



State of Wisconsin
2015 - 2016 LEGISLATURE

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MPG&TJD:wlj

**ASSEMBLY AMENDMENT 29,
TO SENATE BILL 21**

July 8, 2015 – Offered by Representatives HESSELBEIN, MILROY, SINICKI and BARCA.

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

3 **1.** At the appropriate places, insert all of the following:

4 “**SECTION 1.** 49.45 (23) (a) of the statutes is amended to read:

5 49.45 (23) (a) The department shall request a waiver from the secretary of the
6 federal department of health and human services to permit the department to
7 conduct a demonstration project to provide health care coverage to adults who are
8 under the age of 65, who have family incomes not to exceed ~~100~~ 133 percent of the
9 poverty line ~~before application of the 5 percent income disregard under 42 CFR~~
10 ~~435.603 (d), except as provided in s. 49.471 (4g),~~ and who are not otherwise eligible
11 for medical assistance under this subchapter, the Badger Care health care program
12 under s. 49.665, or Medicare under 42 USC 1395 et seq.

13 **SECTION 2.** 49.471 (1) (cr) of the statutes is created to read:

1 49.471 (1) (cr) “Enhanced federal medical assistance percentage” means a
2 federal medical assistance percentage described under 42 USC 1396d (y) or (z).

3 **SECTION 3.** 49.471 (4) (a) 4. b. of the statutes is amended to read:

4 49.471 (4) (a) 4. b. The Except as provided in sub. (4g), the individual’s family
5 income does not exceed ~~100~~ 133 percent of the poverty line ~~before application of the~~
6 ~~5 percent income disregard under 42 CFR 435.603 (d).~~

7 **SECTION 4.** 49.471 (4g) of the statutes is created to read:

8 49.471 (4g) **MEDICAID EXPANSION; FEDERAL MEDICAL ASSISTANCE PERCENTAGE.** (a)
9 For services provided to individuals described under sub. (4) (a) 4. and s. 49.45 (23),
10 the department shall comply with all federal requirements to qualify for the highest
11 available enhanced federal medical assistance percentage. The department shall
12 submit any amendment to the state medical assistance plan, request for a waiver of
13 federal Medicaid law, or other approval required by the federal government to
14 provide services to the individuals described under sub. (4) (a) 4. and s. 49.45 (23) and
15 qualify for the highest available enhanced federal medical assistance percentage.

16 (b) If the department does not qualify for an enhanced federal medical
17 assistance percentage, or if the enhanced federal medical assistance percentage
18 obtained by the department is lower than printed in federal law as of July 1, 2013,
19 for individuals eligible under sub. (4) (a) 4. or s. 49.45 (23), the department shall
20 submit to the joint committee on finance a fiscal analysis comparing the cost to
21 maintain coverage for adults who are not pregnant and not elderly at up to 133
22 percent of the poverty line to the cost of limiting eligibility to those adults with family
23 incomes up to 100 percent of the poverty line. The department may reduce income
24 eligibility for adults who are not pregnant and not elderly from up to 133 percent of

1 the poverty line to up to 100 percent of the poverty line only if this reduction in income
2 eligibility levels is approved by the joint committee on finance.”.

3 **2.** Page 195, line 7: decrease the dollar amount for fiscal year 2015–16 by
4 \$113,100,000 and decrease the dollar amount for fiscal year 2016–17 by
5 \$247,400,000 for the purpose of providing Medical Assistance to certain adults with
6 incomes up to 133 percent of the federal poverty line.

7 **3.** Page 447, line 21: after that line insert:

8 “**SECTION 1452a.** 45.40 (2) (a) of the statutes is amended to read:

9 45.40 (2) (a) The department may provide health care aid to a veteran for
10 dental care, including dentures; vision care, including eyeglass frames and lenses;
11 and hearing care, including hearing aids; and care related to mental illness or
12 treatment for substance abuse.

13 **SECTION 1452b.** 45.40 (2) (d) of the statutes is created to read:

14 45.40 (2) (d) The department shall provide a voucher for care related to mental
15 illness or treatment for substance abuse within 48 hours after a request to the
16 department or through a county veterans service office for such care, including
17 private and emergency counseling, family and marriage counseling, and suicide
18 prevention. A veteran or eligible family member is not required to be denied care at
19 a U.S. department of veterans affairs hospital or clinic or be denied coverage by the
20 U.S. department of veterans affairs, state medical assistance, or other insurance
21 before seeking and receiving a voucher under this paragraph.”.

22 **4.** Page 1545, line 4: after that line insert:

