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State of Misconsin 2017 - 2018 LEGISLATURE

LRBb0826/1 SWB:kjf

SENATE AMENDMENT 10, TO ASSEMBLY BILL 64

September 15, 2017 - Offered by Senators Hansen, Larson, Ringhand, Johnson, Carpenter, L. Taylor, Risser, Vinehout, Bewley and Wirch.

At the locations indicated, amend the bill, as shown by assembly substitute amendment 1, as follows:

1. Page 531, line 15: after that line insert:

"Section 933t. 49.471 (4m) of the statutes is created to read:

49.471 (4m) Purchase options for BadgerCare Plus and the assistance for Childless adults demonstration project. (a) 1. The department shall, if required, request a waiver from or submit amendments to the state Medical Assistance plan to the secretary of the federal department of health and human services to establish a program that allows individuals with income above the maximum income eligibility limit applicable under this section or the assistance for childless adults demonstration project under s. 49.45 (23), and who otherwise meet the eligibility requirements under this section or under s. 49.45 (23), the option of purchasing coverage through this section or through the demonstration project under s. 49.45

- (23) instead of purchasing an individual health plan through private insurance. The department shall also include a request for any federal waiver or state Medical Assistance plan amendments necessary to allow an option for small businesses to purchase coverage for their employees under this section as part of the small business health options program through an exchange under 42 USC 18031.
- 2. The department shall seek any federal waiver and state Medical Assistance plan amendments necessary to allow individuals who qualify under subd. 1. to use advanced tax credits and cost-sharing credits, if eligible, to purchase one of the options described under subd. 1.
- (b) 1. The department shall coordinate the administration of the purchase options under this subsection with the programs under this section and s. 49.45 (23) to maximize efficiency and improve the continuity of care, consistent with the requirements of this section and s. 49.45 (23). The department shall seek to implement mechanisms to ensure the long-term financial sustainability of the programs under this section and s. 49.45 (23). These mechanisms must address issues related to minimizing adverse selection, the state financial risk and contribution, and negative impacts to premiums in the individual and group insurance markets.
- 2. The purchase option program shall include, at a minimum, all of the following attributes:
- a. Establishment of an annual per enrollee premium rate similar to the average rate paid by the state to managed care plan contractors.
- b. Establishment of a benefit set equal to the benefits covered under this section and s. 49.45 (23).

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- c. Annual enrollment that is limited to the same annual open enrollment periods established for the programs under this section and s. 49.45 (23).
 - d. The ability for the department to adjust the purchase option's actuarial value to a value no lower than 87 percent.
 - e. Reimbursement mechanisms for addressing potential increased costs to the programs under this section and s. 49.45 (23).
 - (c) By March 1, 2018, the department of health services shall submit a report to the appropriate standing committee in each house of the legislature under s. 13.172 (3) that provides information on the status of the request for a federal waiver and the results from actuarial and economic analyses that are necessary for a waiver proposal.
 - (d) If any necessary waiver or amendments to the state plan described under par. (a) 1. are approved, the department shall implement the program. If the department is authorized to implement the program, and if any waiver or state plan amendment described under par. (a) 2. is necessary and is approved, or if the department determines neither a waiver nor state plan amendment is necessary, the department shall allow the purchase options described under par. (a) 2.".

18 (END)