PUBLIC NOTICE

Department of Health Services (Medicaid Reimbursement for Personal Care Services)

the authority of Title XIX of the Social Security Act and ss. 49.43 to 49.47, Wisconsin Statutes program, administered by the State's Department of Health Services (the Department), is called Assistance (MA) or Medicaid. In addition, Wisconsin has expanded this program to create the BadgerCare Plus programs under the authority of Title XIX and Title XXI of the Social Securit s. 49.471 of the Wisconsin Statutes. Federal statutes and regulations require that a state plan be that provides the methods and standards for reimbursement of covered services. A plan that des reimbursement system for the services (methods and standards for reimbursement) is now in ef

The State of Wisconsin reimburses providers for services provided to Medical Assistance recip

Change in Payment Methods

Among the services provided to recipients of services under Medical Assistance and BadgerCa personal care services. The current proposal is to increase reimbursement rates for personal car Under this proposal, hourly rates would increase from an hourly rate of \$16.08 to \$16.40 in 20 [state fiscal year (SFY) 2018] and to \$16.73 in 2018-19 (SFY year 2019).

The change is tentatively expected to be effective July 1, 2017. Final resolution of this propose contingent upon adoption of the biennial budget bill by the Wisconson Legislature and signatur bill by the Governor. Pending the finalization of the underlying legislation, this change will apply claims with dates of service on or after the effective date.

The change to Medicaid and BadgerCare Plus is projected to result in increased annual expendition \$5,034,300 all funds (AF), composed of \$2,085,900 state funds/general purpose revenue (GPR \$2,948,400 federal match (FED). In SFY 2019 the anticipated increased annual expenditures w \$9,936,300 all funds, composed of \$4,111,200 GPR and \$5,825,100 FED.

Copies of Changes

Copies of the final legislation when enacted may be obtained free of charge by calling or writin follows:

Regular Mail:
Al Matano
Bureau of Fiscal Management
Division of Medicaid Services
P.O. Box 309
Madison, WI 53701-0309

<u>Fax</u>: (608) 266-1096 Attention: Al Matano <u>Telephone</u>: Al Matano Bureau of Fiscal Management (608) 267-6848

E-Mail: Alfred.Matano@dhs.wisconsin.gov

Copies of the state plan change will be made available for review at the main office of any coudepartment of social services or human services.

Written Comments

Written comments are welcome. Written comments on the proposed changes may be sent by F. mail, or regular mail to the Division of Medicaid Services. The FAX number is (608) 266-1096 mail address is Alfred.Matano@dhs.wisconsin.gov. Regular mail can be sent to the above addressite to the above addressite comments will be reviewed and considered.

The written comments will be available for public review between the hours of 7:45 a.m. and 4 daily in Room 350 of the State Office Building, 1 West Wilson Street, Madison, Wisconsin. Romay be made in the proposed changed methodology based on comments received.