



1999 ASSEMBLY BILL 397

July 6, 1999 – Introduced by Representatives BLACK, MILLER, HASENOHRL, BOCK, RICHARDS, POCAN, LA FAVE, TURNER, BERCEAU, PLALE, REYNOLDS, J. LEHMAN, KREUSER, BOYLE and PLOUFF, cosponsored by Senators RISSER, DARLING and ERPENBACH. Referred to Committee on Health.

1 **AN ACT** *to renumber and amend* 49.665 (1) (c); *to amend* 20.435 (5) (bc), 20.435
2 (5) (jz), 20.435 (5) (o), 20.435 (5) (p), 49.665 (3), 49.665 (4) (b), 49.665 (4) (c) and
3 49.665 (5); and *to create* 49.665 (1) (bq), 49.665 (1) (c) 2. and 49.665 (4) (am)
4 of the statutes; **relating to:** extending badger care to low-income child care
5 workers, granting rule-making authority and making an appropriation.

Analysis by the Legislative Reference Bureau

Currently, under the badger care program, families with incomes below 185% of the federal poverty line who meet certain criteria are eligible for partially or wholly subsidized coverage of the same health services and benefits offered under the medical assistance program. “Family” is defined as at least one dependent child and his or her custodial parent or parents.

This bill expands the badger care program to cover individuals who are child care workers who meet the income and nonfinancial eligibility requirements. Under the bill, child care workers need not be parents to qualify for the health care coverage.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

ASSEMBLY BILL 397**SECTION 1**

1 **SECTION 1.** 20.435 (5) (bc) of the statutes is amended to read:

2 20.435 (5) (bc) *Health care for low-income families and eligible individuals.*

3 ~~As a continuing appropriation, the amounts in the schedule A sum sufficient for the~~
4 badger care health care program for low-income families and eligible individuals
5 under s. 49.665.

6 **SECTION 2.** 20.435 (5) (jz) of the statutes is amended to read:

7 20.435 (5) (jz) *Badger care premiums.* All moneys received from payments
8 under s. 49.665 (5) to be used for the badger care health care program for low-income
9 families and eligible individuals under s. ~~49.466~~ 49.665.

10 **SECTION 3.** 20.435 (5) (o) of the statutes is amended to read:

11 20.435 (5) (o) *Federal aid; medical assistance.* All federal moneys received for
12 meeting costs of medical assistance administered under ~~ss. s.~~ s. 49.45 and, to the extent
13 permitted under federal law, s. 49.665.

14 **SECTION 4.** 20.435 (5) (p) of the statutes is amended to read:

15 20.435 (5) (p) *Federal aid; health care for low-income families.* All federal
16 moneys received for the badger care health care program ~~for low-income families~~
17 under s. 49.665, to be used for ~~that~~ the purpose of providing health care coverage to
18 low-income families that are eligible under s. 49.665 (4) (a) for the badger care health
19 care program.

20 **SECTION 5.** 49.665 (1) (bq) of the statutes is created to read:

21 49.665 (1) (bq) “Eligible individual” means an individual who is eligible under
22 sub. (4) (am) for health care coverage under this section.

23 **SECTION 6.** 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and
24 amended to read:

ASSEMBLY BILL 397

1 49.665 (1) (c) (intro.) “Employer–subsidized health care coverage” means one
2 of the following:

3 1. With respect to a family eligible under sub. (4) (a), family coverage under a
4 group health insurance plan offered by an employer for which the employer pays at
5 least 80% of the cost, excluding any deductibles or copayments that may be required
6 under the plan.

7 **SECTION 7.** 49.665 (1) (c) 2. of the statutes is created to read:

8 49.665 (1) (c) 2. With respect to an eligible individual, coverage under a group
9 health insurance plan offered by the eligible individual’s employer, or by the
10 employer of a family member of the eligible individual, for which the eligible
11 individual qualifies and for which the employer pays at least 80% of the cost,
12 excluding any deductibles or copayments that may be required under the plan.

13 **SECTION 8.** 49.665 (3) of the statutes is amended to read:

14 49.665 (3) ADMINISTRATION. The department shall administer a program to
15 provide the health services and benefits described in s. 49.46 (2) to families that meet
16 the eligibility requirements specified in sub. (4) and to eligible individuals. The
17 department shall promulgate rules setting forth the application procedures and
18 appeal and grievance procedures. The department may promulgate rules limiting
19 access to the program under this section to defined enrollment periods. The
20 department may also promulgate rules establishing a method by which the
21 department may purchase family coverage offered by the employer of a member of
22 an eligible family, or individual coverage offered by the employer of an eligible
23 individual, under circumstances in which the department determines that
24 purchasing that coverage would not be more costly than providing the coverage
25 under this section.

ASSEMBLY BILL 397**SECTION 9**

1 **SECTION 9.** 49.665 (4) (am) of the statutes is created to read:

2 49.665 (4) (am) An individual if eligible for health care coverage under this
3 section if the individual meets all of the following requirements:

4 1. The individual is employed by a child care provider as a child care worker
5 for at least 30 hours per week.

6 2. The individual's income does not exceed 185% of the poverty line, except that
7 an individual who is already receiving health care coverage under this section may
8 have an income that does not exceed 200% of the poverty line. The department shall
9 establish by rule the criteria to be used to determine income.

10 3. The individual does not have access to employer-subsidized health care
11 coverage and has not had access to employer-subsidized health care coverage within
12 the time period established by the department by rule, but not to exceed 18 months,
13 immediately preceding application for health care coverage under this section. The
14 department may establish exceptions to this subdivision by rule.

15 4. The individual meets all other requirements established by the department
16 by rule. The department may not require that an individual under this paragraph
17 be a parent as a condition of eligibility.

18 **SECTION 10.** 49.665 (4) (b) of the statutes is amended to read:

19 49.665 (4) (b) Notwithstanding fulfillment of the eligibility requirements
20 under this subsection, a family or eligible individual is not entitled to health care
21 coverage under this section.

22 **SECTION 11.** 49.665 (4) (c) of the statutes is amended to read:

23 49.665 (4) (c) No family may be denied health care coverage under this section
24 solely because of a health condition of any family member and no eligible individual

ASSEMBLY BILL 397

1 may be denied health care coverage under this section solely because of a health
2 condition of that individual.

3 **SECTION 12.** 49.665 (5) of the statutes is amended to read:

4 49.665 (5) LIABILITY FOR COST. (a) Except as provided in par. (b), a family that
5 or eligible individual who receives health care coverage under this section shall pay
6 a percentage of the cost of that coverage in accordance with a schedule established
7 by the department by rule. If the schedule established by the department requires
8 a family or eligible individual to contribute more than 3% of the family's or of the
9 eligible individual's income towards the cost of the health care coverage provided
10 under this section, the department shall submit the schedule to the joint committee
11 on finance for review and approval of the schedule. If the cochairpersons of the joint
12 committee on finance do not notify the department within 14 working days after the
13 date of the department's submittal of the schedule that the committee has scheduled
14 a meeting to review the schedule, the department may implement the schedule. If,
15 within 14 days after the date of the department's submittal of the schedule, the
16 cochairpersons of the committee notify the department that the committee has
17 scheduled a meeting to review the schedule, the department may not require a family
18 or eligible individual to contribute more than 3% of the family's or of the eligible
19 individual's income unless the joint committee on finance approves the schedule.
20 The joint committee on finance may not approve and the department may not
21 implement a schedule that requires a family or eligible individual to contribute more
22 than 3.5% of the family's or of the eligible individual's income towards the cost of the
23 health care coverage provided under this section.

