WI Excused: Elizabeth (Liz) Williams Absent: Michelle Mattox, Parent State and Presenting Members: Deb Rathermel, BCS; Becky Granger, BCS; Kelsey Vincent, BCS; Mary Schlaak Sperry, BCS; Kaycee Kienast, BCS; Soktheap (Tip) Pom, BCS; Nicole Miller, BCS; Sarah Johaningsmeir, BCS; Beth Gullickson, BCS; Rachel Lettner, BCS; Chris Bonds, BCS; Tiffany Schanno, BCS Fellow; Nicole Schneider, BCS; David Sorenson, BCS; Willow Wallis, BCS; Zach Bauer, BCS; Sarah Ybarra, BCS; Nancy Bills, BCS; Dustin Mullett, DHS BITS; Linda Hoeppner, BCS Public Members: Ashlyn Marino, Acumen; Kristine Serwe, Fond du Lac County; Tessa Randolph; Tonya Christner, Acumen; Vickie Smith, Waukesha County; Ashley S., Parent; Dani Bauer; C. Cannon; Amber Weise, Family Voices of WI, Policy Intern
Date: 5/6/2026	Time Started: 9:00 AM	Time Ended: 2:50 PM	
Location: 5109 West Terrace Drive, Madison / Virtual (Zoom)			Presiding Officer: Wendy Heyn, Chair

Minutes

Welcome

- Council Attendance
- Council Member Announcements
- CLTS Council: Membership Status – Two parent seats on the council available, with potentially three openings. There are currently no council representatives for northern regions of the state.
- Members: CLTS Council: Members | Wisconsin Department of Health Services:
<https://www.dhs.wisconsin.gov/cltscouncil/members.htm>

Public Comments

General Business

Approval of Meeting Minutes from February 4, 2026: [February 4, 2026, Governor's CLTS Council Minutes](#)
MOTION TO APPROVE: Kerry Blondheim; SECONDED: Danielle Tolzmann at 9:22 AM

Waiver Renewal, presenter Becky Granger, Deputy Director, BCS

• Summary of Key Changes to Draft Waiver Application

- Overview of application content and how to navigate the appendices.
- 3 pillars driving the waiver renewal: 1) consistency, 2) timely access to supports and 3) coordination of benefits operational efficiency.
- Multiple sessions were held in 2025 to gather input, including virtual input sessions, regional sessions, provider forum, CLTS and Autism Councils.
- Major themes of input: request for clarity and awareness on what the CLTS Program covers, greater support for families and for children with complex care needs, for care coordinators, and for resolving issues.
- Input from the CLTS Council:
 - Request to pay parents of minor children
 - Request for CLTS ombuds
 - Develop transition navigation service
- Key updates to the CLTS Program
 - Developing statewide professional development system for support and service coordinators.
 - Readiness review: there will be a protocol for county waiver agency operations aimed at ensuring each county waiver agency, intended to assist in meeting standards for quality and capacity locally.
 - CLTS ombuds: Intended to assist in navigating conflicts and issues separate from the appeals process
 - Local grievance system to support families' issues that are not appealable; anticipate directing CLTS agencies in how they operate their system.
 - Redefining and refocusing self-direction option to better create a clear identity for self-direction and to better align to current operations.
 - Creating a provider qualification record review.
- Process Used for Gathering Input:
 - Every one of the services within the CLTS Program was reviewed and revised for clarity and consistent to better align service descriptions with purpose of the service and aligned to federal requirements. Looked for areas where confusion could happen and decreased overlap between services to make more distinct from one another. Revised provider qualifications to support a high-quality network of providers.
- Identified four buckets of changes to the CLTS service package – some benefits have moved to another service; more specificity and limitations have been added.
- Applications for public comment to open next week and remain open for 30 days. Application to be submitted to CMS in July.
- **Discussion:**
 - Jessica Seawright asked whether ombuds will be pulling from foundations such as restorative justice.
 - There is an opportunity to cross train with Medicaid fee for service, and we will be leveraging our existing contracts that have ombuds roles and responsibilities within Medicaid.
 - Wendy Heyn mentioned that parents are concerned that the new youth supervision will be susceptible to the same issues as before.
 - Becky Granger clarified that personal care may be incidental – youth supervision is from a different and distinct outcome and not for personal care.
 - Kerry Blondheim curious as to rate schedule for youth supervision.
 - We are looking to align for respite but we also have a market rate for community-based services like YMCA, afterschool programs, etc. and appendix I may be referred to for a breakdown of rates.
 - Explanation on why the childcare supplement was unsuccessful for under 12 – there were multiple misunderstandings, and we were only permitted to supplement care in limited cases. Places couldn't take outside participants or follow the set rate amount.
 - Becky clarified that the name change of “unpaid caregiver supports” will be included in the manual/publications.
 - Clarification on “counseling and therapeutic services” – the intent is that this is for licensed and certified individuals (not necessarily “medical” but must have a license).
 - Katy Morgan-Davies suggested providing further clarity on what “working” means in reference to working parent and youth supervisions.
 - Becky clarified that we are not anticipating changing our methodology for how we set rates.
 - Katy Morgan-Davies suggested that family pay should be considered because families already pay respite for

what they cannot do themselves and often require training in addition to all the work that must be done. There is a lack of acknowledgement of the amount of work families are doing to avoid institutionalization.

- Jessica Seawright suggested revising the term “youth supervision” because of connotations with “secure care, jail, prison, etc.”

CLTS Functional Screen Overview, presenters Kelsey Vincent, Section Manager BCS; Mary Schlaak Sperry, Human Services Program Coordinator, Sr.

- Overview of the functional screen background, process, and determining eligibility for programs.
- 2025 Functional Screen Data:
 - Over 36,000 total screens run for all programs.
 - 27,000+ annual screens
 - 9,600 initial screens
- CLTS waiver eligibility 2025: over 28,000 children eligible.
- Overview of eligibility breakdown by target group.
- Enrollment in 2025: 88% (6,000) of initial screens resulted in eligibility and 92% of those led to enrollment.
- The role of BCS in the functional screen team includes technical assistance, quality monitoring for screen accuracy, and developing policy guidance and resources.
 - BCS updates and maintains children’s functional screen and clinical instructions, revises certified screener training as needed, consults with screeners, reviews not functionally eligible screens, develops resources for screeners, and works with other bureaus and divisions that have long term care eligibility screens.
 - Not functionally eligible: reviewed 2,500 not functionally eligibility screens.
 - Partners at the county level – BCS reviews these screens again and has conversations with the screen at the county, looks at caregiver feedback and records and confirms or questions the screen, coordinates on fair hearing process.
 - BCS provides quarterly teleconferences to all certified screeners plans to implement post-teleconference discussions this year starting in May.
 - BCS is looking at potentially updating clinical instructions this year to promote consistency across counties.
- **Discussion:**
 - Clarification that we will be looking at the clinical instruction document this year with potential updates to include more options.
 - Clarification from Deb Rathemel that we did in depth analysis of deaf-blind who were not eligible, and of the children found not eligible didn’t find anything to revise that would make them eligible. Suggestion that we should be leaning into technical assistance for the deaf-blind population.
 - We have guidance in the clinical instructions for screeners to consider what would happen if these interventions were not in place.
 - Concern brought up about family members during the screen: parents themselves have disabilities or mental health issues, and more assistance may be needed during screen to assess a broader view of what goes on in the family.

Orientation to Topics for Tabletop Sessions | Deb Rathemel, Director, BCS; Tip Pom, Section Manager, BCS; Nicole Miller, Human Services, Program Coordinator, Sr.; Sarah Johaningsmeir, Program & Policy Analyst, Adv.

- **Support and Service Coordinator (SSC) Professional Development/Transition – Beth Gullickson**
 - Addressing increased standardization across counties in operationalizing by focusing on the relationship between coordinators and families.
 - Seeking feedback on what topic areas are important for coordinators to understand and what modalities are preferred. Focus on youth transitions, families and SSCs who may need assistance or additional skills in navigating the complexities of transitions.
- **CLTS Provider Handbook – Tip Pom**
 - BCS is working on CLTS Program Provider handbook. Looking for additional feedback on how the draft can be improved.
- **CLTS Quality Framework – Nicole Miller**
 - BCS is looking at answering the question “How is the CLTS program working?” Is it making a difference for kids and families and how do we know? Identifying ways we can improve services and outcomes by using data by looking at three levels: child, home and family, and community.

- **Children with Medical Complexity Waiver | Becky Granger**
 - Imagining a waiver for the medically fragile population – BCS is looking to determine whether pursuing a waiver for children with medical complexity make sense.
 - Medically fragile and technology dependent children with complex needs may be substantially different from other children in the CLTS program.
 - There are currently 12 states with waivers for medically fragile children.
 - What level of care would we be looking at?
 - What specific subgroups are federally recognized?
 - What might the benefit package look like?
 - How would the waiver be administered?
 - What are current barriers to getting services and are there opportunities around a regional model or partner with expertise in medical complexity?

Round Table Discussion on the above

Situational Updates, presenter Kaycee Kienast, Section Manager, BCS

- **Deciding Together Resources Brief**
 - Updates for [Deciding Together Resources](#)
 - [Deciding Together Instructions](#)
 - [Deciding Together “What it is and what it is not guide”](#)
 - [CLTS Program Manual](#)
 - GovDelivery email messages to communicate releases and changes
- **Timely Enrollment Dashboard | <https://www.dhs.wisconsin.gov/clts/enrollment-dashboard.htm>**

Wrap-Up & Action Items (Next Meeting)

Future 2026 Meeting Dates: August 5, 2026 and November 4, 2026

- Adjourned at 2:50 PM.

Prepared by: Sarah Ybarra on 5/6/2026.