

ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

LRB # 4724/1

INTRODUCTION # AB 880

Admin. Rule #

Subject

Eliminate the eight-bed restriction under COP-R and the four-bed restriction for COP-W/CIP II for provision of services in a CBRF up to 20 beds.

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

Increase Existing Appropriation Increase Existing Revenues
 Decrease Existing Appropriation Decrease Existing Revenues
 Create New Appropriation

Decrease Costs

Local: No local government costs

1. Increase Costs
 Permissive Mandatory
2. Decrease Costs
 Permissive Mandatory

3. Increase Revenues
 Permissive Mandatory
4. Decrease Revenues
 Permissive Mandatory

5. Types of Local Governmental Units Affected:
 Towns Villages Cities
 Counties Others _____
 School Districts WTCS Districts

Fund Sources Affected

GPR FED PRO PRS SEG SEG-S

Affected Ch. 20 Appropriations

20.435(4)(o)

Assumptions Used in Arriving at Fiscal Estimate:

This bill eliminates the eight-bed restriction under COP-R and the four-bed restriction under COP-W/CIP II for provision of services in a CBRF and limits service provision to 20-bed CBRFs, unless otherwise approved by DHFS under current standards. Currently, use of COP-R funds to provide services in CBRFs is restricted to eight-bed facilities and use of COP-W/CIP II funds to provide services in CBRFs is restricted to four-bed facilities, unless certain standards are met. The bill also eliminates the COP-R pilot project in Chippewa County.

Currently, counties may provide COP funded services for clients in CBRFs with greater than eight beds if the CBRF meets certain conditions. In 1998, there were 640 elderly clients and 25 physically disabled clients receiving COP funded services in CBRFs that had greater than eight beds. If counties shift clients from COP funding, which is 100% GPR funded, to COP-W/CIP II funding, which is funded approximately 40% GPR and 60% federal Medicaid funds, additional federal Medicaid funds will be claimed to cover the 60% federal match for these new waiver clients. Counties will be able to use the GPR funds that will become available when COP-R clients are moved to COP-W/CIP II for other COP program needs. Because the Department does not have precise information on CBRF size and CBRF costs for all existing COP clients, it is not possible to estimate the amount of additional federal revenue.

Long-Range Fiscal Implications:

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Date
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