



Greater Wisconsin Agency on Aging Resources, Inc.

The

Guardian

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The Guardian is a quarterly newsletter published by the Greater Wisconsin Agency on Aging Resources' (GWAAR) Wisconsin Guardianship Support Center (GSC).

The GSC provides information and assistance on issues related to guardianship, protective placement, advance directives, and more.

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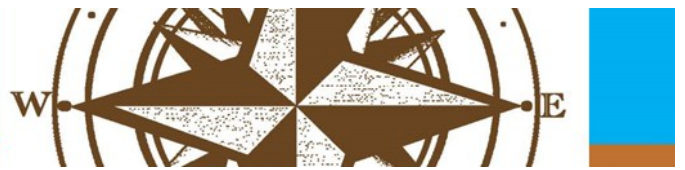
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Patient's Representative Webinar and other Resources

Thanks to cross-departmental work at the Wisconsin Department of Health Services, there is now an informational video about the new “patient’s representative” process available on two platforms :

- ⇒ Patient’s Representative Authority (YouTube) ([Act 115- Patient's Representative Webinar](#))
- ⇒ Patient’s Representative Authority (Vimeo) ([Act 115- Patient Representative Webinar | Videos & Movies on Vimeo](#))

The new process to establish a “patient’s representative” is an alternative route for admission from a hospital to either a skilled nursing facility or a community-based residential facility (CBRF) when patients are incapacitated and lack advance directives or a legal decision-maker. Required forms are on the DHS “Advanced Directives” page ([Advance Directives | Wisconsin Department of Health Services](#)).

In addition, the Guardianship Support Center has published guidance on the patient’s representative process in a “frequently asked questions” format: [Wisconsin’s New Patient’s Representative Law: Frequently Asked Questions](#).

Aging, Disability, and Independent Living Network (ADILN) Conference

September 21-23, 2026, Wisconsin Dells

The theme of the [Aging, Disability, and Independent Living Network \(ADILN\) Conference](#) is “Mission Possible: Strengthening our role as agents of change through innovation and collaboration,” and the programming is aimed at professionals in the fields of aging and disabilities (in-person attendance will count towards continuing education credits for Vocational Rehabilitation Counselors, PT, OT, SLP and AT providers, Social Work and Nursing Home Administrators). If you are working with older adults, people with disabilities or caregivers, you do not want to miss this conference with incredible keynote presenters (Alison Barkoff, Tracey Gendron, Theo Braddy, Allison Gilbert, Graham Nash) and a wide array of interesting, valuable sessions!

For more information and to register, visit the conference website at <https://www.uwgb.edu/adiln/> (early bird pricing ends August 21, 2026).





Input Requested for September Statewide Caregiver Coordinator Meeting

September 9, 2026, Webinar/Call, 10-11 am

Do you feel your Caregiver Coordinator Program, ADRC, or Dementia Care Specialist Program has built strong partnerships with local hospitals, healthcare systems, discharge planners, primary care clinics, or physicians' offices? We are looking to highlight examples of successful partnerships that help identify and connect family caregivers to supports and services earlier in their caregiving journey at our September meeting.

For more information about the meeting and the participants, see [Wisconsin Caregiver Support Community Monthly Calls](#).

Whether you have developed referral processes, participate in discharge planning, provide caregiver education, or have found other creative ways to partner with healthcare providers, we would love to hear from you! To share your success story, please contact Bryn Ceman, GWAAR Caregiver Programs Specialist, by Friday, August 14, 2026, at bryn.ceman@gwaar.org

Wisconsin Guardianship Association Fall Educational Conference

September 22, 2026, Amherst

The [Wisconsin Guardianship Association](#) conference will be at Jensen Community Center in Amherst. Speakers include Kim Tassoul, Ombudsman with the Board on Aging and Long Term Care, who will discuss the role of an ombudsman, including when and how to engage their services, and Dan Jaspersen, magician and motivational speaker, who will deliver our keynote presentation.

In addition, sessions will include: an overview of working with Tribal Courts and the benefits available to tribal members; and, a presentation on mental health, addiction, and recovery for individuals under guardianship. Registration early bird deadline August 14, standard deadline September 4.

- ⇒ Attendee Conference Registration: [WGA 2026 Fall Educational Conference Registration – Fill out form](#)
- ⇒ Exhibitor and Sponsor Registration: [WGA 2026 Fall Educational Conference - Exhibitor & Sponsor Registration – Fill out form](#)





Check out these links

GWAAR's own Bryn Ceman, GWAAR Caregiver Programs Specialist, was included in a recent podcast by the University of Southern California's **Center for Advancing Caregiver Financial and Workplace Security** at: <https://gero.usc.edu/centers/cg-security/podcast/supporting-family-caregivers-at-work/>

For Facebook fans, check out [The Wisconsin Family and Caregiver Support Alliance \(WFACSA\)](https://www.facebook.com/WisconsinCaregiver) at <https://www.facebook.com/WisconsinCaregiver> which has updates from its coalition of family caregivers, professionals, advocates, and educators who are working together to strengthen support for Wisconsin families.

Newsletter changes ahead

You may have noticed some changes in the newsletter format in this edition. More changes are ahead as we transition publishing programs and continue to ensure that the publication meets accessibility requirements.

What is the Guardianship Support Center able to help with?

The GSC is a neutral statewide informational helpline for anyone throughout the state. We can provide information on topics such as Powers of Attorney, Guardianship, and Protective Placement. The GSC is unable to provide information on minor guardianships, wills, trusts, property division, or family law. The GSC is also unable to give legal advice or specific direction on completing court forms such as the inventory and annual accounting. The GSC does not have direct involvement in cases and is not able to provide legal representation.

What are some other free or low-cost legal resources?

Other resources include the American Bar Association's Free Legal Answers [website](#) where members of the public can ask volunteer attorneys legal questions. The State Bar of Wisconsin also offers a Modest Means Program for people with lower income levels. The legal services are not free but are offered at a reduced rate. Income qualifications must be met. For more information, visit the State Bar's [website](#) or call **800-362-9082**.





Update: Use of Patient's Representative Process By Cherry Beth Hill, GSC Managing Attorney

Since June 1, 2026, Wisconsin residents have had an extra tool for post-hospital admission decision-making. Now, family members and close friends can act as a “patient’s representative” to admit their loved one who is an incapacitated hospital patient (without a power of attorney for healthcare) to a skilled nursing facility (SNF) or community based residential facility (CBRF) without having to seek guardianship right away.

This alternative method differs from existing law in a few respects:

- 1) The family member or friend may admit the patient to the SNF or CBRF without filing for guardianship or protective placement.
- 2) Certain documentation requirements must be met before the patient representative may act.
- 3) There is no time limit on the patient representative’s authority.
- 4) The new law adds a judicial remedy if concerns are raised about the actions of a patient’s representative.

Since the new law became effective through July 15, 2026, a total of 29 patient’s representative forms were filed with county probate courts (as required). Note that, for that time period, online court records did not show any patient’s representative forms had yet been submitted for residents in some of the larger counties, including Dane and Milwaukee. So, use of this alternative may continue to grow in the coming months.

Board on Aging and Long Term Care Ombudsman Volunteer Program

By the GWAAR Legal Services Team (for reprint)

The Board on Aging and Long Term Care (BOALTC) has an Ombudsman Volunteer Program. Volunteers make unannounced visits to designated long term care settings on a weekly basis. Volunteers observe, listen to, and interact with the residents. They observe general conditions of the facility and keep a log of this data. Volunteers talk with the residents and families, guiding them in the right direction to resolve issues. Volunteers listen to and advocate for the residents with issues that may include, but are not limited to, personal hygiene, daily cares, diet/meal issues, comfort, activities, staff relationships, personal empowerment, and facility conditions.

Volunteers work with residents and their family members to communicate concerns and complaints by providing support and empowerment. Volunteers can assist residents by being their voice and, with their permission, report concerns and requests to the long-term care facility staff for resolution.

Does this sound like you?

- Do you enjoy spending time with your neighbors in nursing homes and assisted living communities?
- Are you passionate about advocating for the rights of residents in long term care settings?
- Do you want to empower others to recognize and resolve concerns impacting them?
- Do you want to witness the challenges and successes of long-term care communities





firsthand?

- Are you looking for a flexible volunteer experience?

If so, the Volunteer Advocate role might be right for you!

For more information or to apply, visit: <https://boaltc.wi.gov/Pages/Volunteer.aspx>

Supporting Loved Ones' Mental Health

By the GWAAR Legal Services Team (for reprint)

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Positive mental health allows people to realize their full potential, cope with the stresses of life, work productively, and make meaningful contributions to their communities.

When it comes to mental health and others, what we say and how we listen matters. Here is some advice on how to help someone open up about their mental health:

- **Listen attentively.** Listening attentively involves your full focus and consideration. Listen for what the person is telling you, but also what their body language might be telling you. If you are able to refer back to something they said later on, it not only shows you were listening, but that you care about the person and what they've shared with you. Make sure to put away all

distractions (phone, games, etc.) and face the person you're speaking with. Look at them as they talk to you. Nod your head in understanding when appropriate, and gently inquire about something they brought up.

- **Ask open-ended questions.** Make sure the conversation is not full of questions the other person can answer with a simple yes or no. Instead, open up a space for understanding by asking open-ended questions like: "How have you been feeling lately? What have you been doing to cope? What do you want to do about that?" You can also express your concern and encourage the person to talk about what's going on by offering caring statements like: "You seem to be a bit quiet these days. What's been on your mind?" or "You don't seem like yourself lately. Is anything going on?"
- **Don't assume or make judgments.** Opening up and reaching out for help can be difficult. If you make assumptions and judgments in response, it can make it even harder for people to express themselves. Don't assume how a person feels, what they need, or what's going on with them. Instead, ask gently for clarification when you need some. If your friend or loved one tells you things that make you uneasy, or that you might not agree with, do your best to set aside all judgment. Expressing warm-hearted concern and offering support should always be the goal.
- **Find a way to help or get help.** Sometimes, you might be able to directly help the person you're concerned about. Maybe all they needed was to





vent or have someone to talk to and help sort out their feelings. For some people, it might be helpful to send them positive text messages throughout the week or a brief telephone call whenever you get the chance.

However, there are some cases in which the ways you can help are limited. If a person is suicidal, for example, then you need to get help from those more equipped to handle the situation. Ask your friend or loved one if they want to get help, and offer them the resources to do so. Assure them there's nothing wrong with getting the help they need and that by doing so, they've taken the first step to feeling better. Sometimes, just hearing this will help lift some weight off their shoulders. Offering to take your friend or loved one to these helpful spaces, or to find the proper assistance, can go a long way.

Some tips for supporting positive mental health include:

- Connecting with others
- Staying positive
- Getting physically active
- Helping others
- Getting enough sleep
- Eating healthy foods
- Developing coping skills
- Getting professional help if you need it

Full article, as well as information on how to become a "Safe Person" available at: <https://www.dhs.wisconsin.gov/mh/phlmhindex.htm>

Performance of Institutional Special Needs Plans By the GWAAR Legal Services Team (for reprint)

The Center for Medicare Advocacy recently published an article reviewing the performance of Institutional Special Needs Plans (I-SNPs), which is summarized below.

I-SNPs are intended for people who, for 90 days or more, are expected to need the level of care provided in a long-term care facility. As a type of Medicare Advantage plan, I-SNPs receive capitated payments from the Centers for Medicare & Medicaid Services (CMS) that cover certain costs of care.

While the evidence shows that I-SNPs successfully reduce hospitalizations of enrollees, there is no evidence that nursing home residents enrolled in I-SNPs are appropriately denied hospital care and actually receive additional clinical care in their nursing homes.

Many Skilled Nursing Facility (SNF) residents are enrolled in I-SNPs. In 2025, the Medicare Payment Advisory Commission (MedPAC) reported that about 12% of Medicare SNF residents, about 100,000 people, are in I-SNPs. In 2024, MedPAC found that United Health in particular had 70,000 I-SNP enrollees.

While I-SNPs have a lot of potential to help people, they have experienced several problems in their execution. Major issues associated with I-SNPs include avoidance of rehospitalization, pushing for SNF residents to consider "Do-Not-Resuscitate" and "Do-Not-Hospitalize" advance directives, adding





diagnosis codes to patients' charts to increase federal payouts to UnitedHealth, conflicts of interest, and more.

CMS must protect Medicare beneficiaries who enroll in I-SNPs. Areas for enforceable regulatory protections include marketing, free choice of health care provider, quality of care, residents' rights, and the right to rescind a contract with an I-SNP. CMS must pay particular attention to the inherent conflict-of-interest in SNFs' owning I-SNPs for their residents.

As I-SNPs provide care to an increasing number of SNF residents, it is critical that these plans provide medically appropriate care to residents. This vulnerable population needs more than a vague promise that plans will measure their quality and improve their performance.

Read the full article here: [AV, I-SNPs Issue Brief - Formatted \(00791126.DOCX;3\)](#)

Helpline Highlights



Topic: The paperwork for the patient's representative process

Question: I would like to use the new patient's representative process because my parent, who is in the hospital and will be discharged to a skilled nursing facility, does not have a power of attorney for health care. Is there anything I should do besides fill out the form?

First, **two forms are needed:**

1. [Medical Statement of Capacity](#) form: to be completed by a physician or advanced practice clinician who has determined that the patient is incapacitated. (This is a new form specifically for this process.)
2. [Patient's Representative Declaration](#): to be completed by the proposed patient's representative.

Next, each of **the forms must be filed** with the register in probate for the county in which the incapacitated patient resides and sent to the adult protective services agency for the county in which the patient resides.

The priority order to be the patient's representative is: spouse; adult son/daughter; parent; adult sibling; grandparent; adult grandchild; adult close friend.





Title: [*Wisconsin Voter Alliance v. Kristina Secord*](#)

Nondisclosure of guardianship records, specifically eligibility to vote forms

Court: Wisconsin Supreme Court

Date: July 7, 2026

Source: [DisplayDocument.pdf](#) or

[www.wicourts.gov/sc/opinion/](http://www.wicourts.gov/sc/opinion/DisplayDocument.pdf?content=pdf&seqNo=1141646)

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Case Summary

The Wisconsin Supreme Court ruled that Notice of Voter Eligibility (NVE) forms are not to be released based on a public records request. NVE forms are provided by county courts to local election officials to notify them that a person's right to vote has been removed (or reinstated) as part of a county court guardianship proceeding.

In making the determination to protect the privacy of the persons named in the NVE forms, the court stated that their decision was based on the legislature's choice to protect the privacy of people subject to guardianship proceedings.

Case Details

As part of an adult guardianship proceeding in a county probate court, some rights are removed from the proposed "ward" (person subject to guardianship), and also may not be exercised by the guardian. One such right is the right to vote in an election. A court may determine that a person is ineligible to vote when the court finds that the person is incapable of understanding the objective of the electoral process. When the

court makes such a voter-eligibility finding, the determination is passed along to local and state election officials who maintain voter registration lists.

In cases where the person is later determined by the court to have regained the capacity to understand the objective of the electoral process, a similar communication (using the same form) is made to elections officials so that they may update their eligibility lists.

The NVE form includes personally identifiable information including the person's name and date of birth, and may include person's address. The substance of the form communicates one of two check-the-box findings indicating that the person is either "incompetent" or "competent" to vote.

This case began in 2022 when the Wisconsin Voter Alliance (Alliance) was interested in identifying people who were incompetent to vote. As part of that effort, they sent public records requests to courts across the state. This case centers on the request sent to the register in probate of Walworth County, Kristina Secord.

Wisconsin law generally presumes open access to records held by public officials. When a request for release is received, a public official is charged with fulfilling the request or providing notification as to why the request is not being fulfilled

The analysis to determine whether to release a record depends on three factors:





1. does the record exist; 2. is there a legal exception mandating that the particular record is not to be disclosed as “public”; 3. is there a public policy that would balance toward, or away from, disclosure.

In this case, the court found that there was a legal exception applicable to the NVE forms because those records are “closed” under s. 54.75 Wis. Stats., which states: “All court records pertinent to the finding of incompetency are closed.”

See also:

[Wisconsin Supreme Court refuses to release voter records](#) (CBS News)

[Wisconsin Supreme Court protects privacy and rights of voters under guardianship](#) (Law Forward)

[Wisconsin Supreme Court nixes attempt to get voting eligibility records](#) (Wisconsin Watch) □

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