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**STATE OF WISCONSIN**  
**Division of Hearings and Appeals**

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In the Matter of

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**DECISION**  
Case #: CWK - 220665

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**PRELIMINARY RECITALS**

Pursuant to a petition filed November 3, 2025, under Wis. Admin. Code, §HA 3.03(1), to review a decision by the Crawford County Dept. of Human Services to discontinue the Children's Long-Term Support Program (CLTS), a hearing was held on December 18, 2025, by telephone.

The issue for determination is whether petitioner meets a level of care for CLTS eligibility.

**PARTIES IN INTEREST:**

Petitioner:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

Respondent:

Department of Health Services  
201 E. Washington Ave.  
Madison, WI 53703

By: Shauna Strandlie  
Crawford County Dept. of Human Services  
225 N Beaumont Rd., Suite 326  
Prairie du Chien, WI 53821

**ADMINISTRATIVE LAW JUDGE:**

Brian C. Schneider  
Division of Hearings and Appeals

**FINDINGS OF FACT**

1. Petitioner is a five-year-old resident of Crawford County.
2. Until the action at issue in this appeal, the respondent was eligible for CLTS based upon meeting a functional screen finding of institutional need under the developmental disability (DD) target

group. See 8/12/24 CLTS Functional Screen, which was done when petitioner was in 4K at school. Petitioner's diagnosis is autism spectrum, and in the 2024 screen it was noted that he had an Individualized Education Program (IEP).

3. In September, 2025, an annual reassessment was completed with a new functional screen done on September 29. That assessment noted that petitioner's primary diagnosis is Autism or Autism Spectrum. It noted that petitioner has an IEP, but specifically for occupational and speech therapy. The screen noted that petitioner does not have problem behaviors at school, that he has some problem with communication in that he does not follow certain two-step directions, and that he has deficits in a number of social competency/self-direction areas (similar to the finding in 2024).
4. The Functional screen was run, and petitioner was found to no longer meet the CLTS level of care. A notice of denial of CLTS was sent dated October 23, 2025. This appeal was filed. Benefits were not ordered to be continued.

### **DISCUSSION**

The CLTS program started on January 1, 2004 after the federal Department of Health and Human Services informed the state department that federal MA funding would no longer be available for in-home autism services. The department utilizes a Medicaid Home and Community-Based Services Waiver Manual for the CLTS Waiver Program ("the Manual"), just updated in December, 2025. It is found on-line at <https://www.dhs.wisconsin.gov/publications/p02256.pdf>.

The Manual provides that an individual must meet several eligibility criteria for these programs, one of which is level of care. Manual, §2.2. In addition, the child must be part of a waiver target group. Those groups include children with developmental disabilities, those with physical disabilities, and those with mental health disabilities. Manual, §2.3.

Petitioner was eligible for CLTS under the DD level of care. To meet the DD level of care, the child must (1) have a diagnosis of a cognitive disability or related condition, (2) must demonstrate substantial functional limitations, and (3) need active treatment. Manual, §2.3.1.

Institutional Levels of Care: Children's Long-Term Support Programs in Wisconsin is a document found on-line at [www.dhs.wisconsin.gov/publications/p03027.pdf](http://www.dhs.wisconsin.gov/publications/p03027.pdf). It is dated May, 2022, and it includes written descriptions of the levels of care upon which the functional screen instructions are based. A web page describing the Wisconsin Functional Screen, updated September 30, 2025, includes a link to the site. See [www.dhs.wisconsin.gov/functionalscreen/index.htm#childrens](http://www.dhs.wisconsin.gov/functionalscreen/index.htm#childrens). Importantly to this decision, I discovered this statement in the first paragraph of the DD level of care discussion on page 4 of the Level of Care Document: "Children under age 6 with an eligible diagnosis will automatically meet an institutional level of care on the Functional Screen and be eligible for the CLTS Program." Autism Spectrum Disorder is one of the eligible diagnoses. Id., page 5.

I have no explanation of why the functional screen determination found that petitioner did not meet the DD level of care. However, the statement in the Department's own Level of Care policy document that a child under age six with an autism diagnosis meets the DD level of care is sufficient proof to me that the functional screen result was erroneous. I thus will order that petitioner remain eligible for CLTS under the DD level of care. Next year when he is six the result might change, and it might also be worth reviewing the mental health level as well. However, for this year he remains eligible.

### CONCLUSIONS OF LAW

Petitioner remains eligible for CLTS under the DD level of care because he is under six years old with a diagnosis listed as a cognitive impairment.

**THEREFORE, it is**

**ORDERED**

That the matter be remanded to the agency with instructions to restore petitioner's CLTS eligibility with the finding that he meets the DD level of care, if he continues to meet all other eligibility criteria. The agency shall do so within 10 days of this decision.

### **REQUEST FOR A REHEARING**

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 4822 Madison Yards Way, 5<sup>th</sup> Floor North, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

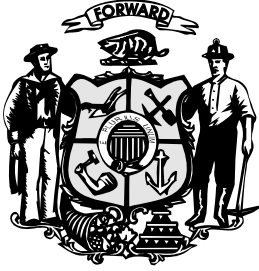
### **APPEAL TO COURT**

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 201 E. Washington Ave., **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,  
Wisconsin, this 22nd day of December, 2025

\s \_\_\_\_\_  
Brian C. Schneider  
Administrative Law Judge  
Division of Hearings and Appeals



**State of Wisconsin\DIVISION OF HEARINGS AND APPEALS**

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The preceding decision was sent to the following parties on December 22, 2025.

Crawford County Department of Human Services  
Bureau of Long-Term Support

