

1 *~~1295/2.4~~* **SECTION 1053.** 46.27 (7g) (h) of the statutes is created to read:

2 46.27 (7g) (h) The department may contract with or employ an attorney to
3 probate estates to recover under this subsection the costs of care.

4 *~~0028/7.35~~* **SECTION 1054.** 46.27 (9) (a) of the statutes is amended to read:

5 46.27 (9) (a) The department may select up to 5 counties that volunteer to
6 participate in a pilot project under which they will receive certain funds allocated for
7 long-term care. The department shall allocate a level of funds to these counties
8 equal to the amount that would otherwise be paid under s. 20.435 (5) ~~(4)~~ (b) to nursing
9 homes for providing care because of increased utilization of nursing home services,
10 as estimated by the department. In estimating these levels, the department shall
11 exclude any increased utilization of services provided by state centers for the
12 developmentally disabled. The department shall calculate these amounts on a
13 calendar year basis under sub. (10).

14 *~~0030/2.52~~* **SECTION 1055.** 46.27 (9) (c) of the statutes is amended to read:

15 46.27 (9) (c) All long-term community support services provided under this
16 pilot project in lieu of nursing home care shall be consistent with those services
17 described in the participating county's community options plan under sub. (4) (c) 1
18 and provided under sub. (5) (b). Unless the department has contracted under s.
19 ~~46.271 (2m)~~ 46.281 (1) (d) with an entity other than the county department, each
20 county participating in the pilot project shall assess persons under sub. (6).

21 *~~0028/7.36~~* **SECTION 1056.** 46.27 (10) (a) 1. of the statutes is amended to read:

22 46.27 (10) (a) 1. The department shall determine for each county participating
23 in the pilot project under sub. (9) a funding level of state medical assistance
24 expenditures to be received by the county. This level shall equal the amount that the

1 department determines would otherwise be paid under s. 20.435 ~~(5)~~ (4) (b) because
2 of increased utilization of nursing home services, as estimated by the department.

3 *~~-0028/7.37~~* SECTION 1057. 46.27 (11) (c) 3. of the statutes is amended to read:

4 46.27 (11) (c) 3. Medical assistance reimbursement for services a county, a
5 private nonprofit agency or an aging unit with which the department contracts
6 provides under this subsection shall be made from the appropriations under s. 20.435
7 ~~(5)~~ (4) (o) and (7) (b) and (bd).

8 *~~-0028/7.38~~* SECTION 1058. 46.27 (11) (c) 4. of the statutes is amended to read:

9 46.27 (11) (c) 4. The department may, from the appropriation under s. 20.435
10 ~~(5)~~ (4) (o), provide reimbursement for services provided under this subsection by
11 counties that are in excess of the current average annual per person rate, as
12 established by the department, and are less than or equal to the average amount
13 approved in the waiver received under par. (am).

14 *~~-0327/1.2~~* SECTION 1059. 46.27 (11) (c) 5n. a. of the statutes is amended to
15 read:

16 46.27 (11) (c) 5n. a. An assessment under sub. (6) has been completed for the
17 person prior to the person's admission to the community-based residential facility,
18 whether or not the person is a private pay admittee at the time of admission. The
19 county may waive this condition in accordance with guidelines established by the
20 department. If the county waives this condition, the county must meet with the
21 person or the person's guardian to discuss the cost-effectiveness of various service
22 options.

23 *~~-0030/2.53~~* SECTION 1060. 46.271 (2m) of the statutes is repealed.

24 *~~-0028/7.39~~* SECTION 1061. 46.275 (5) (a) of the statutes is amended to read:

1 46.275 (5) (a) Medical assistance reimbursement for services a county, or the
2 department under sub. (3r), provides under this program is available from the
3 appropriations under s. 20.435 ~~(5)~~ (4) (b) and (o). If 2 or more counties jointly contract
4 to provide services under this program and the department approves the contract,
5 medical assistance reimbursement is also available for services provided jointly by
6 these counties.

7 *~~-0028/7.40~~* SECTION 1062. 46.275 (5) (c) of the statutes is amended to read:

8 46.275 (5) (c) The total allocation under s. 20.435 ~~(5)~~ (4) (b) and (o) to counties
9 and to the department under sub. (3r) for services provided under this section may
10 not exceed the amount approved by the federal department of health and human
11 services. A county may use funds received under this section only to provide services
12 to persons who meet the requirements under sub. (4) and may not use unexpended
13 funds received under this section to serve other developmentally disabled persons
14 residing in the county.

15 *~~-0028/7.41~~* SECTION 1063. 46.275 (5) (d) of the statutes is amended to read:

16 46.275 (5) (d) The department may, from the appropriation under s. 20.435 ~~(5)~~
17 (4) (o), provide reimbursement for services provided under this section by counties
18 that are in excess of the current average annual per person rate, as established by
19 the department, and are less than the average amount approved in the waiver
20 received under sub. (2).

21 *~~-0327/1.3~~* SECTION 1064. 46.277 (5) (d) 1n. a. of the statutes is amended to
22 read:

23 46.277 (5) (d) 1n. a. An assessment under s. 46.27 (6) has been completed for
24 the person prior to the person's admission to the community-based residential
25 facility, whether or not the person is a private pay admittee at the time of admission.

1 The county may waive this condition in accordance with guidelines established by
2 the department. If the county waives this condition, the county must meet with the
3 person or the person's guardian to discuss the cost-effectiveness of various service
4 options.

5 *~~0028/7.42~~* SECTION 1065. 46.278 (6) (d) of the statutes is amended to read:

6 46.278 (6) (d) If a county makes available nonfederal funds equal to the state
7 share of service costs under the waiver received under sub. (3), the department may,
8 from the appropriation under s. 20.435 (5) (4) (o), provide reimbursement for services
9 that the county provides under this section to persons who are in addition to those
10 who may be served under this section with funds from the appropriation under s.
11 20.435 (5) (4) (b).

12 *~~0316/1.1~~* SECTION 1066. 46.278 (6) (e) of the statutes is renumbered 46.278
13 (6) (e) 1. (intro.) and amended to read:

14 46.278 (6) (e) 1. (intro.) The department may provide enhanced reimbursement
15 for services under the program for an individual who was relocated to the community
16 by a county department from ~~an~~ one of the following:

17 a. An intermediate care facility for the mentally retarded that closes under s.
18 50.03 (14).

19 2. a. The enhanced reimbursement rate under ~~this paragraph~~ subd. 1. a. and
20 b. shall be determined under a formula that is developed by the department.

21 *~~0316/1.2~~* SECTION 1067. 46.278 (6) (e) 1. b. of the statutes is created to read:

22 46.278 (6) (e) 1. b. An intermediate care facility for the mentally retarded or
23 a distinct part thereof that has a plan of closure approved by the department and that
24 intends to close within 12 months.

1 ***b0483/3.2* SECTION 1067b.** 46.278 (6) (e) 1. c. of the statutes is created to
2 read:

3 46.278 (6) (e) 1. c. An intermediate care facility for the mentally retarded that
4 has a plan of closure or significant reduction in capacity approved by the department
5 and that intends to close or significantly reduce its capacity within 60 months.

6 ***b0483/3.2* SECTION 1067c.** 46.278 (6) (e) 2. b. of the statutes is created to
7 read:

8 46.278 (6) (e) 2. b. The enhanced reimbursement rate under subd. 1. c. shall
9 be 90% of the enhanced reimbursement rate under this subd. 2. a.

10 ***-0030/2.54* SECTION 1068.** 46.2805 of the statutes is created to read:

11 **46.2805 Definitions; long-term care.** In ss. 46.2805 to 46.2895:

12 (1) “Care management organization” means an entity that is certified as
13 meeting the requirements for a care management organization under s. 46.284 (3)
14 and that has a contract under s. 46.284 (2). “Care management organization” does
15 not mean an entity that contracts with the department to operate one of the
16 following:

17 (a) A program of all-inclusive care for persons aged 65 or older authorized
18 under 42 USC 1395 to 1395ggg.

19 (b) A demonstration program known as the Wisconsin partnership program
20 under a federal waiver authorized under 42 USC 1315.

21 (2) “Eligible person” means a person who meets all eligibility criteria under s.
22 46.286 (1) or (1m).

23 (3) “Enrollee” means a person who is enrolled in a care management
24 organization.

1 (4). “Family care benefit” means financial assistance for long-term care and
2 support items for an enrollee.

3 (5) “Family care district” means a special purpose district created under s.
4 46.2895 (1).

5 (6) “Family care district board” means the governing board of a family care
6 district.

7 (7) “Functional and financial screen” means a screen prescribed by the
8 department that is used to determine functional eligibility under s. 46.286 (1) (a) and
9 financial eligibility under s. 46.286 (1) (b).

10 (7m) “Local long-term care council” means a local long-term care council that
11 is appointed under s. 46.282 (2) (a).

12 (8) “Nonprofit organization” has the meaning given in s. 108.02 (19).

13 (9) “Older person” means a person who is aged at least 65.

14 (10) “Resource center” means an entity that meets the standards for operation
15 under s. 46.283 (3) or, if under contract to provide a portion of the services specified
16 under s. 46.283 (3), meets the standards for operation with respect to those services.

17 (11) “Tribe or band” means a federally recognized American Indian tribe or
18 band.

19 *-0030/2.55* SECTION 1069. 46.281 of the statutes is created to read:

20 **46.281 Powers and duties of the department and the secretary;**
21 **long-term care. (1) DUTIES OF THE DEPARTMENT.** The department shall do all of the
22 following:

23 (a) Provide training to members of the council on long-term care who are aged
24 65 or older or who have physical or developmental disabilities or their family

1 members, guardians or other advocates, to enable these members to participate in
2 the council's duties.

3 (b) Provide information to the council on long-term care, including copies of
4 reports submitted to the department by local long-term care councils, and seek
5 recommendations of the council.

6 (c) Request from the secretary of the federal department of health and human
7 services any waivers of federal medicaid laws necessary to permit the use of federal
8 moneys to provide the family care benefit to recipients of medical assistance. The
9 department shall implement any waiver that is approved and that is consistent with
10 ss. 46.2805 to 46.2895. Regardless of whether a waiver is approved, the department
11 may implement operation of resource centers, care management organizations and
12 the family care benefit.

13 (d) Before July 1, 2001:

14 1. Establish, in geographic areas in which resides no more than 29% of the
15 population that is eligible for the family care benefit, a pilot project under which the
16 department may contract with a county, a family care district, a tribe or band or the
17 Great Lakes inter-tribal council, inc., or with any 2 or more of these entities under
18 a joint application, to operate a resource center.

19 2. In geographic areas in which resides no more than 29% of the population that
20 is eligible for the family care benefit, contract with counties or tribes or bands under
21 a pilot project to demonstrate the ability of counties or tribes or bands to manage all
22 long-term care programs and administer the family care benefit as care
23 management organizations.

24 (e) After June 30, 2001, if the local long-term care council for the applicable
25 area has developed the initial plan under s. 46.282 (3) (a) 1., contract with entities

1 specified under par. (d) and, only if specifically authorized by the legislature and if
2 the legislature appropriates necessary funding, contract as so authorized with one
3 or more entities in addition to those specified in par. (d) certified as meeting
4 requirements under s. 46.284 (3) for services of the entity as a care management
5 organization and one or more entities for services specified under s. 46.283 (3) and
6 (4).

7 (f) Prescribe and implement a per person monthly rate structure for costs of the
8 family care benefit.

9 (g) In order to maintain continuous quality assurance and quality
10 improvement for resource centers and care management organizations, do all of the
11 following:

12 1. Prescribe by rule and by contract and enforce performance standards for
13 operation of resource centers and care management organizations.

14 2. Use performance expectations that are related to outcomes for persons in
15 contracting with care management organizations and resource centers.

16 3. Conduct ongoing evaluations of the long-term care system specified in ss.
17 46.2805 to 46.2895.

18 4. Require that quality assurance and quality improvement efforts be included
19 throughout the long-term care system specified in ss. 46.2805 to 46.2895.

20 5. Ensure that reviews of the quality of management and service delivery of
21 resource centers and care management organizations are conducted by external
22 organizations and make information about specific review results available to the
23 public.

24 (h) Require by contract that resource centers and care management
25 organizations establish procedures under which an individual who applies for or

1 receives the family care benefit may register a complaint or grievance and
2 procedures for resolving complaints and grievances.

3 (i) Prescribe criteria to assign priority equitably on any necessary waiting lists
4 for persons who are eligible for the family care benefit but who do not meet the
5 criteria under s. 46.286 (3).

6 (2) POWERS OF THE DEPARTMENT. The department may develop risk-sharing
7 arrangements in contracts with care management organizations, in accordance with
8 applicable state laws and federal statutes and regulations.

9 (3) DUTY OF THE SECRETARY. The secretary shall certify to each county, hospital,
10 nursing home, community-based residential facility, adult family home and
11 residential care apartment complex the date on which a resource center that serves
12 the area of the county, hospital, nursing home, community-based residential facility,
13 adult family home or residential care apartment complex is first available to provide
14 a functional and financial screen. To facilitate phase-in of services of resource
15 centers, the secretary may certify that the resource center is available for specified
16 groups of eligible individuals or for specified facilities in the county.

17 *~~0030/2.56~~* SECTION 1070. 46.281 (1) (a) of the statutes, as created by 1999
18 Wisconsin Act (this act), is repealed.

19 *~~0030/2.57~~* SECTION 1071. 46.281 (1) (b) of the statutes, as created by 1999
20 Wisconsin Act (this act), is repealed.

21 *~~0030/2.58~~* SECTION 1072. 46.282 of the statutes is created to read:

22 **46.282 Councils on long-term care.** (1) COUNCIL ON LONG-TERM CARE. The
23 council on long-term care appointed under s. 15.197 (5) shall do all of the following:

24 (a) Assist the department in developing broad policy issues related to
25 long-term care services.

1 (b) Assist the department in developing, implementing, coordinating and
2 guiding long-term care services and systems, including by reviewing and making
3 nonbinding recommendations to the department on all of the following:

4 1. The department's standard contract provisions for resource centers and care
5 management organizations.

6 2. The family care benefit, including the per person rate structure for the
7 benefit.

8 3. The long-term support community options program under s. 46.27.

9 4. The community integration programs under ss. 46.275, 46.277 and 46.278.

10 5. Programs other than those under pars (c) and (d) that provide home and
11 community-based services.

12 6. The provision of medical assistance services under a fee-for-service system.

13 (c) Monitor patterns of complaints, grievances and appeals related to
14 long-term care in order to identify issues of statewide importance.

15 (d) Monitor the numbers of persons on waiting lists.

16 (e) Review patterns of utilization of various types of services by care
17 management organizations.

18 (f) Monitor the pattern of care management organization enrollments and
19 disenrollments throughout the state.

20 (g) Report annually to the legislature under s. 13.172 (2) and to the governor
21 on the status, significant achievements and problems of resource centers, care
22 management organizations and the family care benefit, including all of the following:

23 1. Numbers of persons served.

24 2. Costs of long-term care provided under the family care benefit.

1 3. The number and service areas of resource centers and care management
2 organizations.

3 4. Waiting list information.

4 5. Results of reviews of quality of services provided by resource centers and care
5 management organizations.

6 **(2) LOCAL LONG-TERM CARE COUNCILS; APPOINTMENT; MEMBERSHIP; TERMS;**
7 **COMPENSATION AND TRAINING; OFFICERS.** (a) *Appointment by a county.* In a county that
8 participates in a pilot project under s. 46.281 (1) (d) and before a county participates
9 in the program under ss. 46.2805 to 46.2895, the following shall be done:

10 1. The county board of supervisors of the county shall appoint a local long-term
11 care council or the county boards of supervisors of 2 or more contiguous counties shall
12 appoint a local long-term care council, except as follows:

13 a. In a county with a county executive or a county administrator, the county
14 executive or county administrator shall appoint the local long-term care council,
15 other than as provided in subd. 1. b., subject to confirmation by the county board of
16 supervisors.

17 b. If the lands of any tribe or band are located in the county or contiguous
18 counties to be served by a local long-term care council, each tribe or band with these
19 lands shall appoint at least one member of the local long-term care council.

20 2. A county board of supervisors or, in a county with a county executive or a
21 county administrator, the county executive or county administrator shall appoint
22 members of the local long-term care council who are required to be older persons or
23 persons with physical or developmental disabilities or their immediate family
24 members or other representatives from nominations that are submitted to the
25 county board of supervisors or the county executive or county administrator by older

1 persons or persons with physical or developmental disabilities or their immediate
2 family members or other representatives and by local organizations that represent
3 older persons or persons with physical or developmental disabilities.

4 (am) *Appointment by a tribe or band or council.* If a tribe or band or the Great
5 Lakes inter-tribal council, inc., intends to apply for a contract to operate a resource
6 center or for certification as a care management organization, the tribe or band or
7 the council shall, as a condition of the application or the certification appoint a local
8 long-term care council.

9 (b) *Membership.* 1. A local long-term care council that serves a single-county
10 area shall consist of 17 members, at least 9 of whom are older persons or persons with
11 physical or developmental disabilities or their immediate family members or other
12 representatives. The age or disability represented by these 9 members shall
13 correspond to the proportion of numbers of persons, as determined by the
14 department, receiving long-term care in this state who are aged 65 or older or have
15 a physical or developmental disability. The total remaining 8 members shall consist
16 of providers of long-term care services, persons residing in the county with
17 recognized ability and demonstrated interest in long-term care and up to 3 members
18 of the county board of supervisors or other elected officials.

19 2. A local long-term care council that serves an area of 2 or more contiguous
20 counties shall consist of 23 members, at least 12 of whom are older persons or persons
21 with physical or developmental disabilities or their immediate family members or
22 other representatives. The age or disability represented by these 12 members shall
23 correspond to the proportion of numbers of persons, as determined by the
24 department, receiving long-term care in this state who are aged 65 or older or have

1 a physical or developmental disability. The total remaining 11 members shall consist
2 of all of the following:

3 a. Providers of long-term care services.

4 b. Persons residing in the county with recognized ability and demonstrated
5 interest in long-term care.

6 c. Either up to 4 members of the county boards of supervisors or other elected
7 officials or, for a council that serves an area of more than 4 contiguous counties, up
8 to one member of the county board of supervisors of the contiguous counties or up to
9 one other elected official in each contiguous county area.

10 3. A local long-term care council that is appointed by a tribe or band or by the
11 Great Lakes inter-tribal council, inc., shall consist of 21 members, at least 11 of
12 whom are older persons or persons with physical or developmental disabilities or
13 their family members or other representatives. The age or disability represented by
14 these 11 members shall correspond to the proportion of numbers of persons, as
15 determined by the department, receiving long-term care in this state who are aged
16 65 or older or have a physical or developmental disability. The total remaining 10
17 members shall consist of providers of long-term care services, persons residing in the
18 county with recognized ability and demonstrated interest in long-term care and up
19 to 3 members of the governing board of the tribe or band or the Great Lakes
20 inter-tribal council, inc., that appoints the local long-term care council.

21 4. Vacancies in membership in a local long-term care council shall be filled for
22 the residue of the unexpired term in the manner that the original appointments are
23 made. A local long-term care council member may be removed from office for the
24 following reasons:

1 a. For cause, by a two-thirds vote of each county board of supervisors or
2 governing body of a tribe or band participating in the appointment, on due notice in
3 writing and hearing of the charges against the member.

4 b. If the member, when appointed, was a member of the county board of
5 supervisors or was another elected official and was not reelected to that office, on due
6 notice in writing.

7 (c) *Terms.* The members of the local long-term care council appointed under
8 par. (a) shall serve 3-year terms. No member may serve more than 2 consecutive
9 terms. Of the members first appointed under par. (b) 1., 6 shall be appointed for 3
10 years; 6 shall be appointed for 4 years; and 5 shall be appointed for 5 years. Of the
11 members first appointed under par. (b) 2., 8 shall be appointed for 3 years; 8 shall be
12 appointed for 4 years; and 7 shall be appointed for 5 years. Of the members appointed
13 under par. (b) 3., one-third shall be appointed for 3 years; one-third shall be
14 appointed for 4 years; and one-third shall be appointed for 5 years.

15 (d) *Compensation and training.* Members of the local long-term care council
16 who are older persons, persons with physical or developmental disabilities or the
17 family members or other representatives of these persons shall receive compensation
18 from the applicable county for reasonable expenses associated with membership
19 participation. The county board of supervisors or, in the case of a member appointed
20 by the governing body of a tribe or band or by the Great Lakes inter-tribal council,
21 inc., the tribe or band or the Great Lakes inter-tribal council, inc., shall provide
22 training to these members to enable them to participate effectively.

23 (e) *Officers.* At the first meeting of a local long-term care council, members
24 shall elect from their number a chairperson, a secretary and other officers as
25 necessary. Vacancies in these offices shall be filled for the unexpired terms. The

1 chairperson shall preside at all meetings when present and countersign all actions
2 taken by the local long-term care council. In case of the absence of the chairperson
3 for any meeting, the members present shall choose a temporary chairperson.

4 (3) LOCAL LONG-TERM CARE COUNCILS; POWERS AND DUTIES. (a) A local long-term
5 care council shall do all of the following within the council's area:

6 1. Develop the initial plan for the structure of the county, multicounty or tribal
7 resource center and care management organization or organizations, including
8 formulating recommendations to the county board or boards of supervisors and, in
9 a county with a county executive or a county administrator, to the county executive
10 or county administrator, to the governing body of the tribe or band or of the Great
11 Lakes inter-tribal council, inc., if applicable, and to the department on all of the
12 following:

13 a. Whether or not the county, counties, tribe or band or Great Lakes inter-tribal
14 council, inc., should exercise its right to apply under s. 46.283 (1) for a contract to
15 operate a resource center or to apply under s. 46.284 (1) for a contract to operate a
16 care management organization and how the operation should proceed.

17 b. Whether the county should create a family care district to operate a resource
18 center or under a care management organization.

19 c. Whether local organizations other than the county should serve as
20 alternatives or in addition to county-operated entities to operate a resource center
21 or a care management organization and, if so, which organizations should be
22 considered.

23 d. If applicable, how county-operated functions should interact with a resource
24 center or care management organization that is operated by a tribe or band or by the
25 Great Lakes inter-tribal council, inc.

1 2. a. In the years 2000 and 2001, under criteria that the department prescribes,
2 after consulting with the council on long-term care, evaluate the performance of the
3 care management organization or organizations in the area of the local long-term
4 care council and determine whether additional care management organizations are
5 needed in the area and, if so, recommend this to the department.

6 b. In the year 2002 and thereafter, under criteria that the department
7 prescribes, evaluate the performance of the care management organization or
8 organizations in the area of the local long-term care council and determine whether
9 additional care management organizations are needed in the area and, if so
10 recommend this to the department.

11 3. Advise the department regarding applications for initial certification or
12 certification renewal of care management organizations in the area of the local
13 long-term care council, including providing recommendations for organizations
14 applying for certification or recertification, and assist the department in reviewing
15 and evaluating the applications.

16 4. Receive information about and monitor complaints from persons served by
17 the care management organization in the area concerning whether the numbers of
18 providers of long-term care services used by the care management organization are
19 sufficient to ensure convenient and desirable consumer choice and provide
20 recommendations under subd. 3. to the department about this issue.

21 5. Review initial plans and existing provider networks of any care management
22 organization in the area to assist the care management organization in developing
23 a network of service providers that includes a sufficient number of accessible,
24 convenient and desirable services.

1 6. Advise care management organizations about whether to offer optional
2 acute and primary health care services and, if so, how these benefits should be
3 offered.

4 7. Review the utilization of various types of long-term care services by care
5 management organizations in the area.

6 8. Monitor the pattern of enrollments and disenrollments in local care
7 management organizations.

8 9. Identify gaps in services, living arrangements and community resources and
9 develop strategies to build local capacity to serve older persons and persons with
10 physical or developmental disabilities, especially those with long-term care needs.

11 10. Perform long-range planning on policy for older persons and persons with
12 physical or developmental disabilities.

13 11. Annually review interagency agreements between a resource center and
14 care management organization or organizations and make recommendations, as
15 appropriate, on the interaction between the resource center and the care
16 management organization or organizations to assure coordination between or
17 among them.

18 12. Annually review the number and types of complaints and grievances about
19 the long-term care system by persons who receive or may receive care under the
20 system, to determine if a need exists for system changes, and recommend system or
21 other changes if appropriate.

22 13. Identify potential new sources of community resources and funding for
23 needed services for older persons and persons with physical or developmental
24 disabilities.

1 14. Support long-term care system improvements to improve services to older
2 persons and persons with physical or developmental disabilities and their families.

3 15. Annually report to the department and, before July 1, 2001, to the
4 long-term care council concerning significant achievements and problems in the
5 local long-term care system.

6 (b) A local long-term care council may, within the local long-term care council's
7 area, assume the duties of the county long-term community support planning
8 committee as specified under s. 46.27 (4).

9 ***-0030/2.59*** **SECTION 1073.** 46.282 (1) of the statutes, as created by 1999
10 Wisconsin Act (this act), is repealed.

11 ***-0030/2.60*** **SECTION 1074.** 46.283 of the statutes is created to read:

12 **46.283 Resource centers.** (1) APPLICATION FOR CONTRACT. (a) After
13 considering recommendations of the local long-term care council under s. 46.282 (3)
14 (a) 1., a county board of supervisors and, in a county with a county executive or a
15 county administrator, the county executive or county administrator, may decide all
16 of the following:

17 1. Whether to authorize one or more county departments under s. 46.21,
18 46.215, 46.22 or 46.23 or an aging unit under s. 46.82 (1) (a) 1. or 2. to apply to the
19 department for a contract to operate a resource center and, if so, which to authorize
20 and what client group to serve.

21 2. Whether to create a family care district to apply to the department for a
22 contract to operate a resource center.

23 (b) After considering recommendations of the local long-term care council
24 under s. 46.282 (3) (a) 1., the governing body of a tribe or band or of the Great Lakes
25 inter-tribal council, inc., may decide whether to authorize a tribal agency to apply

1 to the department for a contract to operate a resource center for tribal members and,
2 if so, which client group to serve.

3 (c) Under the requirements of par. (a), a county board of supervisors may decide
4 to apply to the department for a contract to operate a multicounty resource center
5 in conjunction with the county board or boards of one or more other counties or a
6 county–tribal resource center in conjunction with the governing body of a tribe or
7 band or the Great Lakes inter–tribal council, inc.

8 (d) Under the requirements of par. (b), the governing body of a tribe or band may
9 decide to apply to the department for a contract to operate a resource center in
10 conjunction with the governing body or governing bodies of one or more other tribes
11 or bands or the Great Lakes inter–tribal council, inc., or with a county board of
12 supervisors.

13 **(2) EXCLUSIVE CONTRACT.** (a) Before July 1, 2001, the department may contract
14 only with a county, a family care district, the governing body of a tribe or band or the
15 Great Lakes inter–tribal council, inc., or with 2 or more of these entities under a joint
16 application, to operate a resource center.

17 (b) After June 30, 2001, the department shall contract with the entities
18 specified under s. 46.281 (1) (d) 1. and may, in addition to contracting with these
19 entities and subject to approval of necessary funding, contract to operate a resource
20 center with counties, family care districts, the governing body of a tribe or band or
21 the Great Lakes inter–tribal council, inc., or under a joint application of any of these,
22 or with a private nonprofit organization if the department determines that the
23 organization has no significant connection to an entity that operates a care
24 management organization and if any of the following applies:

1 1. A county board of supervisors declines in writing to apply for a contract to
2 operate a resource center.

3 2. A county agency or a family care district applies for a contract but fails to
4 meet the standards specified in sub. (3).

5 **(3) STANDARDS FOR OPERATION.** The department shall assure that at least all of
6 the following are available to a person who contacts a resource center for service:

7 (a) Information and referral services and other assistance at hours that are
8 convenient for the public.

9 (b) A determination of functional eligibility for the family care benefit.

10 (c) Within the limits of available funding, prevention and intervention services.

11 (d) Counseling concerning public and private benefits programs.

12 (e) A determination of financial eligibility and of the maximum amount of cost
13 sharing required for a person who is seeking long-term care services, under
14 standards prescribed by the department.

15 (f) Assistance to a person who is eligible for the family care benefit with respect
16 to the person's choice of whether or not to enroll in a care management organization
17 and, if so, which available care management organization would best meet his or her
18 needs.

19 (g) Assistance in enrolling in a care management organization for persons who
20 choose to enroll.

21 (h) Equitable assignment of priority on any necessary waiting lists, consistent
22 with criteria prescribed by the department, for persons who are eligible for the family
23 care benefit but who do not meet the criteria under s. 46.286 (3).

1 (i) Assessment of risk for each person who is on a waiting list, as described in
2 par. (h), development with the person of an interim plan of care and assistance to the
3 person in arranging for services.

4 (j) Transitional services to families whose children with physical or
5 developmental disabilities are preparing to enter the adult service system.

6 (k) A determination of eligibility for state supplemental payments under s.
7 49.77, medical assistance under s. 49.46, 49.468 or 49.47 or the federal food stamp
8 program under 7 USC 2011 to 2029.

9 (4) DUTIES. A resource center shall do all of the following:

10 (a) Provide services within the entire geographic area prescribed for the
11 resource center by the department.

12 (b) Submit to the department all reports and data required or requested by the
13 department.

14 (c) Implement internal quality improvement and quality assurance processes
15 that meet standards prescribed by the department.

16 (d) Cooperate with any review by an external advocacy organization.

17 (e) Within 6 months after the family care benefit is available to all eligible
18 persons in the area of the resource center, provide information about the services of
19 the resource center, including the services specified in sub. (3) (d), about assessments
20 under s. 46.284 (4) (b) and care plans under s. 46.284 (4) (c) and about the family care
21 benefit to all older persons and persons with a physical disability who are residents
22 of nursing homes, community-based residential facilities, adult family homes and
23 residential care apartment complexes in the area of the resource center.

1 (f) Provide a functional and financial screen to any resident, as specified in par.
2 (e), who requests a screen and assist any resident who is eligible and chooses to enroll
3 in a care management organization to do so.

4 (g) Provide a functional and financial screen to any person seeking admission
5 to a nursing home, community-based residential facility, residential care apartment
6 complex or adult family home if the secretary has certified that the resource center
7 is available to the person and the facility and the person is determined by the
8 resource center to have a condition that is expected to last at least 90 days that would
9 require care, assistance or supervision.

10 (h) Provide access to services under s. 46.90 and ch. 55 to a person who is
11 eligible for the services, through cooperation with the county agency or agencies that
12 provide the services.

13 (i) Assure that emergency calls to the resource center are responded to
14 promptly, 24 hours per day.

15 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b), (bm) and
16 (pa) and (7) (b), (bd) and (md), the department may contract with organizations that
17 meet standards under sub. (3) for performance of the duties under sub. (4) and shall
18 distribute funds for services provided by resource centers.

19 (6) GOVERNING BOARD. A resource center shall have a governing board that
20 reflects the ethnic and economic diversity of the geographic area served by the
21 resource center. At least one-fourth of the members of the governing board shall be
22 older persons or persons with physical or developmental disabilities or their family
23 members, guardians or other advocates.

24 (7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s. 19.32
25 (2), of a resource center that contains personally identifiable information, as defined

1 in s. 19.62 (5), concerning an individual who receives services from the resource
2 center may be disclosed by the resource center without the individual's informed
3 consent, except as follows:

4 (a) A resource center may provide information as required to comply with s.
5 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer the
6 program under ss. 46.2805 to 46.2895.

7 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.06
8 (17) (c), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center acting
9 under this section may exchange confidential information about a client, as defined
10 in s. 46.287 (1), without the informed consent of the client, under s. 46.21 (2m) (c),
11 46.215 (1m), 46.22 (1) (dm), 46.23 (3) (e), 46.284 (7), 46.2895 (10), 51.42 (3) (e) or
12 51.437 (4r) (b) in the county of the resource center, if necessary to enable the resource
13 center to perform its duties or to coordinate the delivery of services to the client.

14 ***-0030/2.61* SECTION 1075.** 46.284 of the statutes is created to read:

15 **46.284 Care management organizations. (1) APPLICATION FOR CONTRACT.**

16 (a) After considering recommendations of the local long-term care council under s.
17 46.282 (3) (a) 1., a county board of supervisors and, in a county with a county
18 executive or a county administrator, the county executive or county administrator,
19 may decide all of the following:

20 1. Whether to authorize one or more county departments under s. 46.21,
21 46.215, 46.22 or 46.23 or an aging unit under s. 46.82 (1) (a) 1. or 2. to apply to the
22 department for a contract to operate a care management organization and, if so,
23 which to authorize and what client group to serve.

24 2. Whether to create a family care district to apply to the department for a
25 contract to operate a care management organization.

1 (b) The governing body of a tribe or band or of the Great Lakes inter-tribal
2 council, inc., may decide whether to authorize a tribal agency to apply to the
3 department for a contract to operate a care management organization for tribal
4 members and, if so, which client group to serve.

5 (c) Under the requirements of par. (a), a county board of supervisors may decide
6 to apply to the department for a contract to operate a multicounty care management
7 organization in conjunction with the county board or boards of one or more other
8 counties or a county-tribal care management organization in conjunction with the
9 governing body of a tribe or band or the Great Lakes inter-tribal council, inc.

10 (d) Under the requirements of par. (b), the governing body of a tribe or band may
11 decide to apply to the department for a contract to operate a care management
12 organization in conjunction with the governing body or governing bodies of one or
13 more other tribes or bands or the Great Lakes inter-tribal council, inc., or with a
14 county board of supervisors.

15 (2) CONTRACTS. (a) The department may contract for operation of a care
16 management organization only with an entity that is certified as meeting the
17 requirements under sub. (3). No entity may operate as a care management
18 organization under the requirements of this section unless so certified and under
19 contract with the department.

20 (b) Within each county, the department shall initially contract to operate a care
21 management organization with the county or a family care district if the county
22 elects to operate a care management organization and the care management
23 organization meets the requirements of sub. (3) and performance standards
24 prescribed by the department. A county that contracts under this paragraph may
25 operate the care management organization for all of the target groups or for a

1 selected group or groups. With respect to contracts exclusively with counties to
2 operate a care management organization, all of the following apply:

3 1. Before January 1, 2003, the department may not contract with an
4 organization other than the county to operate a care management organization in
5 the county unless any of the following applies:

6 a. The county and the local long-term care council agree in writing that at least
7 one additional care management organization is necessary or desirable.

8 b. The governing body of a tribe or band or the Great Lakes inter-tribal council,
9 inc., elects to operate a care management organization within the area and is
10 certified under sub. (3).

11 2. After December 31, 2002, and before January 1, 2004, the department may
12 not contract with an organization other than the county to operate a care
13 management organization in the county unless any of the following applies:

14 a. Subdivision 1. a. or b. applies.

15 b. The county fails to meet requirements of sub. (3) and performance standards
16 prescribed by the department.

17 c. The county does not have the capacity to serve all county residents who are
18 entitled to the family care benefit in the client group or groups that the county serves
19 and cannot develop the capacity. If this subd. 2. c. applies, the department may
20 contract with an organization in addition to the county.

21 3. After December 31, 2003, the department may contract with counties, family
22 care districts, the governing body of a tribe or band or the Great Lakes inter-tribal
23 council, inc., or under a joint application of any of these, or with a private nonprofit
24 organization that has no significant connection to an entity that operates a resource
25 center. Proposals for contracts under this subdivision shall be solicited under a

1 competitive sealed proposal process under s. 16.75 (2m) and, after consulting with
2 the local long-term care council for the county or counties, the department shall
3 evaluate the proposals primarily as to the quality of care that is proposed to be
4 provided, certify those applicants that meet the requirements specified in sub. (3) (a),
5 select certified applicants for contract and contract with the selected applicants.

6 (3) CERTIFICATION; REQUIREMENTS. (a) If an entity meets the requirements
7 under par. (b) and applicable rules of the department and submits to the department
8 an application for initial certification or certification renewal, the department shall
9 certify that the entity meets the requirements for a care management organization.
10 An application shall include comments about the applicant and recommendations
11 about the application that are provided by the appropriate local long-term care
12 council, as specified under s. 46.282 (3) (a) 3.

13 (b) To be certified as a care management organization, an applicant shall
14 demonstrate or ensure all of the following:

15 1. Adequate availability of providers with the expertise and ability to provide
16 services that are responsive to the disabilities or conditions of all of the applicant's
17 proposed enrollees and sufficient representation of programmatic philosophies and
18 cultural orientations to accommodate a variety of enrollee preferences and needs.

19 2. Adequate availability of providers that can meet the preferences and needs
20 of its proposed service recipients for services at various times, including evenings,
21 weekends and, when applicable, on a 24-hour basis.

22 3. Adequate availability of providers that are able and willing to perform all
23 of the tasks that are likely to be identified in proposed enrollees' service and care
24 plans.

1 4. Adequate availability of residential and day services that are geographically
2 accessible to proposed enrollees' homes, families or friends.

3 5. Adequate supported living arrangements of the types and sizes that meet
4 proposed enrollees' preference and needs.

5 6. Expertise in determining and meeting the needs of every target population
6 that the applicant proposes to serve and connections to the appropriate service
7 providers.

8 7. Thorough knowledge of local long-term care and other community resources.

9 8. The ability to manage and deliver, either directly or through subcontracts
10 or partnerships with other organizations, the full range of benefits to be included in
11 the monthly payment amount.

12 9. Thorough knowledge of methods for maximizing informal caregivers and
13 community resources and integrating them into a service or care plan.

14 10. Coverage for a geographic area specified by the department.

15 11. The ability to develop strong linkages with systems and services that are
16 not directly within the scope of the applicant's responsibility but that are important
17 to the target group that it proposes to serve, including primary and acute health care
18 services.

19 12. Adequate and competent staffing by qualified personnel to perform all of
20 the functions that the applicant proposes to undertake.

21 **(4) DUTIES.** A care management organization shall, in addition to meeting all
22 contract requirements, do all of the following:

23 (a) Accept requested enrollment of any person who is entitled to the family care
24 benefit and of any person who is eligible for the family care benefit and for whom
25 funding is available. No care management organization may disenroll any enrollee,

1 except under circumstances specified by the department by contract. No care
2 management organization may encourage any enrollee to disenroll in order to obtain
3 long-term care services under the medical assistance fee-for-service system. No
4 involuntary disenrollment is effective unless the department has reviewed and
5 approved it.

6 (b) Conduct a comprehensive assessment for each enrollee, including an
7 in-person interview with the enrollee, using a standard format developed by the
8 department.

9 (c) With the enrollee and the enrollee's family or guardian, if appropriate,
10 develop a comprehensive care plan that reflects the enrollee's values and
11 preferences.

12 (d) Provide or contract for the provision of necessary services and monitor the
13 provided or contracted services.

14 (e) Provide, within guidelines established by the department, a mechanism by
15 which an enrollee may arrange for, manage and monitor his or her family care benefit
16 directly or with the assistance of another person chosen by the enrollee. The care
17 management organization shall monitor the enrollee's use of a fixed budget for
18 purchase of services or support items from any qualified provider, monitor the health
19 and safety of the enrollee and provide assistance in management of the enrollee's
20 budget and services at a level tailored to the enrollee's need and desire for the
21 assistance.

22 (f) Provide, on a fee-for-service basis, case management services to persons
23 who are functionally eligible but not financially eligible for the family care benefit.

24 (g) Meet all performance standards required by the federal government or
25 promulgated by the department by rule.

1 (h) Submit to the department reports and data required or requested by the
2 department.

3 (i) Implement internal quality improvement and assurance processes that
4 meet standards prescribed by the department by rule.

5 (j) Cooperate with external quality assurance reviews.

6 (k) Meet departmental requirements for protection of solvency.

7 (L) Annually submit to the department an independent financial audit that
8 meets federal requirements.

9 (5) FUNDING AND RISK-SHARING. (a) From the appropriation accounts under s.
10 20.435 (4) (b), (g) and (o) and (7) (b) and (bd), the department shall provide funding
11 on a capitated payment basis for the provision of services under this section.
12 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
13 under contract with the department may expend the funds, consistent with this
14 section, including providing payment, on a capitated basis, to providers of services
15 under the family care benefit.

16 (b) If the expenditures by a care management organization under par. (a)
17 exceed payments received from the department under par. (a), as determined by the
18 department by contract, the department may share the loss with the care
19 management organization, within the limits prescribed under the contract with the
20 department.

21 (c) If the payments received from the department under par. (a) exceed the
22 expenditures by a care management organization under par. (a), as determined by
23 the department by contract, the care management organization may retain a portion
24 of the excess payments, within the limits prescribed under the contract with the
25 department, and shall return the remainder to the department.

1 (d) The department may, by contract, impose solvency protections that the
2 department determines are reasonable and necessary to retain federal financial
3 participation. These protections may include all of the following:

4 1. The requirement that a care management organization segregate a risk
5 reserve from other funds of the care management organization or the authorizing
6 body for the care management organization.

7 2. The requirement that interest accruing to the risk reserve remain in the
8 escrow account for the risk reserve.

9 3. Limitations on the distribution of funds from the risk reserve.

10 4. The requirement that a care management organization place funds in a risk
11 reserve and maintain the risk reserve in an interest-bearing escrow account with a
12 financial institution, as defined in s. 69.30 (1) (b), or invest funds as specified in s.
13 46.2895 (4) (j) 2. or 3. Moneys in the risk reserve or invested as specified in this
14 subdivision may be expended only for the provision of services under this section.
15 If a care management organization ceases participation under this section, the funds
16 in the risk reserve or invested as specified in this subdivision, minus any
17 contribution of moneys other than those specified in par. (c), shall be returned to the
18 department. The department shall expend the moneys for the payment of
19 outstanding debts to providers of family care benefit services and for the
20 continuation of family care benefit services to enrollees.

21 (e) 1. Subject to subd. 2., a care management organization may enter into
22 contracts with providers of family care benefit services and may limit profits of the
23 providers under the contracts.

24 2. The department shall review the contracts in subd. 1., including rates for the
25 provision of service, to ensure that the contract terms protect services access by

1 enrollees and financial viability of the care management organization, and may
2 require contract revision.

3 (6) GOVERNING BOARD. A care management organization shall have a governing
4 board that reflects the ethnic and economic diversity of the geographic area served
5 by the care management organization. At least one-fourth of the members of the
6 governing board shall be older persons or persons with physical or developmental
7 disabilities or their family members, guardians or other advocates who are
8 representative of the care management organization's enrollee.

9 (7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s. 19.32
10 (2), of a care management organization that contains personally identifiable
11 information, as defined in s. 19.62 (5), concerning an individual who receives services
12 from the care management organization may be disclosed by the care management
13 organization without the individual's informed consent, except as follows:

14 (a) A care management organization may provide information as required to
15 comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to
16 administer the program under ss. 46.2805 to 46.2895.

17 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.06
18 (17) (c), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a care management
19 organization acting under this section may exchange confidential information about
20 a client, as defined in s. 46.287 (1), without the informed consent of the client, under
21 s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm), 46.23 (3) (e), 46.283 (7), 46.2895 (10),
22 51.42 (3) (e) or 51.437 (4r) (b) in the county of the care management organization, if
23 necessary to enable the care management organization to perform its duties or to
24 coordinate the delivery of services to the client.

25 *-0030/2.63* SECTION 1077. 46.285 of the statutes is created to read:

1 **46.285 Operation of resource center and care management**

2 **organization.** (1) In order to meet federal requirements and assure federal
3 financial participation in funding of the family care benefit, a county, a tribe or band,
4 a family care district or an organization, including a private, nonprofit corporation,
5 may not directly operate both a resource center and a care management
6 organization, except as follows:

7 (a) For a pilot project established under s. 46.281 (1) (d) 2., provision of the
8 services specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate
9 from the provision of services of the care management organization by January 1,
10 2001.

11 (b) The department may approve separation of the functions of a resource
12 center from those of a care management organization by a means other than those
13 specified in sub. (2).

14 (2) Except as provided in sub. (1), all of the following apply to operation of both
15 a resource center and a care management organization:

16 (a) 1. If a county board of supervisors and, if applicable, a county executive or
17 a county administrator, elect to apply to the department for a contract to operate a
18 resource center, the county board of supervisors may create a family care district to
19 apply to the department for a contract to operate a care management organization.

20 2. If a county board of supervisors and, if applicable, a county executive or a
21 county administrator, elect to apply to the department for a contract to operate a care
22 management organization, the county board of supervisors may create a family care
23 district to apply to the department to operate a resource center.

24 (b) 1. If the governing body of a tribe or band elects to apply to the department
25 for a contract directly to operate a resource center, tribal or band members may form

1 a separate corporation to apply to the department for a contract to operate a care
2 management organization. No members of the governing board of the corporation
3 may be members of the tribal or band governing body.

4 2. If the governing body of a tribe or band elects to apply to the department for
5 a contract directly to operate a care management organization, tribal or band
6 members may form a separate corporation to apply to the department for a contract
7 to operate a resource center. No members of the governing board of the corporation
8 may be members of the tribal or band governing body.

9 (c) Any county or family care district that seeks to operate jointly with a tribe
10 or band or tribal or band corporation a care management organization or resource
11 center shall submit jointly with the tribe or band or tribal or band corporation an
12 application to the department to operate the care management organization or
13 resource center.

14 *~~0030/2.64~~* SECTION 1078. 46.286 of the statutes is created to read:

15 **46.286 Family care benefit.** (1) ELIGIBILITY. Except as provided in sub. (1m),
16 a person is eligible for, but not necessarily entitled to, the family care benefit if the
17 person is at least 18 years of age; has a physical disability, as defined in s. 15.197 (4)
18 (a) 2., or infirmities of aging, as defined in s. 55.01 (3); and meets all of the following
19 criteria:

20 (a) *Functional eligibility.* A person is functionally eligible if any of the following
21 applies, as determined by the department or its designee:

22 1. The person's functional capacity is at either of the following levels:

23 a. The comprehensive level, if the person has a long-term or irreversible
24 condition, expected to last at least 90 days or result in death within one year of the
25 date of application, and requires ongoing care, assistance or supervision.

1 b. The intermediate level, if the person has a condition that is expected to last
2 at least 90 days or result in death within 12 months after the date of application, and
3 is at risk of losing his or her independence or functional capacity unless he or she
4 receives assistance from others.

5 2. The person has a condition that is expected to last at least 90 days or result
6 in death within 12 months after the date of application and, on the date that the
7 family care benefit became available in the person's county of residence, the person
8 was a resident in a nursing home or had been receiving for at least 60 days, under
9 a written plan of care, long-term care services, as specified by the department, which
10 were funded under any of the following:

11 a. The long-term support community options program under s. 46.27.

12 b. Home and community-based waiver programs under 42 USC 1396n (c),
13 including community integration program under s. 46.275, 46.277 or 46.278.

14 c. The Alzheimer's family caregiver support program under s. 46.87.

15 d. Community aids under s. 46.40, if documented by the county under a method
16 prescribed by the department.

17 e. County funding, if documented by the county under a method prescribed by
18 the department.

19 (b) *Financial eligibility.* A person is financially eligible if all of the following
20 apply:

21 1. As determined by the department or its designee, either of the following
22 applies:

23 a. The person would qualify for medical assistance except for financial or
24 disability criteria, and the projected cost of the person's care plan, as calculated by
25 the department or its designee, exceeds the person's gross monthly income, plus

1 one-twelfth of his or her countable assets, less deductions and allowances permitted
2 by rule by the department.

3 b. The person is eligible under ch. 49 for medical assistance.

4 2. If subd. 1. b. applies, the person accepts medical assistance unless he or she
5 is exempt from the acceptance under rules promulgated by the department.

6 **(1m) ELIGIBILITY EXCEPTION.** A person whose primary disabling condition is
7 developmental disability is eligible for the family care benefit if the person is a
8 resident of a county or is a member of a tribe or band that has operated, before July
9 1, 2001, a care management organization under s. 46.281 (1) (d) and meets all other
10 eligibility criteria under this subsection.

11 **(2) COST SHARING.** (a) A person who is determined to be financially eligible
12 under sub. (1) (b) shall contribute to the cost of his or her care an amount that is
13 calculated by the department or its designee after subtracting from the person's
14 gross income, plus one-twelfth of countable assets, the deductions and allowances
15 permitted by the department by rule.

16 (b) Funds received under par. (a) shall be used by a care management
17 organization to pay for services under the family care benefit.

18 (c) A person who is required to contribute to the cost of his or her care but who
19 fails to make the required contributions is ineligible for the family care benefit unless
20 he or she is exempt from the requirement under rules promulgated by the
21 department.

22 **(3) ENTITLEMENT.** (a) Subject to pars. (c) and (d), a person is entitled to and may
23 receive the family care benefit through enrollment in a care management
24 organization if he or she meets the requirements of sub. (1) (intro.), is financially

1 eligible, fulfills any applicable cost-sharing requirements and meets any of the
2 following criteria:

3 1. Is functionally eligible at the comprehensive level.

4 2. Is functionally eligible at the intermediate level and is eligible under sub. (1)
5 (b) 1. b.

6 3. Is functionally eligible at the intermediate level and is determined by an
7 agency under s. 46.90 (2) or specified in s. 55.05 (1t) to be in need of protective services
8 under s. 55.05 or protective placement under s. 55.06.

9 4. Is functionally eligible under sub. (1) (a) 2.

10 5. Is eligible under sub. (1m).

11 (b) An entitled individual who is enrolled in a care management organization
12 may not be involuntarily disenrolled except as follows:

13 1. For cause, subject to the requirements of s. 46.284 (4) (a).

14 2. If the contract between the care management organization and the
15 department is canceled or not renewed. If this circumstance occurs, the department
16 shall assure that enrollees continue to receive needed services through another care
17 management organization or through the medical assistance fee-for-service system
18 or any of the programs specified under sub. (1) (a) 2. a. to d.

19 3. The department or its designee determines that the person no longer meets
20 eligibility criteria under sub. (1).

21 (c) Within each county and for each client group, par. (a) shall first apply on the
22 effective date of a contract under which a care management organization accepts a
23 per person per month payment to provide services under the family care benefit to
24 eligible persons in that client group in the county. Within 24 months after this date,
25 the department shall assure that sufficient capacity exists within one or more care

1 management organizations to provide the family care benefit to all entitled persons
2 in that client group in the county.

3 (d) The department shall determine the date, which shall not be later than July
4 1, 2000, on which par. (a) shall first apply to persons who are not eligible for medical
5 assistance under ch. 49.

6 (4) DIVESTMENT; RULES. The department shall promulgate rules relating to
7 prohibitions on divestment of assets of persons who receive the family care benefit,
8 that are substantially similar to applicable provisions under s. 49.453.

9 (5) TREATMENT OF TRUST AMOUNTS; RULES. The department shall promulgate
10 rules relating to treatment of trust amounts of persons who receive the family care
11 benefit, that are substantially similar to applicable provisions under s. 49.454.

12 (6) PROTECTION OF INCOME AND RESOURCES OF COUPLE FOR MAINTENANCE OF
13 COMMUNITY SPOUSE; RULES. The department shall promulgate rules relating to
14 protection of income and resources of couples for the maintenance of the spouse in
15 the community with regard to persons who receive the family care benefit, that are
16 substantially similar to applicable provisions under s. 49.455.

17 (7) RECOVERY OF FAMILY CARE BENEFIT PAYMENTS; RULES. The department shall
18 promulgate rules relating to the recovery from persons who receive the family care
19 benefit, including by liens and from estates, of correctly and incorrectly paid family
20 care benefits, that are substantially similar to applicable provisions under ss. 49.496
21 and 49.497.

22 *~~0030/2.65~~* SECTION 1079. 46.287 of the statutes is created to read:

23 **46.287 Hearings.** (1) DEFINITION. In this section, "client" means a person
24 applying for eligibility for the family care benefit, an eligible person or an enrollee.

1 (2) HEARING. (a) 1. Except as provided in subd. 2., a client may contest any of
2 the following applicable matters by filing, within 45 days of the failure of a resource
3 center or care management organization to act on the contested matter within the
4 time frames specified by rule by the department or within 45 days after receipt of
5 notice of a decision in a contested matter, a written request for a hearing under s.
6 227.44 to the division of hearings and appeals created under s. 15.103 (1):

7 a. Denial of eligibility under s. 46.286 (1) or (1m).

8 b. Determination of cost sharing under s. 46.286 (2).

9 c. Denial of entitlement under s. 46.286 (3).

10 d. Failure to provide timely services and support items that are included in the
11 plan of care.

12 e. Reduction of services or support items under the family care benefit.

13 f. Development of a plan of care that is unacceptable because the plan of care
14 requires the enrollee to live in a place that is unacceptable to the enrollee or the plan
15 of care provides care, treatment or support items that are insufficient to meet the
16 enrollee's needs, are unnecessarily restrictive or are unwanted by the enrollee.

17 g. Termination of the family care benefit.

18 h. Imposition of ineligibility for the family care benefit under s. 46.286 (4).

19 i. Denial of eligibility or reduction of the amounts of the family care benefit
20 under s. 46.286 (5).

21 j. Determinations similar to those specified under s. 49.455 (8) (a), made under
22 s. 46.286 (6).

23 k. Recovery of family care benefit payments under s. 46.286 (7).

1 2. An applicant for or recipient of medical assistance is not entitled to a hearing
2 concerning the identical dispute or matter under both this section and 42 CFR
3 431.200 to 431.246.

4 (b) An enrollee may contest a decision, omission or action of a care management
5 organization other than those specified in par. (a), or may contest the choice of service
6 provider. In these instances, the enrollee shall first send a written request for review
7 by the unit of the department that monitors care management organization
8 contracts. This unit shall review and attempt to resolve the dispute. If the dispute
9 is not resolved to the satisfaction of the enrollee, he or she may request a hearing
10 under the procedures specified in par. (a) 1. (intro.).

11 (c) Information regarding the availability of advocacy services and notice of
12 adverse actions taken and appeal rights shall be provided to a client by the resource
13 center or care management organization in a form and manner that is prescribed by
14 the department by rule.

15 *~~0030/2.66~~* SECTION 1080. 46.288 of the statutes is created to read:

16 **46.288 Rule-making.** The department shall promulgate as rules all of the
17 following:

18 (1) Standards for performance by resource centers and for certification of care
19 management organizations, including requirements for maintaining quality
20 assurance and quality improvement.

21 (2) Criteria and procedures for determining functional eligibility under s.
22 46.286 (1) (a), financial eligibility under s. 46.286 (1) (b), cost sharing under s. 46.286
23 (2) (a) and entitlement under s. 46.286 (3). The rules for determining functional
24 eligibility under s. 46.286 (1) (a) 1. a. shall be substantially similar to eligibility
25 criteria for receipt of the long-term support community options program under s.

1 46.27. Rules under this subsection shall include definitions of the following terms
2 applicable to s. 46.286:

3 (a) "Primary disabling condition".

4 (b) "Mental illness".

5 (c) "Substance abuse".

6 (d) "Long-term or irreversible".

7 (e) "Requires ongoing care, assistance or supervision".

8 (f) "Condition that is expected to last at least 90 days or result in death within
9 one year".

10 (g) "At risk of losing independence or functional capacity".

11 (h) "Gross monthly income".

12 (i) "Deductions and allowances".

13 (j) "Countable assets".

14 (3) Procedures and standards for procedures for s. 46.287 (2), including time
15 frames for action by a resource center or a care management organization on a
16 contested matter.

17 *-0030/2.67* SECTION 1081. 46.289 of the statutes is created to read:

18 **46.289 Transition.** In order to facilitate the transition to the long-term care
19 system specified in ss. 46.2805 to 46.2895, within the limits of applicable federal
20 statutes and regulations and if the secretary of health and family services finds it
21 necessary, he or she may grant a county limited waivers to or exemptions from ss.
22 46.27 (3) (e) (intro.), 1. and 2. and (f), (5) (d) and (e), (6) (a) 1., 2. and 3. and (b) (intro.),
23 1. and 2., (6r) (c), (7) (b), (cj) and (cm) and (11) (c) 5m. (intro.) and 6. and 46.277 (3)
24 (a), (4) (a) and (5) (d) 1m., 1n. and 2. and rules promulgated under those provisions.

25 *-0030/2.68* SECTION 1082. 46.2895 of the statutes is created to read:

1 **46.2895 Family care district.** (1) CREATION. (a) After considering
2 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
3 county board of supervisors may create a special purpose district that is termed a
4 “family care district”, that is a local unit of government, that is separate and distinct
5 from, and independent of, the state and the county, and that has the powers and
6 duties specified in this section, if the county board does all of the following:

7 1. Adopts an enabling resolution that does all of the following:

8 a. Declares the need for establishing the family care district.

9 b. Specifies the family care district’s primary purpose, which shall be to
10 operate, under contract with the department, either a resource center under s.
11 46.283 or a care management organization under s. 46.284, but not both.

12 2. Files copies of the enabling resolution with the secretary of administration,
13 the secretary of health and family services and the secretary of revenue.

14 (b) The county boards of supervisors of 2 or more counties may together create
15 a family care district with the attributes specified in par. (a) (intro.) on a multicounty
16 basis within the counties if the county boards of supervisors comply with the
17 requirements of par. (a) 1. and 2.

18 (2) JURISDICTION. A family care district’s jurisdiction is the geographical area
19 of the county or counties of the county board or boards of supervisors who created the
20 family care district.

21 (3) FAMILY CARE DISTRICT BOARD. (a) 1. The county board of supervisors of a
22 county or, in a county with a county administrator or county executive, the county
23 administrator or county executive shall appoint the members of the family care
24 district board, which is the governing board of a family care district under sub. (1)

25 (a).

1 2. The county boards of supervisors of 2 or more counties shall appoint the
2 members of the family care district board, which is the governing board of the family
3 care district under sub. (1)(b). Each county board shall appoint members in the same
4 proportion that the county's population represents to the total population of all of the
5 counties that constitute the jurisdiction of the family care district.

6 (b) 1. The family care district board appointed under par. (a) 1. shall consist of
7 15 persons who are residents of the area of jurisdiction of the family care district.
8 At least one-fourth of the members shall be representative of the client group or
9 groups whom it is the family care district's primary purpose to serve or those clients'
10 family members, guardians or other advocates.

11 2. The family care district board appointed under par. (a) 2. shall consist of an
12 odd number of members that is at least 15 but not more than 21 persons, all of whom
13 are residents of the area of jurisdiction of the family care district. At least one-fourth
14 of the members shall be representative of the client group or groups whom it is the
15 family care district's primary purpose to serve or those clients' family members,
16 guardians or other advocates.

17 3. Membership of the family care district board under subd. 1. or 2. shall reflect
18 the ethnic and economic diversity of the area of jurisdiction of the family care district.
19 Up to one-fourth of the members of the board may be elected or appointed officials
20 or employes of the county or counties that created the family care district. No
21 member of the board may have a private financial interest in or profit directly or
22 indirectly from any contract or other business of the family care district.

23 (c) The members of the family care district board appointed under par. (a) shall
24 serve 3-year terms. No member may serve more than 2 consecutive terms. Of the
25 members first appointed, 5 shall be appointed for 3 years; 5 shall be appointed for

1 4 years; and 5 or, in the case of a board appointed under par. (b) 2., the remainder,
2 shall be appointed for 5 years. A member shall serve until his or her successor is
3 appointed, unless removed for cause under s. 17.13.

4 (d) As soon as possible after the appointment of the initial members of the
5 family care district board, the board shall organize for the transaction of business
6 and elect a chairperson and other necessary officers. Each chairperson shall be
7 elected by the board from time to time for the term of that chairperson's office as a
8 member of the board or for the term of 3 years, whichever is shorter, and shall be
9 eligible for reelection. A majority of the board shall constitute a quorum. The board
10 may act based on the affirmative vote of a majority of a quorum.

11 (4) POWERS. Subject to sub. (1)(a) 1. b., a family care district has all the powers
12 necessary or convenient to carry out the purposes and provisions of ss. 46.2805 to
13 46.2895. In addition to all these powers, a family care district may do all of the
14 following:

15 (a) Adopt and alter, at pleasure, an official seal.

16 (b) Adopt bylaws and policies and procedures for the regulation of its affairs
17 and the conduct of its business. The bylaws, policies and procedures shall be
18 consistent with ss. 46.2085 to 46.2895 and, if the family care district contracts with
19 the department under par. (d), with the terms of that contract.

20 (c) Sue and be sued.

21 (d) Negotiate and enter into leases or contracts, including a contract with the
22 department to operate either a resource center or a portion of its functions under s.
23 46.283 or a care management organization under s. 46.284, but not both a resource
24 center or its functions and a care management organization.

1 (e) Provide services related to services available under the family care benefit,
2 to older persons and persons with disabilities, in addition to the services funded
3 under the contract with the department that is specified under par. (d).

4 (f) Acquire, construct, equip, maintain, improve or manage a resource center
5 under s. 46.283 or a care management organization under s. 46.284, but not both.

6 (g) Subject to sub. (8), employ any agent, employe or special adviser that the
7 family care district finds necessary, fix and regulate his or her compensation and
8 provide, either directly or subject to an agreement under s. 66.30 as a participant in
9 a benefit plan of another governmental entity, any employe benefits, including an
10 employe pension plan.

11 (h) Mortgage, pledge or otherwise encumber the family care district's property
12 or funds.

13 (i) Buy, sell or lease property, including real estate, and maintain or dispose of
14 the property.

15 (j) Invest any funds not required for immediate disbursement in any of the
16 following:

17 1. An interest-bearing escrow account with a financial institution, as defined
18 in s. 69.30 (1) (b).

19 2. Time deposits in any financial institution, as defined in s. 69.30 (1) (b), if the
20 time deposits mature in not more than 2 years.

21 3. Bonds or securities issued or guaranteed as to principal and interest by the
22 federal government or by a commission, board or other instrumentality of the federal
23 government.

1 (k) Create a risk reserve or other special reserve as the family care district
2 board desires or as the department requires under the contract with the department
3 that is specified under par. (d).

4 (L) Accept aid, including loans, to accomplish the purpose of the family care
5 district from any local, state or federal governmental agency or accept gifts, loans,
6 grants or bequests from individuals or entities, if the conditions under which the aid,
7 loan, gift, grant or bequest is furnished are not in conflict with this section.

8 (m) Make and execute other instruments necessary or convenient to exercise
9 the powers of the family care district.

10 (5) LIMITATION ON POWERS. A family care district may not issue bonds or levy
11 a tax or assessment.

12 (6) DUTIES. The family care district board shall do all of the following:

13 (a) Appoint a director, who shall hold office at the pleasure of the board.

14 (b) Subject to sub. (8), develop and implement a personnel structure and other
15 employment policies for employes of the family care district.

16 (c) Assure compliance with the terms of any contract with the department
17 under sub. (4) (d).

18 (d) Establish a fiscal operating year and annually adopt a budget for the family
19 care district.

20 (e) Contract for any legal services required for the family care district.

21 (f) Subject to sub. (8), procure liability insurance covering its officers, employes
22 and agents, insurance against any loss in connection with its property and other
23 assets and other necessary insurance; establish and administer a plan of
24 self-insurance; or, subject to an agreement under s. 66.30, participate in a
25 governmental plan of insurance or self-insurance.

1 (7) **DIRECTOR; DUTIES.** The director appointed under sub. (6) (a) shall do all of
2 the following:

3 (a) Manage the property and business of the family care district and manage
4 the employes of the district, subject to the general control of the family care district
5 board.

6 (b) Comply with the bylaws and direct enforcement of all policies and
7 procedures adopted by the family care district board.

8 (c) Perform duties in addition to those specified in pars. (a) and (b) as are
9 prescribed by the family care district board.

10 (8) **EMPLOYMENT AND EMPLOYEE BENEFITS OF CERTAIN EMPLOYES.** (a) A family care
11 district board shall do all of the following:

12 1. If the family care district offers employment to any individual who was
13 previously employed by the county, who while employed by the county performed
14 duties relating to the same or a substantially similar function for which the
15 individual is offered employment by the district and whose wages, hours and
16 conditions of employment were established in a collective bargaining agreement
17 with the county under subch. IV of ch. 111 that is in effect on the date that the
18 individual commences employment with the district, with respect to that individual,
19 abide by the terms of the collective bargaining agreement concerning the individual's
20 compensation and benefits until the time of the expiration of that collective
21 bargaining agreement or adoption of a collective bargaining agreement with the
22 district under subch. IV of ch. 111 covering the individual as an employe of the
23 district, whichever occurs first.

24 2. If the family care district offers employment to any individual who was
25 previously employed by the county and who while employed by the county performed

1 duties relating to the same or a substantially similar function for which the
2 individual is offered employment by the district, but whose wages, hours and
3 conditions of employment were not established in a collective bargaining agreement
4 with the county under subch. IV of ch. 111 that is in effect on the date the individual
5 commences employment with the district, with respect to that individual, initially
6 provide that individual the same compensation and benefits that he or she received
7 while employed by the county.

8 3. If the family care district offers employment to any individual who was
9 previously employed by the county and who while employed by the county performed
10 duties relating to the same or a substantially similar function for which the
11 individual is offered employment by the district, with respect to that individual,
12 recognize all years of service with the county for any benefit provided or program
13 operated by the district for which an employee's years of service may affect the
14 provision of the benefit or the operation of the program.

15 4. If the county has not established its own retirement system for county
16 employees, adopt a resolution that the family care district be included within the
17 provisions of the Wisconsin retirement system under s. 40.21 (1). In this resolution,
18 the family care district shall agree to recognize 100% of the prior creditable service
19 of its employees earned by the employees while employed by the district.

20 (b) The county board of supervisors of the area of jurisdiction of the family care
21 district shall do all of the following:

22 1. If the county has established its own retirement system for county employees,
23 provide that family care district employees are eligible to participate in the county
24 retirement system.

1 2. Provide that, subject to the terms of any applicable collective bargaining
2 agreement as provided in par. (a) 1., family care district employes are eligible to
3 receive health care coverage under any county health insurance plan that is offered
4 to county employes.

5 3. Provide that, subject to the terms of any applicable collective bargaining
6 agreement as provided in par. (a) 1., family care district employes are eligible to
7 participate in any deferred compensation or other benefit plan offered by the county
8 to county employes, including disability and long-term care insurance coverage and
9 income continuation insurance coverage.

10 **(9) CONFIDENTIALITY OF RECORDS.** No record, as defined in s. 19.32 (2), of a family
11 care district that contains personally identifiable information, as defined in s. 19.62
12 (5), concerning an individual who receives services from the family care district may
13 be disclosed by the family care district without the individual's informed consent,
14 except as required to comply with s. 16.009 (2) (p) or 49.45 (4).

15 **(10) EXCHANGE OF INFORMATION.** Notwithstanding sub. (9) and ss. 48.78 (2) (a),
16 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.06 (17) (c), 146.82, 252.11 (7), 253.07 (3) (c)
17 and 938.78 (2) (a), a family care district acting under this section may exchange
18 confidential information about a client, as defined in s. 46.287 (1), without the
19 informed consent of the client, under s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm),
20 46.23 (3) (e), 46.283 (7), 46.284 (7), 51.42 (3) (e) or 51.437 (4r) (b) in the jurisdiction
21 of the family care district, if necessary to enable the family care district to perform
22 its duties or to coordinate the delivery of services to the client.

23 **(11) OBLIGATIONS AND DEBTS NOT THOSE OF COUNTY.** The obligations and debts
24 of the family care district are not the obligations or debts of the county that created
25 the family care district.

1 (12) ASSISTANCE TO FAMILY CARE DISTRICT. From moneys in the county treasury
2 that are not appropriated to some other purpose, the county board of supervisors
3 under sub. (1) (a) or the county boards of supervisors under sub. (1) (b) may
4 appropriate moneys to the family care district as a gift or may lend moneys to the
5 family care district.

6 (13) DISSOLUTION. Subject to the performance of the contractual obligations of
7 a family care district and if first approved by the secretary of the department, the
8 family care district may be dissolved by the joint action of the family care district
9 board and county board of supervisors under sub. (1) (a) or the county boards of
10 supervisors under sub. (1) (b) that created the family care district. If the family care
11 district is dissolved, the property of the district shall be transferred to the county
12 board of supervisors that created the family care district except as follows:

13 (a) If the family care district was created under sub. (1) (b), the county boards
14 of supervisors shall agree on the apportioning of the family care district's property
15 before the district may be dissolved.

16 (b) If the family care district operates a care management organization under
17 s. 46.284, disposition of any remaining funds in the risk reserve under s. 46.284 (5)
18 (e) shall be made under the terms of the district's contract with the department.

19 *~~0027/5.20~~* SECTION 1083. 46.29 (1) (intro.) of the statutes is amended to
20 read:

21 46.29 (1) (intro.) From the appropriation under s. 20.435 (6) ~~(d)~~ (a), the
22 department shall allocate up to \$10,000 in each fiscal year for operation of the council
23 on physical disabilities. The council on physical disabilities shall do all of the
24 following:

25 *~~0275/5.1~~* SECTION 1084. 46.40 (1) (a) of the statutes is amended to read:

1 46.40 (1) (a) Within the limits of available federal funds and of the
2 appropriations under s. 20.435 (3) (o) and (7) (b), (kw) and (o), the department shall
3 distribute funds for community social, mental health, developmental disabilities and
4 alcohol and other drug abuse services and for services under ss. 46.51, 46.87, 46.985
5 and 51.421 to county departments under ss. 46.215, 46.22, 46.23, 51.42 and 51.437
6 and to county aging units, as provided in subs. (2), (2m) and (7) to ~~(8)~~ (9).

7 ***b0551/3.1* SECTION 1084m.** 46.40 (1) (am) of the statutes is created to read:

8 46.40 (1) (am) In distributing funds for alcohol and other drug abuse treatment
9 programs, the department shall ensure that federal funds received by the
10 department, either directly or indirectly, under the temporary assistance for needy
11 families block grant under 42 USC 601 et. seq., that are allocated for alcohol and
12 other drug abuse treatment programs are distributed only for alcohol and other drug
13 abuse treatment programs that serve individuals who are eligible for temporary
14 assistance for needy families under 42 USC 601 et. seq.

15 ***-0275/5.2* SECTION 1086.** 46.40 (2) of the statutes is amended to read:

16 46.40 (2) BASIC COUNTY ALLOCATION. For Subject to sub. (9), for social services
17 under s. 46.495 (1) (d) and services under s. 51.423 (2), the department shall
18 distribute not more than ~~\$285,081,000~~ \$283,778,800 for fiscal year ~~1997-98~~
19 1999-2000 and ~~\$284,948,500~~ \$279,886,800 for fiscal year ~~1998-99~~ 2000-01.

20 ***-0275/5.3* SECTION 1087.** 46.40 (2m) (a) of the statutes is amended to read:

21 46.40 (2m) (a) *Prevention and treatment of substance abuse.* For prevention
22 and treatment of substance abuse under 42 USC 300x-21 to 300x-35, the
23 department shall distribute not more than ~~\$10,493,900 in fiscal year 1997-98 and~~
24 ~~not more than \$10,224,100 in fiscal year 1998-99~~ \$11,318,700 in each fiscal year.

25 ***-0275/5.4* SECTION 1088.** 46.40 (8) of the statutes is amended to read:

1 46.40 (8) ALZHEIMER'S FAMILY AND CAREGIVER SUPPORT ALLOCATION. ~~For~~ Subject
2 to sub. (9), for services to persons with Alzheimer's disease and their caregivers
3 under s. 46.87, the department shall distribute not more than \$1,877,000 for each
4 fiscal year.

5 ***-0275/5.5*** SECTION 1089. 46.40 (9) of the statutes is created to read:

6 46.40 (9) TRANSFER OR ADJUSTMENT OF COMMUNITY AIDS ALLOCATIONS. (a)
7 *Transfer to family care program and adult protective services allocation.* If a care
8 management organization under s. 46.285 is available in a county, the department
9 may dispose of the amount allocated under sub. (8) to that county and not more than
10 21.3% of the amount allocated under sub. (2) to that county as follows:

11 1. By transferring a portion of those amounts, as determined by the
12 department, to the family care program to fund the services of resource centers under
13 s. 46.283 (5) and the services of care management organizations under s. 46.284 (4).

14 2. By transferring a portion of those amounts, as determined by the
15 department, to the county's adult protective services allocation under par. (b).

16 (b) *Adult protective services allocation.* For adult protective services, the
17 department shall distribute the amounts transferred under par. (a) 2. in each fiscal
18 year.

19 (c) *Adjustment for medical assistance buy-in program.* If a former recipient of
20 services funded under the allocation under sub. (2) is a participant in the medical
21 assistance buy-in program under s. 49.472, the department may decrease that
22 allocation by the amount that the department estimates it will incur in providing
23 services to that participant under s. 49.472.

24 ***b0357/3.9*** SECTION 1091d. 46.45 (2) (a) of the statutes is amended to read:

1 46.45 (2) (a) If on December 31 of any year there remains unspent or
2 uncumbered in the allocation under s. 46.40 (2) an amount that exceeds the
3 amount received under 42 USC 670 to 679a and allocated under s. 46.40 (2) in that
4 year, the department shall carry forward the excess moneys and distribute not less
5 than 50% of the excess moneys to counties having a population of less than 500,000
6 that are making a good faith effort, as determined by the department, to comply with
7 s. 46.22 (1) (c) 8. f. for services and projects to assist children and families,
8 notwithstanding the percentage limit specified in sub. (3) (a). A county shall use not
9 less than 50% of the moneys distributed to the county under this subsection for
10 services for children who are at risk of abuse or neglect to prevent the need for child
11 abuse and neglect intervention services. If a county does not comply with s. 46.22
12 (1) (c) 8. f. before July 1, 2005, the department may recover any amounts distributed
13 to that county under this paragraph after June 30, 2001, by billing the county or
14 deducting from that county's allocation under s. 46.40 (2).

15 ***b0578/2.1* SECTION 1091m.** 46.46 (2) of the statutes is amended to read:

16 46.46 (2) If the department proposes to use any moneys from the appropriation
17 account under s. 20.435 (8) (mb) for any purpose other than the purpose specified in
18 sub. (1), the department shall submit a plan for the proposed use of those moneys to
19 the secretary of administration by September 1 of the fiscal year after the fiscal year
20 in which those moneys were received. If the secretary of administration approves the
21 plan, he or she shall submit the plan to the joint committee on finance by October 1
22 of the fiscal year after the fiscal year in which those moneys were received. If the
23 cochairpersons of the committee do not notify the secretary of administration within
24 14 working days after the date of submittal of the plan that the committee has
25 scheduled a meeting for the purpose of reviewing the plan, the department may

1 implement the plan. If within 14 working days after the date of the submittal by the
2 secretary of administration the cochairpersons of the committee notify him or her
3 that the committee has scheduled a meeting for the purpose of reviewing the plan,
4 the department may implement the plan only with the approval of the committee.

5 ***b0356/2.4* SECTION 1092d.** 46.47 of the statutes is repealed.

6 ***-0027/5.21* SECTION 1093.** 46.48 (3) of the statutes is renumbered 46.481 (1).

7 ***-0277/4.4* SECTION 1094.** 46.48 (6) of the statutes is amended to read:

8 46.48 (6) CAREER YOUTH DEVELOPMENT CENTER. The department shall distribute
9 ~~\$110,000~~ \$80,000 in each fiscal year to the career youth development center in the
10 city of Milwaukee. ~~Of these amounts, \$80,000 shall be distributed in each fiscal year~~
11 ~~for the operation of a minority youth substance abuse treatment program and~~
12 ~~\$30,000 shall be distributed in each fiscal year for drug prevention programs for high~~
13 ~~school athletes in the Milwaukee public school system.~~

14 ***-0027/5.22* SECTION 1095.** 46.48 (9) of the statutes is renumbered 46.481 (2).

15 ***-0320/3.2* SECTION 1096.** 46.48 (27) of the statutes is renumbered 46.481 (3)

16 and amended to read:

17 46.481 (3) GRANTS TO RUNAWAY PROGRAMS. The department shall distribute
18 ~~\$100,000~~ \$50,000 in each fiscal year as grants to programs that provide services for
19 ~~runaways~~ runaway children.

20 ***-0027/5.23* SECTION 1097.** 46.48 (28) of the statutes is renumbered 46.481
21 (4).

22 ***-0320/3.3* SECTION 1098.** 46.48 (29) of the statutes is amended to read:

23 46.48 (29) ARC COMMUNITY SERVICES, INC. The department shall distribute
24 ~~\$87,500 in fiscal year 1997–98 and \$175,000 in~~ each ~~fiscal year 1998–99~~ to ARC

1 Community Services, Inc., for a program to provide substance abuse day treatment
2 services for pregnant and postpartum women and their infants.

3 ***-0027/5.24* SECTION 1099.** 46.481 (intro.) of the statutes is created to read:
4 **46.481 Grants for children's community programs.** (intro.) From the
5 appropriation under s. 20.435 (3) (bc), the department shall distribute the following
6 grants for children's community programs:

7 ***-0028/7.43* SECTION 1100.** 46.485 (2g) (intro.) of the statutes is amended to
8 read:

9 46.485 (2g) (intro.) From the appropriation under s. 20.435 ~~(5)~~ (4) (b), the
10 department may in each fiscal year transfer funds to the appropriation under s.
11 20.435 (7) (kb) for distribution under this section and from the appropriation under
12 s. 20.435 (7) (mb) the department may not distribute more than \$1,330,500 in each
13 fiscal year to applying counties in this state that meet all of the following
14 requirements, as determined by the department:

15 ***-0028/7.44* SECTION 1101.** 46.485 (3r) of the statutes is amended to read:

16 46.485 (3r) Funds that a county does not encumber before 24 months after
17 June 30 of the fiscal year in which the funds were distributed under sub. (2g) lapse
18 to the appropriation under s. 20.435 ~~(5)~~ (4) (b).

19 ***-0275/5.7* SECTION 1103.** 46.495 (1) (d) of the statutes is amended to read:

20 46.495 (1) (d) From the appropriations under s. 20.435 (3) (o) and (7) (b), (kw)
21 and (o), the department shall distribute the funding for social services, including
22 funding for foster care or treatment foster care of a child on whose behalf aid is
23 received under s. 46.261, to county departments under ss. 46.215, 46.22 and 46.23
24 as provided under s. 46.40. County matching funds are required for the distributions
25 under s. 46.40 (2) ~~and~~, (8) and (9) (b). Each county's required match for the

1 distributions under s. 46.40 (2) and (8) for a year equals 9.89% of the total of the
2 county's distributions under s. 46.40 (2) and (8) for that year for which matching
3 funds are required plus the amount the county was required by s. 46.26 (2) (c), 1985
4 stats., to spend for juvenile delinquency-related services from its distribution for
5 1987. Each county's required match for the distribution under s. 46.40 (9) (b) for a
6 year equals 9.89% of that county's amounts described in s. 46.40 (9) (a) (intro.) for
7 that year. Matching funds may be from county tax levies, federal and state revenue
8 sharing funds or private donations to the county that meet the requirements
9 specified in s. 51.423 (5). Private donations may not exceed 25% of the total county
10 match. If the county match is less than the amount required to generate the full
11 amount of state and federal funds distributed for this period, the decrease in the
12 amount of state and federal funds equals the difference between the required and the
13 actual amount of county matching funds.

14 ***b0673/2.2* SECTION 1104g.** 46.513 of the statutes is created to read:

15 **46.513 Services for children and families.** From the appropriation under
16 s. 20.435 (3) (bm), the department shall distribute grants to counties in each fiscal
17 year to fund services for children and families. The department shall determine the
18 amount of a county's grant under this section based on the county's proportion of the
19 state's population as last estimated by the department of administration under s.
20 16.96. The department of health and family services shall distribute the grants
21 under this section in the calendar year after the calendar year in which the amount
22 available for those grants is certified by the department of revenue under s. 77.63 (2).

23 ***-1550/1.3* SECTION 1105.** 46.70 (2) of the statutes is amended to read:

24 **46.70 (2)** From the appropriations under s. 20.435 (7) (~~dL~~) (kL) and (o), the
25 department may make available to any of the 11 federally recognized tribal

1 governing bodies in this state funds for the purposes stated in sub. (1). Beginning
2 July 1, 1991, and ending September 30, 1991, the department may award to each
3 tribal governing body up to \$6,800. Beginning October 1, 1991, and ending
4 September 30, 1992, the department may award to each tribal governing body up to
5 \$27,200. Beginning October 1, 1992, and ending June 30, 1993, the department may
6 award to each tribal governing body up to \$20,400. Receipt of funds is contingent
7 upon department approval of an application submitted by a tribal governing body.
8 The department may partially approve any application and provide only part of the
9 funds requested. Each application shall contain a plan for expenditure of funds,
10 consistent with the purposes stated in sub. (1).

11 ***-1551/1.3* SECTION 1106.** 46.71 (1) (intro.) of the statutes is amended to read:
12 46.71 (1) (intro.) From the appropriation under s. 20.435 (7) (~~dm~~) (km), the
13 department shall, for the development of new drug abuse prevention, treatment and
14 education programs that are culturally specific with respect to American Indians or
15 to supplement like existing programs, allocate a total of not more than \$500,000 in
16 each fiscal year to all the elected governing bodies of federally recognized American
17 Indian tribes or bands that submit to the department plans, approved by the
18 department, that do all of the following:

19 ***-1551/1.4* SECTION 1107.** 46.71 (2) of the statutes is amended to read:
20 46.71 (2) The amount of funds allocated by the department under sub. (1) may
21 not exceed the amounts appropriated under s. 20.435 (7) (~~dm~~) (km).

22 ***-0277/4.5* SECTION 1108.** 46.715 of the statutes is repealed.

23 ***-1695/1.4* SECTION 1109.** 46.76 (3) of the statutes is repealed.

24 ***-1695/1.5* SECTION 1110.** 46.765 of the statutes is repealed.

25 ***-0027/5.25* SECTION 1111.** 46.81 (2) of the statutes is amended to read:

1 46.81 (2) From the appropriation under s. 20.435 (7) ~~(dj)~~ (dh), the department
2 shall allocate \$2,298,400 in each fiscal year to aging units to provide benefit
3 specialist services for older individuals. The department shall ensure that each
4 aging unit receives funds and shall take into account the proportion of the state's
5 population of low-income older individuals who reside in a county.

6 ***-0027/5.26*** SECTION 1112. 46.81 (5) of the statutes is amended to read:

7 46.81 (5) From the appropriation under s. 20.435 (7) ~~(dj)~~ (dh) the department
8 shall allocate \$182,500 in each fiscal year to area agencies on aging. Each area
9 agency on aging shall use the funds for training, supervision and legal back-up
10 services for benefit specialists within its area.

11 ***-0030/2.69*** SECTION 1113. 46.82 (3) (a) 19. of the statutes is created to read:

12 46.82 (3) (a) 19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
13 under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under
14 s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate
15 the resource center.

16 ***-0030/2.70*** SECTION 1114. 46.82 (3) (a) 20. of the statutes is created to read:

17 46.82 (3) (a) 20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
18 under s. 46.284 (1) (a) 1., apply to the department to operate a care management
19 organization under s. 46.284 and, if the department contracts with the county under
20 s. 46.284 (2), operate the care management organization and, if appropriate, place
21 funds in a risk reserve.

22 ***-0317/1.1*** SECTION 1115. 46.856 of the statutes is renumbered 46.856 (2),
23 and 46.856 (2) (intro.), as renumbered, is amended to read:

1 46.856 (2) (intro.) From the appropriation under s. 20.435 (7) (bg), the
2 department shall award a grant to at least one public agency or private nonprofit
3 organization, as defined in s. 108.02 (19), to do all of the following:

4 ***-0317/1.2*** SECTION 1116. 46.856 (1) of the statutes is created to read:

5 46.856 (1) In this section:

6 (a) “Private nonprofit organization” has the meaning given in s. 108.02 (19).

7 (b) “Public agency” means a county, city, village, town or school district or an
8 agency of this state or of a county, city, village, town or school district.

9 ***-0027/5.27*** SECTION 1117. 46.86 (1) of the statutes is amended to read:

10 46.86 (1) From the appropriation ~~under s. 20.435 (7) (cp) and (md), the~~
11 ~~department may award funds and from the appropriation~~ under s. 20.435 (7) (md)
12 the department may award not more than \$125,500 in each fiscal year as grants to
13 counties and private nonprofit entities for treatment for pregnant women and
14 mothers with alcohol and other drug abuse treatment needs; mothers who have
15 alcohol and other drug abuse treatment needs and dependent children up to the age
16 of 5 years; and the dependent children up to the age of 5 years of those mothers. The
17 grants shall be awarded in accordance with the department’s request-for-proposal
18 procedures. The grants shall be used to establish community-based programs,
19 residential family-centered treatment programs or home-based treatment
20 programs. The program under a grant must include alcohol and other drug abuse
21 treatment services, parent education, support services for the children of the women
22 who are enrolled in the program, vocational assistance and housing assistance. Any
23 program funded under this subsection must also provide follow-up aftercare
24 services to each woman and her children for at least 2 years after the date on which
25 a woman has left the program.

1 ***-0320/3.4*** SECTION 1118. 46.86 (5) of the statutes is amended to read:

2 46.86 (5) From the appropriation under s. 20.435 (7) (md), the department may
3 not distribute more than ~~\$35,000~~ \$235,000 in each fiscal year as a grant to ~~the ARC~~
4 ~~community services center~~ Community Services, Inc., for women and children in
5 ~~Dane county, to address a projected operation deficit of the center;~~ County, to provide
6 additional funding for staff of the center and transportation and meal expenses for
7 chemically dependent women who receive services from the center; ~~and to provide~~
8 ~~additional funding for staff of the center.~~

9 ***-1549/2.1*** SECTION 1119. 46.86 (6) of the statutes is created to read:

10 46.86 (6) (a) From the appropriation under s. 20.435 (7) (md), the department
11 may award not more than \$1,167,900 in each fiscal year as grants to counties and
12 private entities to provide community-based alcohol and other drug abuse
13 treatment programs that do all of the following:

14 1. Meet special needs of women with problems resulting from alcohol or other
15 drug abuse.

16 2. Emphasize parent education, vocational and housing assistance and
17 coordination with other community programs and with treatment under intensive
18 care.

19 (b) The department shall do all of the following with respect to the grants under
20 par. (a):

21 1. Award the grants in accordance with the department's request-for-proposal
22 procedures.

23 2. Ensure that the grants are distributed in both urban and rural communities.

24 3. Evaluate the programs under the grants by use of client-outcome
25 measurements that the department develops.

1 ***-1604/4.3* SECTION 1120.** 46.93 (2) (intro.) of the statutes is amended to read:

2 46.93 (2) PURPOSE; ALLOCATION. (intro.) From the appropriation under s. 20.434

3 (1) ~~(b)~~ (ky), the board shall award not more than \$439,300 in each of fiscal years

4 ~~1997-98 and 1998-99~~ year for grants to organizations to provide adolescent

5 pregnancy prevention programs or pregnancy services that include health care,

6 education, counseling and vocational training. Types of services and programs that

7 are eligible for grants include all of the following:

8 ***b0561/4.3* SECTION 1120c.** 46.95 (2) (a) of the statutes is amended to read:

9 46.95 (2) (a) The secretary shall make grants from the appropriations under

10 s. 20.435 (3) (cd) ~~and~~, (hh) and (km) to organizations for the provision of any of the

11 services specified in sub. (1) (d). Grants may be made to organizations which have

12 provided those domestic abuse services in the past or to organizations which propose

13 to provide those services in the future. No grant may be made to fund services for

14 child or unborn child abuse or abuse of elderly persons.

15 ***b0561/4.3* SECTION 1120g.** 46.95 (2) (f) (intro.) of the statutes is amended to

16 read:

17 46.95 (2) (f) (intro.) From the appropriations under s. 20.435 (3) (cd) ~~and~~, (hh)

18 and (km), the department shall do all of the following:

19 ***b0561/4.3* SECTION 1120m.** 46.95 (2) (f) 7. of the statutes is created to read:

20 46.95 (2) (f) 7. Award a grant of \$25,000 in each fiscal year to each of 30

21 organizations to enhance support services. Funding may be used for such purposes

22 as case management; children's programming; assisting victims of domestic abuse

23 to find employment; and training in and activities promoting self-sufficiency.

24 ***b0561/4.3* SECTION 1120n.** 46.95 (2) (f) 8. of the statutes is created to read:

1 46.95 (2) (f) 8. Award \$200,000 in grants in each fiscal year to organizations
2 for domestic abuse services for individuals who are members of underserved
3 populations, including racial minority group members and individuals with mental
4 illness or developmental disabilities. A grant to an organization may not exceed
5 \$60,000.

6 ***b0561/4.3* SECTION 1120p.** 46.95 (2) (f) 9. of the statutes is created to read:

7 46.95 (2) (f) 9. Award a grant of \$25,000 in fiscal year 1999–2000 and a grant
8 of \$50,000 in each fiscal year thereafter to the Wisconsin Coalition Against Domestic
9 Violence for the cost of a staff person to provide assistance in obtaining legal services
10 to domestic abuse victims.

11 ***b0561/4.3* SECTION 1120r.** 46.95 (2) (g) of the statutes is created to read:

12 46.95 (2) (g) Grants made and moneys expended under this subsection from the
13 appropriation under s. 20.435 (3) (km) may be used only for the benefit of individuals
14 whose family incomes do not exceed 250% of the poverty line, as defined in s. 49.001
15 (5).

16 ***b0584/2.2* SECTION 1121g.** 46.986 of the statutes is created to read:

17 **46.986 Respite care program. (1) DEFINITIONS.** In this section:

18 (a) “Abuse” means the wilful infliction on a person of physical pain or injury or
19 unreasonable confinement.

20 (b) “Caregiver” means an individual who lives in the home of a person with
21 special needs and provides care or supervision for that person.

22 (c) “County department” means a county department under s. 46.215, 46.22,
23 46.23, 51.42 or 51.437.

1 (d) "Neglect" means an act, omission or course of conduct that, because of the
2 failure to provide adequate food, shelter, clothing, medical care or dental care,
3 creates a significant danger to the physical and mental health of a person.

4 (e) "Provider" means an individual or agency that a caregiver selects, with
5 input to the selection by the person with special needs, if competent, to provide
6 respite care to the person with special needs.

7 (f) "Respite care" means care that is provided to a person with special needs,
8 or a person at risk of abuse or neglect, in order to provide temporary relief to the
9 caregiver of that person or when the caregiver is unable to provide care.

10 (g) "Special need" means a person's need resulting from an emotional,
11 behavioral, cognitive, physical or personal condition that necessitates receipt of care
12 or supervision in order to meet the person's basic needs or to prevent harm from
13 occurring to him or her.

14 (h) "Tribe or band" means the governing body of a federally recognized
15 American Indian tribe or band in this state.

16 (2) PROGRAM. (a) From the appropriation account under s. 20.435 (7) (br), the
17 department shall contract for the administration of life-span respite care projects
18 with an organization to which all of the following apply:

19 1. The organization is a private, nonprofit organization, as defined in s. 108.02
20 (19), that is capable of operating on a statewide basis and has expertise in respite
21 care issues.

22 2. At least 51% of the members of the organization's governing board are
23 consumers of respite care or caregivers.

1 3. The membership of the organization's governing board includes providers
2 and elected officials and represents the diverse geographical areas and cultural
3 groups of the state.

4 (b) The organization with which the department contracts under par. (a) shall
5 do all of the following:

6 1. After consulting with the department, county departments, tribes or bands,
7 providers and caregivers, prescribe criteria for the distribution of grants to conduct
8 life-span respite care projects. The criteria shall include the requirement that grant
9 funds be equally distributed among 5 administrative regions of the state, as
10 prescribed by the department.

11 2. Solicit applications from and, using the criteria under subd. 1., award in the
12 1999–2001 state fiscal biennium up to one grant in each of the 5 administrative
13 regions prescribed by the department to any of the following to conduct a life-span
14 respite care project:

15 a. A county department.

16 b. A tribe or band.

17 c. A community-based private, nonprofit entity.

18 d. A community-based private entity that is operated for profit.

19 3. Require that the grantee contribute matching funds to the operation of the
20 life-span respite care project in the following amounts:

21 a. Ten percent of the amount of the grant awarded by the organization, as direct
22 services, which shall be used by the grantee to fund payments from caregivers to
23 providers.

24 b. Fifteen percent of the amount of the grant awarded by the organization, as
25 in-kind services.

1 4. Oversee grants awarded under subd. 2., and monitor, provide technical
2 assistance to and evaluate the life–span respite care projects.

3 5. Develop best practice guidelines and a training curriculum that may be used
4 by life–span respite care projects that are funded under this section and that may be
5 used, if appropriate, by any other respite care providers in the state.

6 6. Promote the exchange of information and coordination among the state, local
7 governments, life–span respite care projects, entities serving persons with special
8 needs, families of persons with special needs and persons in favor of the promotion
9 of respite care services, to encourage the efficient provision of respite care services.

10 7. Act as a statewide clearinghouse of information about respite care and
11 existing respite care programs and resources and operate a library of materials that
12 may be lent to persons or organizations upon request.

13 8. Conduct analyses of respite care policies and proposals, and identify and
14 promote resolution of respite care policy concerns at legislative, state and local levels.

15 **(3) GRANTS NOT TO SUPPLANT OTHER MONEYS.** Moneys awarded as grants under
16 sub. (2) (b) may not be used to supplant moneys otherwise available and, prior to
17 receipt of the grant, dedicated by the grantee to respite care.

18 **(4) LIFE–SPAN RESPITE CARE PROJECT REQUIREMENTS.** Life–span respite care
19 projects for which a grant is awarded under sub. (2) (b) 2. shall do all of the following:

20 (a) Operate in a culturally competent manner and be sensitive to the unique
21 needs and strengths of a person with special needs and his or her family or caregiver.

22 (b) Identify, coordinate and develop resources for respite care that are built, to
23 the extent possible, on existing community support services.

24 (c) Recruit and screen providers.

1 (d) Identify training resources and organize training programs for providers
2 that address different populations in need of respite care.

3 (e) Facilitate access by caregivers and families of persons with special needs
4 to an array of respite care service options for which the person with special needs is
5 eligible, that are responsive to caregiver and family needs and that are available
6 before families and primary caregivers reach a crisis situation.

7 (f) Assist caregivers and families of persons with special needs to identify and
8 coordinate funds and resources available for respite care for which the person with
9 special needs is eligible, and authorize and provide a variety of funds and resources
10 to make available additional respite care services for persons with special needs,
11 under eligibility criteria established by the project.

12 (5) ADVISORY COMMITTEES. Each grantee of moneys to conduct a life-span
13 respite care project under sub. (2) shall create an advisory committee that shall
14 advise the project on how the project may best serve persons with special needs and
15 their caregivers. Consumers of respite care services and caregivers shall comprise
16 at least 51% of the advisory committee membership and shall be representative of
17 the diversity of persons who receive services under the project. Other members shall
18 include providers, representatives of local service agencies and members of the
19 community.

20 (6) By June 1, 2004, the department and the organization with which the
21 department contracts under sub. (2) (a) shall together evaluate the life-span respite
22 care projects that are conducted under this section. If, following the evaluation, the
23 department and the organization together determine that it is feasible to integrate
24 the life-span respite care projects with any integrated, organized system of
25 long-term care services that is operated by the department, the department shall,

1 by July 1, 2004, provide to the department of administration statutory language that
2 is proposed for inclusion in the 2005–07 biennial budget bill to effect the integration.

3 ***-0277/4.6* SECTION 1122.** 46.99 of the statutes is created to read:

4 **46.99 Brighter futures initiative. (1) DEFINITIONS.** In this section:

5 (a) “Nonprofit corporation” means a nonstock, nonprofit corporation organized
6 under ch. 181.

7 (b) “Public agency” means a county, city, village, town or school district or an
8 agency of this state or of a county, city, village, town or school district.

9 **(2) AWARDING OF GRANTS.** (a) From the appropriations under s. 20.435 (3) (eg),
10 (km) and (nL), the department, beginning on January 1, 2001, shall distribute
11 \$2,125,200 in each fiscal year to applying nonprofit corporations and public agencies
12 operating in a county having a population of 500,000 or more and \$1,229,300 in each
13 fiscal year to applying county departments under s. 46.22, 46.23, 51.42 or 51.437
14 operating in counties other than a county having a population of 500,000 or more to
15 provide programs to accomplish all of the following:

16 1. Prevent and reduce the incidence of youth violence and other delinquent
17 behavior.

18 2. Prevent and reduce the incidence of youth alcohol and other drug use and
19 abuse.

20 3. Prevent and reduce the incidence of child abuse and neglect.

21 4. Prevent and reduce the incidence of nonmarital pregnancy and increase the
22 use of abstinence as a method of preventing nonmarital pregnancy.

23 5. Increase adolescent self-sufficiency by encouraging high school graduation,
24 vocational preparedness, improved social and other interpersonal skills and
25 responsible decision making.

1 (b) A nonprofit corporation or public agency that is applying for a grant under
2 par. (a) shall provide to the department a proposed service plan for the use of the
3 grant moneys. If the department approves the service plan, the department may
4 award the grant. The department shall award the grants on a competitive basis and
5 for a 3-year period.

6 (3) OUTCOMES EXPECTED. (a) The department shall provide a set of benchmark
7 indicators to measure the outcomes that are expected of a program funded under sub.
8 (2) (a). Those benchmark indicators shall measure all of the following among youth
9 who have participated in a program funded under sub. (2) (a):

10 1. The rate of participation in violent or other delinquent behavior.

11 2. The rate of alcohol and other drug use and abuse.

12 3. The rate of nonmarital pregnancy and the rate at which abstinence is used
13 to prevent nonmarital pregnancy.

14 4. The rate of substantiated cases of child abuse and neglect.

15 5. The development of self-sufficiency, as indicated by the rate of high school
16 graduation, the degree of vocational preparedness, any improvements in social and
17 other interpersonal skills and in responsible decision making and any other
18 indicators that the department considers important in indicating the development
19 of adolescent self-sufficiency.

20 6. Any other indicators that the department considers important in indicating
21 the development of positive behaviors among adolescents.

22 (b) The department shall require a grant recipient under sub. (2) (a) to provide
23 an annual report showing the status of its program participants in terms of the
24 benchmark indicators provided under par. (a) and may renew a grant only if the
25 recipient shows improvement on those indicators.

1 ***b0526/2.10* SECTION 1123d.** 46.995 (title) of the statutes is repealed and
2 recreated to read:

3 **46.995 (title) Tribal adolescent services.**

4 ***b0526/2.10* SECTION 1123e.** 46.995 (1) (title) of the statutes is renumbered
5 46.995 (3) (title) and amended to read:

6 46.995 (3) (title) ~~DEFINITION~~ ADOLESCENT PREGNANCY PREVENTION SERVICES.

7 ***b0526/2.10* SECTION 1123f.** 46.995 (1) (intro.) of the statutes is renumbered
8 46.995 (3) (a) (intro.) and amended to read:

9 46.995 (3) (a) (intro.) In this ~~section~~ subsection, “high-risk adolescent” means
10 a person who is at least 13 years of age but under the age of 20 and who is at risk of
11 becoming an unmarried parent as an adolescent and of incurring long-term
12 economic dependency on public funds and is characterized by one or more of the
13 following:

14 ***b0526/2.10* SECTION 1123g.** 46.995 (1) (a) of the statutes is renumbered
15 46.995 (3) (a) 1.

16 ***b0526/2.10* SECTION 1123h.** 46.995 (1) (b) of the statutes is renumbered
17 46.995 (3) (a) 2.

18 ***b0526/2.10* SECTION 1123i.** 46.995 (1) (c) of the statutes is renumbered
19 46.995 (3) (a) 3.

20 ***b0526/2.10* SECTION 1123j.** 46.995 (1) (d) of the statutes is renumbered
21 46.995 (3) (a) 4.

22 ***b0526/2.10* SECTION 1123k.** 46.995 (1) (e) of the statutes is renumbered
23 46.995 (3) (a) 5.

24 ***b0526/2.10* SECTION 1123L.** 46.995 (1) (f) of the statutes is renumbered
25 46.995 (3) (a) 6.

1 ***b0526/2.10* SECTION 1123p.** 46.995 (1m) of the statutes is created to read:

2 46.995 (1m) TRIBAL ADOLESCENT SERVICES ALLOCATIONS. From the appropriation
3 account under s. 20.435 (3) (km), the department may allocate \$172,500 in each fiscal
4 year and, from the appropriation account under s. 20.435 (3) (eg), the department
5 may allocate \$7,500 in each fiscal year to provide the grants specified in subs. (2), (3)
6 (b) and (4m) (b).

7 ***-1548/5.2* SECTION 1124.** 46.995 (2) (intro.) of the statutes is amended to
8 read:

9 46.995 (2) ADOLESCENT SELF-SUFFICIENCY SERVICES. (intro.) From the
10 appropriation account under s. 20.435 (3) (~~eg~~) (ky), the department may allocate
11 \$582,100 in each fiscal year to provide a grant annually to a public or private entity
12 or to the elected governing body of a federally recognized American Indian tribe or
13 band to provide services in counties or to a tribe or band for adolescent parents which
14 shall emphasize high school graduation and vocational preparation, training and
15 experience and may be structured so as to strengthen the adolescent parent's
16 capacity to fulfill parental responsibilities by developing social skills and increasing
17 parenting skills. The public or private entity seeking to receive a grant to provide
18 these services shall develop a proposed service plan that is approved by the
19 department. Except with respect to award of a grant to a tribe or band, the
20 department shall rank individual counties and give priority by this ranking for the
21 award of grants under this subsection, based on all of the following factors:

22 ***b0526/2.11* SECTION 1124g.** 46.995 (2) (intro.) of the statutes, as affected by
23 1999 Wisconsin Act (this act), is renumbered 46.995 (2) and amended to read:

24 46.995 (2) ADOLESCENT SELF-SUFFICIENCY SERVICES. From the appropriation
25 ~~account under s. 20.435 (3) (ky), the department may allocate \$582,100 in each fiscal~~

1 ~~year to~~ allocations under sub. (1m), the department may provide a grant annually
2 ~~to a public or private entity or in the amount of \$85,000~~ to the elected governing body
3 of a federally recognized American Indian tribe or band to provide services ~~in~~
4 ~~counties or to a tribe or band~~ for adolescent parents which shall emphasize high
5 school graduation and vocational preparation, training and experience and may be
6 structured so as to strengthen the adolescent parent's capacity to fulfill parental
7 responsibilities by developing social skills and increasing parenting skills. The
8 ~~public or private entity~~ tribe or band seeking to receive a grant to provide these
9 services shall develop a proposed service plan that is approved by the department.
10 ~~Except with respect to award of a grant to a tribe or band, the department shall rank~~
11 ~~individual counties and give priority by this ranking for the award of grants under~~
12 ~~this subsection, based on all of the following factors:~~

13 *b0526/2.11* SECTION 1124h. 46.995 (2) (a) of the statutes is repealed.

14 *b0526/2.11* SECTION 1124i. 46.995 (2) (b) of the statutes is repealed.

15 *b0526/2.11* SECTION 1124j. 46.995 (2) (c) of the statutes is repealed.

16 *b0526/2.11* SECTION 1124k. 46.995 (2) (d) of the statutes is repealed.

17 *-1548/5.3* SECTION 1125. 46.995 (3) of the statutes is amended to read:

18 46.995 (3) ADOLESCENT PREGNANCY PREVENTION SERVICES. From the
19 appropriation account under s. 20.435 (3) (~~eg~~) (ky), the department may allocate
20 \$340,000 in each fiscal year to provide a grant annually to a public or private entity
21 or to the elected governing body of a federally recognized American Indian tribe or
22 band to provide to high-risk adolescents pregnancy and parenthood prevention
23 services which shall be structured so as to increase development of decision-making
24 and communications skills, promote graduation from high school and expand career
25 and other options and which may address needs of adolescents with respect to

1 pregnancy prevention. Except with respect to award of a grant to a tribe or band, the
2 department shall rank individual counties and give priority by this ranking for the
3 award of grants under this subsection, based on the factors specified under sub. (2)
4 (a) to (d).

5 ***b0526/2.12* SECTION 1125g.** 46.995 (3) of the statutes, as affected by 1999
6 Wisconsin Act (this act), is renumbered 46.995 (3) (b) and amended to read:

7 46.995 (3) (b) From the ~~appropriation account under s. 20.435 (3) (ky)~~, the
8 ~~department may allocate \$340,000 in each fiscal year to~~ allocations under sub. (1m),
9 ~~the department may provide a grant annually to a public or private entity or in the~~
10 amount of \$65,000 to the elected governing body of a federally recognized American
11 Indian tribe or band to provide to high-risk adolescents pregnancy and parenthood
12 prevention services which shall be structured so as to increase development of
13 decision-making and communications skills, promote graduation from high school
14 and expand career and other options and which may address needs of adolescents
15 with respect to pregnancy prevention. ~~Except with respect to award of a grant to a~~
16 ~~tribe or band, the department shall rank individual counties and give priority by this~~
17 ~~ranking for the award of grants under this subsection, based on the factors specified~~
18 ~~under sub. (2) (a) to (d).~~

19 ***b0526/2.12* SECTION 1125r.** 46.995 (4) of the statutes is repealed.

20 ***-0277/4.8* SECTION 1126.** 46.996 of the statutes, as affected by 1999
21 Wisconsin Act (this act), is repealed.

22 ***-1548/5.4* SECTION 1127.** 46.996 (intro.) of the statutes is amended to read:

23 **46.996 Adolescent services.** (intro.) From the appropriation account under
24 s. 20.435 (3) (eg), the department shall ~~allocate funds in~~ distribute \$62,500 and from

1 the appropriation account under s. 20.435 (3) (ky), the department shall distribute
2 \$287,500, for the following amounts:

3 *b0526/2.13* SECTION 1128d. 46.997 (title) of the statutes is renumbered
4 46.995 (4m) (title).

5 *b0526/2.13* SECTION 1128g. 46.997 (1) (intro.) of the statutes is renumbered
6 46.995 (4m) (a) (intro.) and amended to read:

7 46.995 (4m) (a) (intro.) In this section subsection:

8 *b0526/2.13* SECTION 1128i. 46.997 (1) (a) of the statutes is renumbered
9 46.995 (4m) (a) 1.

10 *b0526/2.13* SECTION 1128k. 46.997 (1) (b) of the statutes is renumbered
11 46.995 (4m) (a) 2.

12 *b0526/2.13* SECTION 1128m. 46.997 (1) (c) of the statutes is repealed.

13 *b0526/2.13* SECTION 1128p. 46.997 (1) (d) of the statutes is repealed.

14 *b0526/2.13* SECTION 1128r. 46.997 (1) (e) of the statutes is repealed.

15 *b0526/2.13* SECTION 1128t. 46.997 (1) (f) of the statutes is repealed.

16 *-1548/5.5* SECTION 1129. 46.997 (2) (intro.) of the statutes is amended to
17 read:

18 46.997 (2) (intro.) From the appropriation account under s. 20.435 (3) (eg), the
19 department shall ~~allocate not more than \$210,000~~ distribute \$52,500 and from the
20 appropriation account under s. 20.435 (3) (ky), the department shall distribute
21 \$157,500 in each fiscal year to make grants to applying organizations for the
22 provision, on a regional or tribal project basis, of information to communities in order
23 to increase community knowledge about problems of adolescents and information to
24 and activities for adolescents, particularly female adolescents, in order to enable the
25 adolescents to develop skills with respect to all of the following:

1 ***b0526/2.14* SECTION 1129g.** 46.997 (2) (intro.) of the statutes, as affected by
2 1999 Wisconsin Act (this act), is renumbered 46.995 (4m) (b) (intro.) and amended
3 to read:

4 46.995 (4m) (b) (intro.) From the ~~appropriation account under s. 20.435 (3) (eg),~~
5 ~~the department shall distribute \$52,500 and from the appropriation account under~~
6 ~~s. 20.435 (3) (ky), the department shall distribute \$157,500 in each fiscal year to~~
7 ~~make grants to applying organizations~~ allocations under sub. (1m), the department
8 may provide a grant annually in the amount of \$30,000 to the elected governing body
9 of a federally recognized American Indian tribe or band for the provision, ~~on a~~
10 ~~regional or tribal project basis, of information to communities~~ members of the tribe
11 or band in order to increase community knowledge about problems of adolescents
12 and information to and activities for adolescents, particularly female adolescents, in
13 order to enable the adolescents to develop skills with respect to all of the following:

14 ***b0526/2.14* SECTION 1129h.** 46.997 (2) (a) of the statutes is renumbered
15 46.995 (4m) (b) 1.

16 ***b0526/2.14* SECTION 1129i.** 46.997 (2) (b) of the statutes is renumbered
17 46.995 (4m) (b) 2.

18 ***b0526/2.14* SECTION 1129j.** 46.997 (2) (c) of the statutes is renumbered
19 46.995 (4m) (b) 3.

20 ***b0526/2.14* SECTION 1129k.** 46.997 (2) (d) of the statutes is renumbered
21 46.995 (4m) (b) 4.

22 ***b0526/2.14* SECTION 1129m.** 46.997 (3) of the statutes is renumbered 46.995
23 (4m) (c) and amended to read:

24 46.995 (4m) (c) Each ~~funded regional project under sub. (2) shall provide~~
25 ~~services in one of 6 regional areas of the state, and each funded tribal project under~~

1 ~~sub. (2)~~ par. (b) shall provide services in areas of the state as approved by the Indian
2 tribe or band and the department. The department shall determine the boundaries
3 of the regional areas prior to soliciting project grant applications.

4 ***b0526/2.14* SECTION 1129p.** 46.997 (4) of the statutes is renumbered 46.995
5 (4m) (d) and amended to read:

6 46.995 (4m) (d) Prior to making grants to applying ~~organizations under sub.~~
7 ~~(2) tribes or bands under par. (b)~~, the department shall consider whether and how the
8 applying ~~organization~~ tribe or band proposes to coordinate its services with other
9 public or private resources, programs or activities in the region and the state.

10 ***b0526/2.14* SECTION 1129r.** 46.997 (5) of the statutes is renumbered 46.995
11 (4m) (e) and amended to read:

12 46.995 (4m) (e) The department shall work closely with the women's council
13 and the department of public instruction, on a continuing basis, concerning the scope
14 and direction of activities under projects funded by the program under ~~sub. (2)~~ par.
15 (b).

16 ***-0085/4.1* SECTION 1130.** 48.02 (6) of the statutes is amended to read:

17 48.02 (6) "Foster home" means any facility that is operated by a person
18 required to be licensed by s. 48.62 (1) (a) and that provides care and maintenance for
19 no more than 4 children ~~unless all of the children are siblings or, if necessary to~~
20 ~~enable a sibling group to remain together, for no more than 6 children or, if the~~
21 ~~department promulgates rules permitting a different number of children, for the~~
22 number of children permitted under those rules.

23 ***b0359/1.1* SECTION 1131g.** 48.235 (8) (c) 1. of the statutes is amended to read:

1 48.235 (8) (c) 1. In an uncontested termination of parental rights and adoption
2 proceeding under s. 48.833 (1), the court shall order the agency that placed the child
3 for adoption to pay the compensation of the child's guardian ad litem.

4 ***b0359/1.1* SECTION 1131k.** 48.38 (4) (d) of the statutes is amended to read:

5 48.38 (4) (d) If the child is living more than 60 miles from his or her home,
6 documentation that placement within 60 miles of the child's home is either
7 unavailable or inappropriate or documentation that placement more than 60 miles
8 from the child's home is in the child's best interests. The placement of a child in a
9 licensed foster home or a licensed treatment foster home more than 60 miles from the
10 child's home is presumed to be in the best interests of the child if documentation is
11 provided ~~which that~~ shows all any of the following:

12 1. That the placement is made pursuant to a voluntary agreement under s.
13 48.63 (1).

14 ~~2. That, that~~ the voluntary agreement provides that the child may be placed
15 more than 60 miles from the child's home.

16 ~~3. That and that~~ the placement is made to facilitate the anticipated adoptive
17 placement of the child under s. 48.833 (1) or 48.837.

18 ***b0359/1.1* SECTION 1131L.** 48.38 (4) (d) 1m. of the statutes is created to read:

19 48.38 (4) (d) 1m. That the placement is of a child with special needs, as defined
20 by rule promulgated under s. 48.975 (5) (b), that the placement is made to facilitate
21 the anticipated adoptive placement of the child under s. 48.833 (1) and that the
22 department, county department or child welfare agency making the placement has
23 determined under s. 48.833 (3) that consideration of the location of the proposed
24 adoptive parent's residence is not necessary to ensure the best interests of the child
25 in light of the child's need for care or treatment to meet those special needs.

1 ***b0359/1.1* SECTION 1131m.** 48.38 (4) (dm) of the statutes is created to read:
2 48.38 (4) (dm) In the case of a child with special needs, as defined by rule
3 promulgated under s. 48.975 (5) (b), who is placed to facilitate the anticipated
4 adoptive placement of the child under s. 48.833 (1), if the department, county
5 department or child welfare agency making the placement has determined under s.
6 48.833 (3) that consideration of the location of the proposed adoptive parent's
7 residence is necessary to ensure the best interests of the child in light of the child's
8 need for care or treatment to meet those special needs, documentation showing the
9 reasons why that consideration is necessary.

10 ***b0359/1.1* SECTION 1131r.** 48.434 (2) of the statutes is amended to read:
11 48.434 (2) Any birth parent of a child may file with the agency that placed the
12 child for adoption under s. 48.833 (1) or that was appointed the guardian of the child
13 under s. 48.837 (6) (d) a written authorization for the agency to release any available
14 information about the birth parent's identity and location to one or both adoptive
15 parents of the child.

16 ***b0359/1.1* SECTION 1131s.** 48.434 (3) of the statutes is amended to read:
17 48.434 (3) Any adoptive parent of a child may file with the agency that placed
18 the child for adoption under s. 48.833 (1) or that was appointed the guardian of the
19 child under s. 48.837 (6) (d) a written authorization for the agency to release any
20 available information about the adoptive parent's identity and location to one or both
21 birth parents of the child.

22 ***-0273/1.2* SECTION 1135.** 48.55 (title) of the statutes is amended to read:
23 **48.55 (title) State adoption information exchange and state adoption**
24 **center.**