



1995 ASSEMBLY BILL 547

September 6, 1995 - Introduced by Representatives WALKER, KREIBICH, GROTHMAN, OTT, MUSSER, HAHN, SERATTI, BALDUS, MURAT, PLACHE, F. LASEE, WASSERMAN, FREESE, HANSON, R. YOUNG, MEYER and OLSEN, cosponsored by Senators ROSENZWEIG, COWLES, JAUCH and BURKE. Referred to Committee on Welfare Reform.

1 **AN ACT to amend** 49.45 (18) (intro.) of the statutes; **relating to:** collection of
2 copayments, coinsurance and deductibles under the medical assistance
3 program.

Analysis by the Legislative Reference Bureau

Under current law, certain medical assistance recipients are required to pay certain copayments, coinsurance or deductibles for medical assistance services. Current law requires the provider of the service to collect the allowable copayment, coinsurance or deductible. The department of health and social services (DHSS) reduces payment to the service provider by the amount of the allowable copayment, coinsurance or deductible.

This bill amends this provision so that the service provider is not required to collect the allowable copayment, coinsurance or deductible if the cost of collecting the copayment, coinsurance or deductible exceeds the amount to be collected. However, even if the service provider does not collect the copayment, coinsurance or deductible

DHSS still reduces the payment to the service provider by the amount of the allowable copayment, coinsurance or deductible.

For further information see the *state* 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:

4 **SECTION 1.** 49.45 (18) (intro.) of the statutes is amended to read:
5 49.45 (18) RECIPIENT COST SHARING. (intro.) Except as provided in pars. (a) to
6 (d), any person eligible for medical assistance under s. 49.46, 49.468 or 49.47 shall

1 pay up to the maximum amounts allowable under 42 CFR 447.53 to 447.58 for
2 purchases of services provided under s. 49.46 (2). The service provider shall collect
3 the allowable copayment, coinsurance or deductible, unless the service provider
4 determines that the cost of collecting the copayment, coinsurance or deductible
5 exceeds the amount to be collected. The department shall reduce payments to each
6 provider by the amount of the allowable copayment, coinsurance or deductible. No
7 provider may deny care or services because the recipient is unable to share costs, but
8 an inability to share costs specified in this subsection does not relieve the recipient
9 of liability for these costs. Liability under this subsection is limited by the following
10 provisions:

11 (END)