

### Fiscal Estimate - 2017 Session

Original     
  Updated     
  Corrected     
  Supplemental

<b>LRB Number</b> 17-3484/1	<b>Introduction Number</b> AB-0392
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**Description**  
 maintaining access and reimbursements to certain family planning providers in the Medical Assistance program

**Fiscal Effect**

**State:**

<input type="checkbox"/> No State Fiscal Effect	<input type="checkbox"/> Increase Existing Revenues	<input checked="" type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Decrease Existing Revenues	
<input type="checkbox"/> Increase Existing Appropriations		<input type="checkbox"/> Decrease Costs
<input type="checkbox"/> Decrease Existing Appropriations		
<input type="checkbox"/> Create New Appropriations		

**Local:**

<input type="checkbox"/> No Local Government Costs		
<input type="checkbox"/> Indeterminate		
1. <input type="checkbox"/> Increase Costs	3. <input type="checkbox"/> Increase Revenue	5. Types of Local Government Units Affected <input type="checkbox"/> Towns <input type="checkbox"/> Village <input type="checkbox"/> Cities <input type="checkbox"/> Counties <input type="checkbox"/> Others <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	
2. <input type="checkbox"/> Decrease Costs	4. <input type="checkbox"/> Decrease Revenue	
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	

<b>Fund Sources Affected</b>	<b>Affected Ch. 20 Appropriations</b>
<input checked="" type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS 20.435 (4) (b), 20.435 (4) (bm)	

<b>Agency/Prepared By</b>	<b>Authorized Signature</b>	<b>Date</b>
DHS/ Sara Koliner (608) 267-5147	Andy Forsaith (608) 266-7684	8/30/2017

## Fiscal Estimate Narratives

DHS 8/30/2017

LRB Number	17-3484/1	Introduction Number	AB-0392	Estimate Type	Original
<b>Description</b> maintaining access and reimbursements to certain family planning providers in the Medical Assistance program					

### Assumptions Used in Arriving at Fiscal Estimate

Under current federal statute, any person eligible for Medical Assistance may use the provider of his or her choice, provided no funding prohibition exists for that provider. Under AB 392, should a federal law, regulation, or executive order prohibit federal moneys from being paid to a nonpublic family planning provider because of the scope of services offered by the provider, a state-funded family planning program would provide reimbursement for family planning services covered under Medicaid.

In order to process the alternate payment, the Department of Health Services (DHS) would require software updates with unique billing instructions for a specified provider in the Wisconsin Medicaid Management Information System. The Department estimates that such updates would require one-time work costing between \$10,500 and \$160,000, for an average one-time cost of \$85,300 GPR.

The actual cost of reimbursement to the provider would vary depending on the number of MA eligible patients served by the provider and specific services performed. The largest non-public MA family planning services provider in the state is Planned Parenthood of Wisconsin (PPW). Should PPW fall under the bill's definition of a federal funding prohibition, DHS would be responsible for paying the federal portion of reimbursement for all family planning services provided to MA eligible patients by PPW. In 2015, that cost would have been \$5,740,200 GPR. In 2016, that cost would have been \$4,852,600. Assuming expenses stay constant, the Department estimates this would cost an additional \$5,296,400 GPR per year on top of the state's current reimbursement.

### Long-Range Fiscal Implications