

2005 DRAFTING REQUEST

Bill

Received: 03/16/2005

Received By: dkennedy

Wanted: As time permits

Identical to LRB:

For: Alberta Darling (608) 266-5830

By/Representing: Tom Petri (aide)

This file may be shown to any legislator: NO

Drafter: dkennedy

May Contact:

Addl. Drafters:

Subject: Health - medical assistance

Extra Copies:

Submit via email: YES

Requester's email: Sen.Darling@legis.state.wi.us

Carbon copy (CC:) to: robin.ryan@legis.state.wi.us

Pre Topic:

No specific pre topic given

Topic:

Milwaukee school district to be designated as MA health care provider in order to hire more school nurses

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	dkennedy 05/13/2005	jdyer 05/17/2005		_____			S&L
/1			pgreensl 05/17/2005	_____	lemery 05/17/2005	lemery 05/17/2005	

FE Sent For:

<END>

↳ At Intro.

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By/Representing: **Tom Petri (aide)**

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1/?	dkennedy	1 5/17 jld	5/17 pg	5/17 ps/yl			

FE Sent For:

<END>

Grant, Peter

From: Petri, Tom
Sent: Friday, March 11, 2005 12:47 PM
To: Grant, Peter
Subject: MPS Package of Bills

As per our conversation a few weeks ago, we're finally ready to put bills into drafting.

See the memo below. Enjoy the weekend and please call with questions or concerns! Thanks.



03.11.05 Memo on
MPS Policy Pa...

Tom Petri
Office of State Senator Alberta Darling
608-266-5830 / 1-800-863-1113
317 East

Peter et al,

These are the six pieces of MPS legislation Alberta wants to get drafted. She's in no immediate hurry, but because she believes many of these initiatives have been drafted before (either in a budget bill or as stand-alone legislation), she's hoping to get the stripes back sooner than later. Please call me with questions and if I can't answer them I will get you in touch with the lobbyists, legislators and interested participants who we're working with.

Thank you so much. Good luck!

Tom-

- PG 1) Give the MPS superintendent 2/3rds veto power over the annual budget as well as all financial, purchasing and contractual school board decisions.
- PG 2) Give the MPS board the ability to offer a longer contract to the superintendent (3 or 4 years instead of 2).
- 3) Impose an ethics code on the MPS board. This ethics code would mirror the city of Milwaukee's existing aldermanic code.
- JTK 4) Require the MPS board terms to mirror those of the city's aldermanic terms in regards to length and election cycles.
- DAK 5) Give MPS access to existing MA funds to hire more school nurses to improve student health care. The school district would have to be designated as a health care provider.
- PG 6) Roll back the parental consent requirement from 100% to 95% for MPS to meet requirements associated with the Neighborhood Schools Initiative.

BILL #1 - Same language as Senator Kanavas's LRB draft from this session

BILL #2 - ditto with bill #1 Both of these initiatives stem from the successful passage of Louisiana's HB 1659 which gave more power to the New Orleans's superintendent. Here's a link to the bill draft: www.legis.state.la.us/leg_docs/04RS/CVT1/OUT/0000LURU.PDF

Bill #3 - I don't have any suggested language for this one. I couldn't find the statutory site (if it even exists)

BILL #4 - All I have to go on is a resolution authored by a city councilman awhile back. The goal is to match up the school board's terms and elections with those of the alderman so they are up for election at the same time. Alberta feels that the school board elections don't draw enough interest because they are held at an inopportune timeframe.

Bill #5 We want to modify current law by drafting fiscally neutral legislation that will address the practice of Wisconsin paying for school-based health services. Alberta wants Medicaid to continue to reimburse school-based service providers 60% of the federal share of allowable charges for school medical services and related administrative costs. The remaining 40% of the federal match that is currently being deposited into the state's general fund, should be credited to the state's Medicaid fund instead.]

49.45 (39)(b)1.

20.435 (4)(b)

ADD:

'Payment for school medical services'

If a school district or a cooperative educational service agency elects to provide school medical services and meets all requirements the department shall reimburse the school district or cooperative educational service agency 60% of the federal share of allowable charges for the school medical services that it provides and for allowable administrative costs. Of the amount of federal matching Medicaid funds 40% will be credited to the state's Medicaid Fund. —

BILL #6 - We're looking to change the 100% requirement for MPS to get parental sign-off for transportation under the Neighborhood Schools Initiative. I think the changes in statute needed for the NSI issue are under 121.85. I think the changes below should hold the signatures needed at 95% instead of 100%.

ADD:

121.85(6)(am)4

4. In the 2003-04 school year and each school year thereafter:

121.85(6)(am)4.a

4.a. Subtract from 95% the percentage of pupils whose parents or guardians have provided the board of school directors with written consent to a pupil transfer to another attendance area.

ELIMINATE:

121.85(6)(am)5.

5. In the 2004-05 school year and each school year thereafter, the number of pupils whose parents or guardians have not provided the board of school directors with written consent to a pupil transfer to another attendance area.

Resolution introducing state legislation providing for election of all Milwaukee Public School Board members at the time of election for Milwaukee Mayor and Common Council members.

Currently state law provides for staggered election of Milwaukee Public School Board members (4-year terms) in the spring of odd - numbered years. This resolution introduces state legislation providing for election of all board members at the time of election for Milwaukee Mayor and Common Council members, commencing with the spring elections in 2000.

Whereas, Wisconsin State Statutes currently provide for staggered election of Milwaukee Public School Board members for 4-year terms in the spring of odd - numbered years; and

Whereas, Voter percentage turnout for School Board members is extremely low when compared to turnout for Mayor and Common Council members, particularly in years where there are few elections other than for school board members:

Mayor-Common Council spring primary - 1992- 33.9% Mayor-Common Council spring election - 1992 - 51.2% School board spring primary - 1993 - 35.8% School board spring election - 1993 - 22.2% School board spring primary - 1995 - 7.4% School board spring election - 1995 -21.9% Mayor-Common Council spring primary - 1996 -16.1% Mayor-Common Council spring election - 1996 - 41.5% School board spring primary - 1997 - 5.5% School board spring election - 1997 - 14.1% ; and

Whereas, Low voter percentage turnout for School Board members is conducive to special interest domination of the vote, which is not in the best interest of the community; and

Whereas, Interest in School Board elections could be heightened and voter percentage increased by having all School Board members elected at the time of election for Milwaukee Mayor and Common Council members, commencing with the spring elections in 2000; now, therefore, be it

Resolved, By the Common Council of the City of Milwaukee, that the Intergovernmental Relations Division-Department of Administration is directed to seek introduction and passage of state legislation providing for the election of all Milwaukee Public School Board members for 4-year terms at the time of election for Milwaukee Mayor and Common Council members, commencing with the spring elections in 2000.

Kennedy, Debora

From: Petri, Tom
Sent: Thursday, April 21, 2005 12:17 PM
To: Kennedy, Debora
Subject: Our MPS health-services bill

Deb,

To follow-up on our conversation from earlier this week: These are some jumbled notes I took during a recent conversation with an MPS representative....

Essentially what is happening now is that the state is taking the skim from the federal reimbursement to fill holes it claims are being left by the federal government. Of course that means that the state is leaving us with a hole in this area.

I'm not sure where the reasoning originated that the state is justified in taking the skim because "everything essentially evens out" because the state provides 2/3rds funding. The link between one and the other isn't clear. If the argument had been, "well the skim is justified because we give you so much extra in special ed. funding and your medicaid costs are largely related to special ed. students" it might have been more plausible. Of course a plausible argument and a good argument are two different things and special ed. funding has been dwindling so I doubt anyone would want to make that argument anyway. If I've interpreted the reasoning around the skim correctly I don't see why they don't do it for other sources of funding, why not take 40% of our Title I dollars...

In any event getting them to "skim less" is the objective. In the past a ceiling on how much the state could collect was in place and once the ceiling was reached the state's skim was reduced to 10%. For the 99-01 biennium there was a ceiling of \$16 million that the State could keep annually, then the State kept only 10% for all costs. This would be better than what we have now.

We could try to reinstate the ceiling or we could actually keep thinking about appropriating some of the skim for a protected school based services fund. A bit circular but it could get us closer to where we want to go.

I'm still working to get you more concrete, definitive language suggestions....hope this helps and doesn't further confuse.

Thanks for your patience.

Tom-

*Tom Petri
Office of State Senator Alberta Darling
316-South
608-266-5830 / 1-800-863-1113*

Kennedy, Debora

From: on behalf of Debora Kennedy

To: Petri, Tom

Subject: RE: MPS language

Tom--

Thank you for the new language. I'm not sure that I understand why the remaining percentage of the federal match should be deposited into the MA Trust Fund; I do not see what is to be gained by that, since s. 20.435 (4) (o), stats., (the appropriation under which the federal match received by the state is expended) will pay for MA services just as the MA Trust Fund will. If what you are trying to do is to keep track of the money that the school district or CESA is not reimbursed, it should be just as easy to do so if it remains in s. 20.435 (4) (o). I also will need permission from you to contact the LFB or DOA or DHFS to find out what is the amount of FFP received for school medical services and administrative costs in 2004.

Debora

-----Original Message-----

From: Petri, Tom

Sent: Friday, April 22, 2005 12:13 PM

To: Kennedy, Debora

Subject: FW: MPS language

Debora, This is the language we've put together. We're also looking at sitting down Thursday or Friday to discuss this further, especially if there is confusion on your end. I'll let you know.

Thanks very much. I hate asking for a bill draft on something I'm not familiar with....probably goes with the territory for you though...

Tom-

Current law states that a school district or CESA electing to provide school medical services must be reimbursed by DHFS for 60% of the federal share the state receives for allowable charges for the school medical services that it provides. In addition, DHFS must reimburse a school district or a CESA for 90% of the federal share the state receives for allowable administrative costs, using time studies, beginning in fiscal year 1999-2000. Wis Stat. 49.45 (39) (b). Our goal is to amend 49.45 (39) (b) 1. and 49.45 (39) (b) 2. relating to school-medical services.

Proposed language:

If a school district or a cooperative educational service agency elects to provide school medical services and meets all requirements, the department shall reimburse the school district or the cooperative education service agency for 60% of the federal share the state receives for the allowable charges for the school medical services. The department shall reimburse the school district or cooperative education service agency for 90% of the federal share the state receives for allowable administrative costs. The remaining percent of the federal match the state receives for school medical services and allowable administrative costs shall be deposited into the Medicaid Trust Fund. The department shall reimburse a school district and a cooperative educational service agency for 100% of the federal share

04/24/2005

the state receives for school medical services and allowable administrative costs under the medical assistance programs in excess of (2004 FFP state received for SBS). The reimbursement shall be based on the proportion of total school-based services for the school year that was provided by each school district, cooperative educational service agency, the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin School for the Deaf.

Kennedy, Debora

From: Petri, Tom
Sent: Friday, April 22, 2005 12:13 PM
To: Kennedy, Debora
Subject: FW: MPS language

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Kennedy, Debora

From: Kennedy, Debora
Sent: Monday, April 25, 2005 11:42 AM
To: Petri, Tom
Subject: RE: MPS language

Yes, I am available on Friday; I usually get into the office by 8:15. After that, any time is fine.

-----Original Message-----

From: Petri, Tom
Sent: Monday, April 25, 2005 11:40 AM
To: Kennedy, Debora
Subject: RE: MPS language

Thanks Debora,

You have my permission to get the FFB amounts. If you need anything in writing, just let me know.

I've invited the MPS folks to a meeting on Friday. Are you available to come over here? What time is best for you?

Tom-

From: Kennedy, Debora
Sent: Sunday, April 24, 2005 3:39 PM
To: Petri, Tom
Subject: RE: MPS language

Tom--

Thank you for the new language. I'm not sure that I understand why the remaining percentage of the federal match should be deposited into the MA Trust Fund; I do not see what is to be gained by that, since s. 20.435 (4) (o), stats., (the appropriation under which the federal match received by the state is expended) will pay for MA services just as the MA Trust Fund will. If what you are trying to do is to keep track of the money that the school district or CESA is not reimbursed, it should be just as easy to do so if it remains in s. 20.435 (4) (o). Do you have some other purpose here?

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Debora

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Sent: Friday, April 22, 2005 12:13 PM
To: Kennedy, Debora
Subject: FW: MPS language

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WCBVI + WESP DHH ?

Fy 2004-05?

?

how wd. this be calculated? amt of \$? students served? other?

Common carrier transportation costs?

Dollar for dollar
fy 2004-05
+ common carrier

Kennedy, Debora

From: Petri, Tom
Sent: Tuesday, April 26, 2005 7:29 PM
To: Kennedy, Debora
Subject: FW: Points to discuss on Friday

Debora,

This comes from the MPS lobbyist I've been talking to. Can you take a look at it prior to Friday? I'll call or email you with a specific time when we'll meet tomorrow or Thursday.
 Thanks so much.

Tom-

Referring to Wis. stat. 20.435 (4) (o), the drafting attorney has explained that the remaining federal share, being 40%, the state receives for allowable charges for school based service is already used to pay for MA Services. However, Wis. stat 20.255 (2) (b) states that amounts equal to the amounts paid by DHFS under s. 49.45 (39) (b) 1m. must lapse into the general fund. The department is adamant the federal draw down lapses into the general fund, and according to their website, updated this month, "Wisconsin Medicaid currently reimburses school-based services providers 60 percent of federal funding for school-based services and allowable administrative costs. The remaining 40 percent of federal funding is deposited in the State General Fund because of the state's contribution to special education in public schools."

- 1) Where is the federal drawn first appropriated for school-based services?
- 2) Does the state lapse funds into the general fund to make up for monies spent on special education based on payments from 49.45 (39) (b) 1.?
- 3) We want statutory language assuring the federal drawn down for school-based services are appropriated directly to the MA Trust Fund, we understand this does not have a direct effect on providers of school-based services.
- 4) We need a line item in the MA Trust Fund indicating how much federal drawn down is received each year for school-based services.

Wis. stat. 20.435 (4) (o): Federal aid; medical assistance. All federal moneys received for meeting costs of medical assistance administered under ss. 46.284 (5), 49.45 and 49.665, to be used for those purposes and for transfer to the medical assistance trust fund, for those purposes.

Wis. stat. 49.45: Medical assistance; administration.

Wis. stat. 20.255 (2) (b): Aids for special education and school age parents programs. The amounts in the schedule for the payment of aids for special education and school age parents programs under ss. 115.88, 115.93 and 118.255. On dates determined by the secretary of administration, amounts equal to the amounts paid by the department of health and family services under s. 49.45 (39) (b) 1m. shall lapse from this appropriation account to the general fund.

49.45 (39) (b) 1m. 'Supplementary payment for school medical services.' In addition to the

04/27/2005

reimbursement the department provides under subd.1. to a school district or cooperative services agency for school medical services, the department may make supplementary payments and allowable charges paid under subd.1. may not exceed applicable limitations on payments under 42 USC 1396a (a) (30) (A).

Wis. stat. 118.255 Health treatment services for children with special physical or mental health treatment needs.

Wis. stat. 118.255 (1) (a) Under this section "physical or mental health treatment services" means treatment for physical or orthopedic disability, developmental disability, emotional disturbance, hearing impairment, visual disability, speech or language disability; includes itinerant services such as evaluative and diagnostic services.

ASSEMBLY BILL 100

SECTION 177

1 **SECTION 177.** 20.255 (2) (b) of the statutes is amended to read:

2 20.255 (2) (b) *Aids for special education and school age parents programs.* The
3 amounts in the schedule for the payment of aids for special education and school age
4 parents programs under ss. 115.88, 115.93 and 118.255. ~~On dates determined by the~~
5 ~~secretary of administration, amounts equal to the amounts paid by the department~~
6 ~~of health and family services under s. 49.45 (39) (b) 1m. shall lapse from this~~
7 ~~appropriation account to the general fund.~~

8 **SECTION 178.** 20.255 (2) (bd) of the statutes is created to read:

9 20.255 (2) (bd) *Additional special education aid.* The amounts in the schedule
10 for aid under s. 115.881.

11 **SECTION 179.** 20.255 (2) (ce) of the statutes is created to read:

12 20.255 (2) (ce) *English for Southeast Asian children.* The amounts in the
13 schedule for aid to the Wausau school district for English instruction for Southeast
14 Asian children under s. 115.28 (35).

15 **SECTION 180.** 20.255 (2) (cr) of the statutes is renumbered 20.255 (2) (qr) and
16 amended to read:

17 20.255 (2) (qr) *Aid for pupil transportation.* ~~The~~ From the transportation fund,
18 the amounts in the schedule for the payment of state aid for transportation of public
19 and private school pupils under subch. IV of ch. 121.

20 **SECTION 181.** 20.255 (2) (cv) of the statutes is repealed.

21 **SECTION 182.** 20.255 (2) (dc) of the statutes is created to read:

22 20.255 (2) (dc) *Grants for differentiated compensation programs.* The amounts
23 in the schedule for grants to school districts for differentiated compensation
24 programs under s. 115.40. No moneys may be expended from this appropriation after
25 June 30, 2007.

ASSEMBLY BILL 100

SECTION 1147

1 and Hard of Hearing may submit, and the department shall allow, claims for common
2 carrier transportation costs as a school medical service unless the department
3 receives notice from the federal health care financing administration that, under a
4 change in federal policy, the claims are not allowed. If the department receives the
5 notice, a school district, cooperative educational service agency, the Wisconsin
6 Center for the Blind and Visually Impaired, or the Wisconsin Educational Services
7 Program for the Deaf and Hard of Hearing may submit, and the department shall
8 allow, unreimbursed claims for common carrier transportation costs incurred before
9 the date of the change in federal policy. The department shall promulgate rules
10 establishing a methodology for making reimbursements under this paragraph.
11 ~~Except as provided in subd. 1m., all~~ All other expenses for the school medical services
12 provided by a school district or a cooperative educational service agency shall be paid
13 for by the school district or the cooperative educational service agency with funds
14 received from state or local taxes. The school district, the Wisconsin Center for the
15 Blind and Visually Impaired, the Wisconsin Educational Services Program for the
16 Deaf and Hard of Hearing, or the cooperative educational service agency shall
17 comply with all requirements of the federal department of health and human
18 services for receiving federal financial participation.

19 **SECTION 1148.** 49.45 (39) (b) 1m. of the statutes is repealed.

20 **SECTION 1149.** 49.45 (39) (b) 2. of the statutes is amended to read:

21 49.45 (39) (b) 2. 'Payment for school medical services administrative costs.' The
22 department shall reimburse a school district or a cooperative educational service
23 agency specified under ~~subds. subd. 1. and 1m.~~ subd. 1. and shall reimburse the department
24 of public instruction on behalf of the Wisconsin Center for the Blind and Visually
25 Impaired or the Wisconsin Educational Services Program for the Deaf and Hard of

education and school age parents categorical aid, the federal Individuals with Disabilities Education Act, or the federal Medicaid program. For each child whose costs exceeded \$30,000, DPI would be required to pay an eligible applicant in the current school year an amount equal to 90% of the costs above \$30,000. If appropriated funds were insufficient to pay the full amounts, DPI would be required to prorate the payments among eligible applicants. Specify that these provisions would take effect on July 1, 2006.

[Bill Sections: 178, 1879, and 9437(2)]

8. MEDICAID SCHOOL BASED SERVICES

Governor: Delete the requirement established in 2003 Act 33 that DPI lapse to the general fund, from the aids for special education and school age parents appropriation, an amount equal to the amount paid by the Department of Health and Family Services (DHFS) under the supplementary payment for school medical services and related provisions. No amount was paid by DHFS and thus, no lapses occurred in the 2003-05 biennium under these provisions.

[Bill Sections: 177, 1147 thru 1149, and 1880]

9. HEAD START SUPPLEMENT

GPR	\$7,000,000
PR	- 7,000,000
Total	\$0

Governor: Delete \$3,500,000 PR annually and the current PR Head Start state supplement appropriation and related provisions. Increase the current GPR Head Start appropriation by \$3,500,000 GPR annually, above base level funding of \$3,712,500. The PR supplement appropriation is currently funded from Temporary Assistance for Needy Families (TANF) funds transferred from the Department of Workforce Development.

[Bill Sections: 188, 1107, and 1859]

10. FOUR-YEAR-OLD KINDERGARTEN GRANTS

GPR	\$3,000,000
-----	-------------

Governor: Provide \$3,000,000 in 2006-07 and create a categorical aid appropriation for grants to school districts to implement a four-year-old kindergarten (K4) program. Authorize school boards to apply to DPI for up to two annual grants. For the initial grant, require DPI to pay each eligible district up to \$3,000 for each K4 pupil enrolled in the district. For the second grant, require DPI to pay each eligible district up to \$1,500 for each K4 pupil enrolled in the district. Require DPI to give preference in awarding grants to districts that use community approaches to early education, as defined in administrative rule. Require DPI to prorate payments if funding in the appropriation is insufficient to pay all school districts, and to promulgate rules to implement the grant program. Specify that these provisions would take effect on July 1, 2006.

[Bill Sections: 183, 1874, and 9437(3)]

4/29/05 Pamie Leonard, Bill ? , Tom Petri,
Chris Thiel (MPS) (Broydrick)

Bill: A way to help MPS that wdn't "cost" any money
Cur practice, 40% of fed share isn't
pd. to school dist, but is depos in
general fund [?]

Wants FFP not go to gen fund

Pamie:

So up ~~to~~ 60% of 60% FFP

Do they get 10% GPR under 49.45-(39)(b) L.?

Decision: Beginning 7/1/08, req. payment of 100%
of FFP for sch med serv + admin
costs above \$ (2004-05 FFP received
for \$ school med services.)

Kennedy, Debora

From: on behalf of Debora Kennedy
To: Morgan, Charlie
Subject: MA school medical services and administrative costs

Charlie:

I am drafting a bill for Senator Darling to change the percentage of federal MA match that is accorded to school districts, CESAs, the Wisconsin Center for the Blind and Visually Impaired (WCBVI), and the Wisconsin Educational Services Program for the Deaf and Hard of Hearing (WESPDHH) as payment for the provision of MA school medical services. Currently, under s. 49.45 (39) (b) 1., stats., DHFS reimburses school districts, CESAs, WCBVI, and WESPDHH 60% of FFP for school medical services, plus certain common carrier transportation costs. Under s. 49.45 (39) (b) 1m., stats., DHFS may additionally make certain supplementary school medical services payments of both state gpr and federal MA funds. Lastly, under s. 49.45 (39) (b) 2., stats., DHFS must reimburse school districts, CESAs, and DPI on behalf of WCBVI and WESPDHH for 90% of the FFP for allowable administrative costs, using time studies.

Senator Darling wishes, in part, to additionally reimburse school districts, CESAs, WCBVI and WESPDHH for 100% of the FFP received by DHFS for school medical services and for allowable administrative costs that is in excess of the total amount of FFP received in fy 2004-05 for school medical services and administrative costs. (The proposal, at this point, says nothing about common carrier transportation costs.)

Senator Darling's proposal contemplates that this additional payment would be distributed based on the proportion of total school-based services for the school year that was provided by each school district, CESA, WCBVI, and WESPDHH.

I do not know the figure that represents the total amount of FFP received by DHFS for school medical services and allowable administrative costs in fiscal year 2004-05; would it be possible for you or a member of your team to provide me with this figure? Should common carrier transportation costs be included in the total amount?

Also, do you see a problem with the distribution standard? I am unsure whether the proportion would be based on total expense, number of pupils served, or another basis.

Thank you, as always, for your assistance.

Debora A. Kennedy
Managing Attorney
Legislative Reference Bureau
(608) 266-0137
debora.kennedy@legis.state.wi.us

Kennedy, Debora

From: Moore, Marlia
Sent: Wednesday, April 27, 2005 9:51 AM
To: Kennedy, Debora
Subject: MA reimbursement for school medical services

Contacts: Kennedy, Debora

Hi Debora,

I spoke with Matt Fanale, the analyst at DHFS that specializes in this area. He is going to get me the 03-04 actual numbers and will try to give me an annualized 04-05 number also. It sounds like transportation is included as an expense, but it is not referred to in this case as common carrier transportation. He will get me the data as soon as he can, with the goal of no later than early next week. If I don't hear from him by Monday at noon, I will follow-up with him.

Please let me know if you have any other questions about this issue.

Thanks,

Marlia K. Moore
Wisconsin Legislative Fiscal Bureau
1 East Main Street, Suite 301
Madison, WI 53703

Marlia.Moore@legis.state.wi.us
266-3847

Kennedy, Debora

From: Moore, Marlia
Sent: Wednesday, May 04, 2005 1:56 PM
To: Kennedy, Debora
Subject: FW: General SBS FFP Numbers

Hi Debora,
Here is the information I received from DHFS regarding school-based services. Please let me know if you need any more information.
Thanks,
Marlia

-----Original Message-----

From: Fanale, Matthew → 6-7415
Sent: Wednesday, May 04, 2005 11:12 AM
To: Moore, Marlia
Subject: General SBS FFP Numbers

Marlia,

I pulled the amounts of FFP that WI schools brought in under the School-Based Services benefit and it looks like in FY04 the districts/CESAs brought in was around \$12.25 million and thus far for FY05 the districts have brought in around \$8 million.

36.1 mil.
x 60%
↓

Please note that for FY05 there are most likely still a lot of claims coming in, but I pulled that number from a report run this past Monday so it's the most accurate number I could find.

Hope that helps.

-Matt Fanale
WI Medicaid Policy

(12.25 mil. figure)

1. Does this include common carrier transportation costs? — (Is language in 49.45(39)(b)1. still relevant?) **(Yes?)**
2. Does it include allowable admin costs? **(No)**
3. How much state share do schools get? **Any?**

No, but they get a large qpr appropriation (under 20.255(2)(b)) for aids for special education

Kennedy, Debora

From: on behalf of Debora Kennedy
To: Fanale, Matthew
Cc: Moore, Marlia
Subject: RE: SBS FFP Info

Matt--

I have two more questions about this info:

1. Does the \$36.1 million figure include reimbursement for common carrier transportation costs, and does it routinely do so? (That is the term that is used in the current statutes under s. 49.45 (39) (b) 1.; if reimbursement is routinely made for some kind of transportation costs that are not "common carrier transportation costs," I would appreciate knowing that.)

2. If the answer to #1. above is "yes," is the following language that is in s. 49.45 (39) (b) 1. still relevant: "A school district, cooperative educational service agency, the Wisconsin Center for the Blind and Visually Impaired or the Wisconsin Educational Services Program for the Deaf and Hard of Hearing may submit, and the department shall allow, claims for common carrier transportation costs as a school medical service unless the department receives notice from the federal health care financing administration that, under a change in federal policy, the claims are not allowed. If the department receives the notice, a school district, cooperative educational service agency, the Wisconsin Center for the Blind and Visually Impaired, or the Wisconsin Educational Services Program for the Deaf and Hard of Hearing may submit, and the department shall allow, unreimbursed claims for common carrier transportation costs incurred before the date of the change in federal policy."

I very much appreciate your assistance.

Debora Kennedy

-----Original Message-----

From: Fanale, Matthew
Sent: Thursday, May 05, 2005 2:04 PM
To: Kennedy, Debora; Moore, Marlia
Subject: Fwd: SBS FFP Info

Marlia and Debora,

Somehow my first (and innaccurate) email was not retrieved as I'd thought. Here is the correct info.

Sorry about the confusion.

-Matt

>>> Matthew Fanale 05/04/05 11:29AM >>>
Marlia,

School Districts/CESAs in WI brought in around \$36.1 million for FY04. Thus far for FY05 (which is skewed as many recent claims have most likely not been submitted) the districts have drawn down approximately \$23.5 million.

Of these amounts around 60% goes to the districts and 40% to the state.

Thank you.

-Matt Fanale

From Matt:

Actual reimbursement (FFP) that school districts
+ CESAs got in fy 2004-05 was

36.1	36.10
<u>.6</u>	<u>21.66</u>
21.66	14.44
SDs + CESAs Get	DHFS Keeps

DHFS Supervisor who has history of treatment of MA school-
based services: Marge Pifer 6-1940

Kennedy, Debora

From: Megna, Richard
Sent: Friday, May 13, 2005 2:04 PM
To: Kennedy, Debora; Moore, Marlia
Cc: Blaine, Robert; Johnston, James; Moyer, Andrew - Office of Governor Jim Doyle; Plona, Katie - Office of Governor Jim Doyle; Fanale, Matthew; Bove, Fredi-Ellen; Forsaith, Andrew; Hadidian, Ellen; Helgerson, Jason; Hermes, Ron
Subject: Fwd: Draft Statement to Debora

Debora & Marlia,

You had some questions on SBS and common carrier transportation. Attached is Matt's response to those questions. If you need anything else, please let me know.

Richard

6-9359

-----Original Message-----

Date: 05/13/2005 11:33 am -0500 (Friday)
From: Matthew Fanale
To: Megna, Richard
CC: McRae, Eileen
Subject: Draft Statement to Debora

Debora,

In response to your question regarding common carrier transportation, the WI MA School-Based Services (SBS) benefit does not include common carrier transportation, only specialized motor vehicles (SMVs). SBS providers can only bill for SMV transportation on days where medical services in the child's IEP are listed.

Please refer to the following Update for clarification on transportation:
<http://dhfs.wisconsin.gov/medicaid3/updates/99/99pdf/99-42.pdf> .

Thank you.

-Matt Fanale

To:
CESAs
SBS Providers
HMOs and Other
Managed Care
Programs
School Districts

School-based services transportation coverage changes

Covered transportation

For dates of service on and after July 1, 1999, Wisconsin Medicaid will cover school-based services (SBS) transportation as described in HCFA's *Medicaid and School Health Technical Assistance Guide*. A letter from HCFA summarizes this policy change. The following is an excerpt from that letter:

"The (Medicaid and School Health Technical Assistance) Guide indicates that transportation to and from school may be claimed as a Medicaid service when the child receives a medical service in school on a particular day and when transportation is specifically listed in the Individual Education Program (IEP) as a required service.

"It is our understanding that an IEP should include only specialized services that a child would not otherwise receive in the course of attending school. Therefore, HCFA would like to clarify that a child with special education needs under Individuals with Disabilities Education Act (IDEA) who rides the regular school bus to school with the other non-disabled children in his/her neighborhood should not have transportation listed in his/her IEP and the cost of that bus ride should not be billed to Medicaid.

"If a child requires transportation in a vehicle adapted to serve the needs of the disabled, including a specially adapted school bus, that transportation may be billed to Medicaid if the need for that specialized transportation is identified in the IEP. In addition, if a child resides in an area that does not have school bus transportation (such as those areas in close proximity to a school) but has a medical need for transportation that is noted in the IEP, that transportation may also be billed to Medicaid. As always, transportation from the school to a provider in the community also may be billed to Medicaid.

"When a state claims federal financial participation (FFP) [federal matching dollars] under the Medicaid program for transportation services as medical assistance under an approved reimbursement rate, the requirements for documentation of each service must be maintained for purposes of an audit trail. This usually takes the form of a trip log maintained by the provider of the specialized transportation service. ...

"FFP for IEP-related transportation services will only be available for services provided on or after July 1, 1999, as specified in this letter."

Required documentation

As indicated in previous Wisconsin Medicaid publications, SBS providers are required to have a system in place to verify that the child was in school receiving another Medicaid-covered SBS service on the same day that SBS transportation services were provided.

Medicaid-certified SBS providers bill for each child's actual miles traveled (e.g., while riding in an adapted school bus, van, or car to accommodate a disabling condition and/or medical need). This includes the miles the vehicle travels from its storage site (e.g., bus barn) to and from the child's home while not carrying the child.

SBS providers may use the child's actual miles traveled to convert the number of miles traveled to billable units (e.g., 1 mile = 1 unit). Providers may thereafter use that number of units (miles) for that child on each day the child receives another Medicaid-covered SBS service. Providers must document this number of units (miles) in the child's record each day the child receives another Medicaid-covered SBS service.

Refer to *Medicaid Update 98-13* for the mileage situations that Wisconsin Medicaid covers when transporting multiple children receiving another Medicaid-covered SBS service on that same day.

If you have questions about this policy change, call Provider Services at (800) 947-9627 or (608) 221-9883.

The Wisconsin Medicaid Update is the first source for provider information including Medicaid policy and billing information.

Wisconsin Medicaid is administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For provider questions, call the Medicaid fiscal agent at (800) 947-9627 or (608) 221-9883 or visit our web site at www.dhfs.state.wi.us/medicaid.



State of Wisconsin
2005 - 2006 LEGISLATURE

(WEDNESDAY, please)

D-NOTE

LRB-2468/21

DAK:A:...

JLD

~~PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION~~

under the Medical Assistance Program

Gen

1

AN ACT ...; relating to: reimbursement for school medical services.

(DHFS)
Analysis by the Legislative Reference Bureau

Under current law, the Medical Assistance (MA) Program is administered by the Department of Health and Family Services and is jointly funded with 60 percent federal funds (usually called federal financial participation, or FFP) and 40 percent state general purpose revenues.

Currently, for providing school medical services to pupils who are MA recipients, DHFS must reimburse school districts and cooperative educational service agencies (CESAs) for 60 percent of FFP. Similarly, and at the same rate, DHFS must reimburse the Department of Public Instruction (DPI) for those school medical services that are provided by the Wisconsin Center for the Blind and Visually Impaired (WCBVI) and the Wisconsin Education Services Program for the Deaf and Hard of Hearing (WESPDHH). All other expenses for school medical services provided by a school district or CESA must be paid for by the school district or CESA from state or local taxes, except that DHFS may supplement the school medical services reimbursement amount from state general purpose revenues and FFP. However, if a supplement is made, DPI must, from a general purpose revenues appropriation account for aids for special education, lapse to the general fund a sum that equals the amount of the supplement. DHFS must also, using time studies, reimburse school districts, CESAs, and DPI (on behalf of WCBVI and WESPDHH) for 90 percent of FFP for allowable administrative costs related to school medical services.

This bill eliminates DHFS' authority to supplement the school medical services reimbursement amount for school districts and CESAs and the requirement that

GPR

DPI lapse to the general fund an amount equal to any such supplement made. Instead, the bill requires, ^{that} beginning July 1, 2008, ~~that~~ DHFS reimburse a school district or CESA for 100 percent of that portion of FFP for allowable charges for school medical services that is in excess of \$21,660,000. DHFS must distribute this required reimbursement based on the percentage of total reimbursement for school medical services that each school district and CESA received in the immediately previous fiscal year.

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

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

1 **SECTION 1.** 20.255 (2) (b) [✓] of the statutes is amended to read:

2 20.255 (2) (b) *Aids for special education and school age parents programs.* The
 3 amounts in the schedule for the payment of aids for special education and school age
 4 parents programs under ss. 115.88, 115.93 and 118.255. [✓] ~~On dates determined by the~~
 5 ~~secretary of administration, amounts equal to the amounts paid by the department~~
 6 ~~of health and family services under s. 49.45 (39) (b) 1m. shall lapse from this~~
 7 ~~appropriation account to the general fund.~~

History: 1971 c. 42, 56, 125; 1971 c. 152 s. 38; 1971 c. 154 s. 80; 1971 c. 211 ss. 24, 126; 1971 c. 215; 1973 c. 89 s. 20 (2); 1973 c. 90, 190, 243, 300, 307, 333, 336; 1975 c. 39 ss. 97 to 109, 732 (1); 1975 c. 105, 220, 224, 395; 1977 c. 26 s. 75; 1977 c. 29; 1977 c. 83 s. 26; 1977 c. 418 ss. 88m to 90, 929 (55); 1979 c. 34 ss. 164 to 191, 2102 (43) (a); 1979 c. 221 ss. 96e to 97w, 2200 (43); 1979 c. 331; 1979 c. 346 ss. 9, 15; 1981 c. 20, 86, 169; 1981 c. 314 s. 146; 1983 a. 22 s. 6; 1983 a. 27 ss. 158 to 212, 2200 (42), 2202 (42); 1983 a. 192; 1983 a. 333 s. 6; 1983 a. 370; 1985 a. 29, 56, 75, 120; 1987 a. 27, 339, 399; 1989 a. 31, 56, 114, 122, 269, 299, 309, 336, 359; 1991 a. 32, 39, 196, 269; 1993 a. 16, 168, 367, 377, 437, 454, 458, 490, 491; 1995 a. 27 ss. 563, 567 to 599, 622, 623, 9145 (1); 1995 a. 49, 227; 1997 a. 27, 113, 164, 237, 252; 1999 a. 9, 185; 2001 a. 16, 57, 105, 109; 2003 a. 33.

8 **SECTION 2.** 49.45 (39) (b) 1. [✓] of the statutes is amended to read:

9 49.45 (39) (b) 1. 'Payment for school medical services.' If a school district or a
 10 cooperative educational service agency elects to provide school medical services and
 11 meets all requirements under par. (c), the department shall reimburse the school
 12 district or the cooperative educational service agency for ~~60%~~ ⁶⁰ percent of the federal
 13 share of allowable charges for the school medical services that it provides and, as
 14 specified in subd. 2., for allowable administrative costs. If the Wisconsin Center for
 15 the Blind and Visually Impaired or the Wisconsin Educational Services Program for

1 the Deaf and Hard of Hearing elects to provide school medical services and meets all
2 requirements under par. (c), the department shall reimburse the department of
3 public instruction for ~~60%~~⁶⁰ percent of the federal share of allowable charges for the
4 school medical services that the Wisconsin Center for the Blind and Visually
5 Impaired or the Wisconsin Educational Services Program for the Deaf and Hard of
6 Hearing provides and, as specified in subd. 2., for allowable administrative costs. A
7 school district, cooperative educational service agency, the Wisconsin Center for the
8 Blind and Visually Impaired or the Wisconsin Educational Services Program for the
9 Deaf and Hard of Hearing may submit, and the department shall allow, claims for
10 common carrier transportation costs as a school medical service ~~unless if~~ the
11 department receives notice from the federal health care financing administration
12 that, under a change in federal policy, the claims are not allowed. ~~If the department~~
13 ~~receives the notice, a school district, cooperative educational service agency, the~~
14 ~~Wisconsin Center for the Blind and Visually Impaired, or the Wisconsin Educational~~
15 ~~Services Program for the Deaf and Hard of Hearing may submit, and the department~~
16 ~~shall allow, unreimbursed claims for common carrier transportation costs incurred~~
17 ~~before the date of the change in federal policy.~~ The department shall promulgate
18 rules establishing a methodology for making reimbursements under this paragraph.
19 Except as provided in subd. ~~1m 3.~~^{3.} all other expenses for the school medical services
20 provided by a school district or a cooperative educational service agency shall be paid
21 for by the school district or the cooperative educational service agency with funds
22 received from state or local taxes. The school district, the Wisconsin Center for the
23 Blind and Visually Impaired, the Wisconsin Educational Services Program for the
24 Deaf and Hard of Hearing, or the cooperative educational service agency shall

1 comply with all requirements of the federal department of health and human
2 services for receiving federal financial participation.

History: 1971 c. 40 s. 93; 1971 c. 42, 125; 1971 c. 213 s. 5; 1971 c. 215, 217, 307; 1973 c. 62, 90, 147; 1973 c. 333 ss. 106g, 106h, 106j, 201w; 1975 c. 39; 1975 c. 223 s. 28; 1975 c. 224 ss. 54h, 56 to 59m; 1975 c. 383 s. 4; 1975 c. 411; 1977 c. 29, 418; 1979 c. 34 ss. 837f to 838, 2102 (20) (a); 1979 c. 102, 177, 221, 355; 1981 c. 20 ss. 839 to 854, 2202 (20) (r); 1981 c. 93, 317; 1983 a. 27 ss. 1046 to 1062m, 2200 (42); 1983 a. 245, 447, 527; 1985 a. 29 ss. 1026m to 1031d, 3200 (23), (56), 3202 (27); 1985 a. 120, 176, 269; 1985 a. 332 ss. 91, 251 (5), 253; 1985 a. 340; 1987 a. 27 ss. 989r to 1000s, 2247, 3202 (24); 1987 a. 186, 307, 339, 399; 1987 a. 403 s. 256; 1987 a. 413; 1989 a. 6; 1989 a. 31 ss. 1402 to 1452g, 2909g, 2909i; 1989 a. 107, 173, 310, 336, 351, 359; 1991 a. 22, 39, 80, 250, 269, 315, 316; 1993 a. 16 ss. 1362g to 1403, 3883; 1993 a. 27, 107, 112, 183, 212, 246, 269, 335, 356, 437, 446, 469; 1995 a. 20; 1995 a. 27 ss. 2947 to 3002r, 7299, 9126 (19), 9130 (4), 9145 (1); 1995 a. 191, 216, 225, 289, 303, 398, 417, 457; 1997 a. 3, 13, 27, 114, 175, 191, 237, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109; 2003 a. 33, 318, 321.

3 **SECTION 3.** 49.45 (39) (b) 1m. of the statutes is repealed.

4 **SECTION 4.** 49.45 (39) (b) 2. of the statutes is amended to read:

5 49.45 (39) (b) 2. 'Payment for school medical services administrative costs.' The
6 department shall reimburse a school district or a cooperative educational service
7 agency specified under subsds. 1. and ~~1m~~ ³, and shall reimburse the department of
8 public instruction on behalf of the Wisconsin Center for the Blind and Visually
9 Impaired or the Wisconsin Educational Services Program for the Deaf and Hard of
10 Hearing for ~~90%~~ ⁹⁰ percent of the federal share of allowable administrative costs, using
11 time studies, beginning in fiscal year 1999–2000. A school district or a cooperative
12 educational service agency may submit, and the department of health and family
13 services shall allow, claims for administrative costs incurred during the period that
14 is up to 24 months before the date of the claim, if allowable under federal law.

History: 1971 c. 40 s. 93; 1971 c. 42, 125; 1971 c. 213 s. 5; 1971 c. 215, 217, 307; 1973 c. 62, 90, 147; 1973 c. 333 ss. 106g, 106h, 106j, 201w; 1975 c. 39; 1975 c. 223 s. 28; 1975 c. 224 ss. 54h, 56 to 59m; 1975 c. 383 s. 4; 1975 c. 411; 1977 c. 29, 418; 1979 c. 34 ss. 837f to 838, 2102 (20) (a); 1979 c. 102, 177, 221, 355; 1981 c. 20 ss. 839 to 854, 2202 (20) (r); 1981 c. 93, 317; 1983 a. 27 ss. 1046 to 1062m, 2200 (42); 1983 a. 245, 447, 527; 1985 a. 29 ss. 1026m to 1031d, 3200 (23), (56), 3202 (27); 1985 a. 120, 176, 269; 1985 a. 332 ss. 91, 251 (5), 253; 1985 a. 340; 1987 a. 27 ss. 989r to 1000s, 2247, 3202 (24); 1987 a. 186, 307, 339, 399; 1987 a. 403 s. 256; 1987 a. 413; 1989 a. 6; 1989 a. 31 ss. 1402 to 1452g, 2909g, 2909i; 1989 a. 107, 173, 310, 336, 351, 359; 1991 a. 22, 39, 80, 250, 269, 315, 316; 1993 a. 16 ss. 1362g to 1403, 3883; 1993 a. 27, 107, 112, 183, 212, 246, 269, 335, 356, 437, 446, 469; 1995 a. 20; 1995 a. 27 ss. 2947 to 3002r, 7299, 9126 (19), 9130 (4), 9145 (1); 1995 a. 191, 216, 225, 289, 303, 398, 417, 457; 1997 a. 3, 13, 27, 114, 175, 191, 237, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109; 2003 a. 33, 318, 321.

15 **SECTION 5.** 49.45 (39) (b) 3. of the statutes is created to read:

16 49.45 (39) (b) 3. Beginning July 1, 2008, in addition to the reimbursement the
17 department provides under subsds. 1. and 2., the department shall in each fiscal year
18 reimburse school districts and a cooperative educational service agencies for 100
19 percent of that portion of the federal share of allowable charges for school medical
20 services that is in excess of \$21,660,000. The distribution of this reimbursement
21 shall be based on the percentage of total reimbursement under subd. 1 that each

'Supplement for school medical services.'

1 school district and cooperative educational service agency received in the
2 immediately previous fiscal year.

INSERT 5-2
3

(END)

D-NOTE

Section #. 115.882 of the statutes is amended to read:

DO NOT STRIKE

115.882 Payment of state aid. Funds appropriated under s. 20.255 (2) (b) shall be used first for the purpose of s. 115.88 (4). Costs eligible for reimbursement from the appropriation under s. 20.255 (2) (b) under ss. 115.88 (1m) to (3), (6) and (8), 115.93, and 118.255 (4) shall be reimbursed at a rate set to distribute the full amount appropriated for reimbursement for the costs, ~~less the amount paid by the department of health and family services under s. 20.435 (4) (b) and (c) under s. 49.45 (39) (b) 1m,~~ not to exceed 100%.

History: 1997 a. 164; 1999 a. 9; 2001 a. 104; 2003 a. 33.

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-2468/2dn

DAK:.....

JLD

✓ DO NOT DELETE

60 percent of
provided for school medical services
provided by school districts and
CESAs in fy 2003-04. 2

To Senator Darling:

Currently, DHFS is *required*, under s. 49.45 (39) (b) 1., stats., to provide school districts, CESAs, and DPI (on behalf of the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin Education Services Program for the Deaf and Hard of Hearing) only 60 percent of the federal share (FFP) of allowable MA school medical services; since FFP itself is 60 percent of the total MA payment, DHFS is providing only 60 percent of 60 percent of the total MA payment.

required to provide

This bill repeals s. 49.45 (39) (b) 1m., stats., and part of s. 20.255 (2) (b), stats. These provisions authorized (but did not *require*) DHFS to supplement the MA school medical services payment, and required that DPI lapse to the general fund an identical amount of any supplement made. These provisions are repealed in 2005 AB-100 (the biennial budget bill); apparently, DHFS has never made such a supplement.

1 The bill creates s. 49.45 (39) (b) 3., which requires DHFS in each fiscal year to supplement the MA school medical services payment to school districts and CESAs for 100 percent of FFP after DHFS has first paid (at 60 percent FFP) \$21,660,000. The \$21,660,000 figure is the total FFP figure did not include payment to DPI on behalf of the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin Education Services Program for the Deaf and Hard of Hearing in s. 49.45 (39) (b) 3., because the \$21,600,000 figure evidently only describes what was paid to school districts and CESAs. Do you want DPI to receive this additional payment? If so, I will obtain the correct total figure and redraft.

Also, after speaking to Richard Megna of DHFS, I have repealed a portion of s. 49.45 (39) (b) 1., stats., that refers to claims for common carrier transportation costs as a school medical service. According to Richard, the federal health care financing administration has not allowed these claims since 1997, so the language, which allows claims until the feds prohibit them, is somewhat misleading.

Please let me know if I may provide you with further assistance on this bill.

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137
E-mail: debora.kennedy@legis.state.wi.us

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-2468/1dn
DAK:jld:pg

May 17, 2005

To Senator Darling:

Currently, DHFS is *required*, under s. 49.45 (39) (b) 1., stats., to provide school districts, CESAs, and DPI (on behalf of the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin Education Services Program for the Deaf and Hard of Hearing) only 60 percent of the federal share (FFP) of allowable MA school medical services; since FFP itself is 60 percent of the total MA payment, DHFS is required to provide only 60 percent of 60 percent of the total MA payment.

This bill repeals s. 49.45 (39) (b) 1m., stats., and part of s. 20.255 (2) (b), stats. These provisions authorized (but did not *require*) DHFS to supplement the MA school medical services payment, and required that DPI lapse to the general fund an identical amount of any supplement made. These provisions are repealed in 2005 AB-100 (the biennial budget bill); apparently, DHFS has never made such a supplement.

The bill creates s. 49.45 (39) (b) 3., which *requires* DHFS in each fiscal year to supplement the MA school medical services payment to school districts and CESAs for 100 percent of FFP after DHFS has first paid (at 60 percent FFP) \$21,660,000. The \$21,660,000 figure is 60 percent of the total FFP figure for school medical services provided by school districts and CESAs in fy 2003-04. I did not include payment to DPI on behalf of the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin Education Services Program for the Deaf and Hard of Hearing in s. 49.45 (39) (b) 3., because the \$21,600,000 figure evidently only describes what was paid to school districts and CESAs. Do you want DPI to receive this additional payment? If so, I will obtain the correct total figure and redraft.

Also, after speaking to Richard Megna of DHFS, I have repealed a portion of s. 49.45 (39) (b) 1., stats., that refers to claims for common carrier transportation costs as a school medical service. According to Richard, the federal health care financing administration has not allowed these claims since 1997, so the language, which allows claims until the feds prohibit them, is somewhat misleading.

Please let me know if I may provide you with further assistance on this bill.

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137
E-mail: debora.kennedy@legis.state.wi.us

Emery, Lynn

From: Petri, Tom
Sent: Tuesday, May 17, 2005 4:05 PM
To: LRB.Legal
Subject: Draft review: LRB 05-2468/1 Topic: Milwaukee school district to be designated as MA health care provider in order to hire more school nurses

It has been requested by <Petri, Tom> that the following draft be jacketed for the SENATE:

Draft review: LRB 05-2468/1 Topic: Milwaukee school district to be designated as MA health care provider in order to hire more school nurses