

1999 DRAFTING REQUEST

Bill

Received: **04/19/99**

Received By: **yacketa**

Wanted: **As time permits**

Identical to LRB:

For: **Spencer Black (608) 266-7521**

By/Representing: **himself**

This file may be shown to any legislator: **NO**

Drafter: **yacketa**

May Contact:

Alt. Drafters:

Subject: **Children - day care
Public Assistance - med. assist.**

Extra Copies: **DAK, GMM**

Pre Topic:

No specific pre topic given

Topic:

Child care workers to be eligible for Badger Care

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/1	yacketa 05/12/99	chanaman 05/12/99	kfollet 05/13/99	_____	gretskl 05/13/99		S&L
/2	yacketa 05/18/99	chanaman 05/18/99	mclark 05/21/99	_____	lrb_docadmin 05/23/99	lrb_docadminS&L 06/2/99	

FE Sent For:

07-06-99
↗

<END>

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FE Sent For:

cm4
5/18
/2

5/21
MRC

MRC/JF
5/21
<END>

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1?	yacketa	CmH /1 5/12	5/13/99 Kjf	Kjf/kmh 5/13			
FE Sent For:							

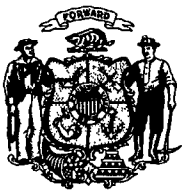
<END>

4/19/99 Spencer Black:

Child care workers eligible for BadgerCare

GPR - Sum sufficient - begins 7/1/99
(May speak w/ Fiscal Bureau)

Eligible: child care workers who are uninsured;
if have children/not, are subject to
BadgerCare income limitations
Make effective on date of publication



TAY.....
cmw
RMR

1999 BILL

1
2

AN ACT ^{sen cat.} relating to: extending badger care to low-income child care workers, ^{and making an appropriation} and granting rule-making authority.

Analysis by the Legislative Reference Bureau

Currently, under the badger care program, families with incomes below 185% of the federal poverty line who meet certain criteria are eligible for partially or wholly subsidized coverage of the same health services and benefits offered under the medical assistance program. "Family" is defined as at least one dependent child and his or her custodial parent or parents.

This bill expands the badger care program to cover individuals who are child care workers who meet the income and nonfinancial eligibility requirements. Under the bill, child care workers need not be parents to qualify for the health care coverage.

For further information see the *state and local* 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:

3
4
5

SECTION 1. 20.435 (5) (bc) of the statutes is amended to read:

20.435 (5) (bc) *Health care for low-income families and eligible individuals.*

~~As a continuing appropriation, the amounts in the schedule for the badger care~~

↑
strike

A sum sufficient
=

BILL

SECTION 1

1 health care program for low-income families and eligible individuals under s.
2 49.665.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293.

3 SECTION 2. 20.435 (5) (jz) of the statutes is amended to read:

4 20.435 (5) (jz) *Badger care premiums*. All moneys received from payments
5 under s. 49.665 (5) to be used for the badger care health care program for low-income
6 families and eligible individuals under s. ~~49.466~~ 49.665.

NOTE: NOTE: The bracketed language indicates the correct cross reference. Corrective legislation is pending. NOTE:

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293.

7 SECTION 3. 20.435 (5) (o) of the statutes is amended to read:

8 20.435 (5) (o) *Federal aid; medical assistance*. All federal moneys received for
9 meeting costs of medical assistance administered under ~~ss. 49.45~~ ^{s.} and, to the extent
10 permitted under federal law, ^{s.} 49.665.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293.

11 SECTION 4. 20.435 (5) (p) of the statutes is amended to read:

12 20.435 (5) (p) *Federal aid; health care for low-income families*. All federal
13 moneys received for the badger care health care program ~~for low-income families~~
14 under s. 49.665, to be used for that the purpose of providing health care coverage to
15 low-income families that are eligible under s. 49.665 (4) (a) for the badger care health
16 care program.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11);

BILL

1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 497; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 277 to 609; 1997 a. 35, 105, 231, 237, 280, 293.

1 **SECTION 5.** 49.665 (1) (bq) of the statutes is created to read:

2 49.665 (1) (bq) “Eligible individual” means an individual who is eligible under
3 sub. (4) (am) for health care coverage under this section.

4 **SECTION 6.** 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and
5 amended to read:

6 49.665 (1) (c) ^(intro.) “Employer-subsidized health care coverage” means one of the
7 following:

8 1. With respect to a family eligible under sub. (4) (a), family coverage under a
9 group health insurance plan offered by an employer for which the employer pays at
10 least 80% of the cost, excluding any deductibles or copayments that may be required
11 under the plan.

12 History: 1997 a. 27, 237.

12 **SECTION 7.** 49.665 (1) (c) 2. of the statutes is created to read:

13 49.665 (1) (c) 2. With respect to an eligible individual, coverage under a group
14 health insurance plan offered by the eligible individual’s employer, or by the
15 employer of a family member of the eligible individual, for which the eligible
16 individual qualifies and for which the employer pays at least 80% of the cost,
17 excluding any deductibles or copayments that may be required under the plan.

18 **SECTION 8.** 49.665 (3) of the statutes is amended to read:

19 49.665 (3) ADMINISTRATION. The department shall administer a program to
20 provide the health services and benefits described in s. 49.46 (2) to families that meet
21 the eligibility requirements specified in sub. (4) and to eligible individuals. The
22 department shall promulgate rules setting forth the application procedures and
23 appeal and grievance procedures. The department may promulgate rules limiting

BILL**SECTION 8**

1 access to the program under this section to defined enrollment periods. The
2 department may also promulgate rules establishing a method by which the
3 department may purchase family coverage offered by the employer of a member of
4 an eligible family, or individual coverage offered by the employer of an eligible
5 individual, under circumstances in which the department determines that
6 purchasing that coverage would not be more costly than providing the coverage
7 under this section.

History: 1997 a. 27, 237.

8 **SECTION 9.** 49.665 (4) (am) of the statutes is created to read:

9 49.665 (4) (am) An individual if eligible for health care coverage under this
10 section if the individual meets all of the following requirements:

- 11 1. The individual is employed as a full-time ~~day~~ ^{child} care worker.
- 12 2. The individual's income does not exceed 185% of the poverty line, except that
13 an individual who is already receiving health care coverage under this section may
14 have an income that does not exceed 200% of the poverty line. The department shall
15 establish by rule the criteria to be used to determine income.
- 16 3. The individual does not have access to employer-subsidized health care
17 coverage and has not had access to employer-subsidized health care coverage within
18 the time period established by the department by rule, but not to exceed 18 months,
19 immediately preceding application for health care coverage under this section. The
20 department may establish exceptions to this subdivision by rule.
- 21 4. The individual meets all other requirements established by the department
22 by rule. The department may not require that an individual under this paragraph
23 be a parent as a condition of eligibility.

24 **SECTION 10.** 49.665 (4) (b) of the statutes is amended to read:

BILL

1 49.665 (4) (b) Notwithstanding fulfillment of the eligibility requirements
2 under this subsection, a family or eligible individual is not entitled to health care
3 coverage under this section.

4 History: 1997 a. 27, 237.

4 **SECTION 11.** 49.665 (4) (c) of the statutes is amended to read:

5 49.665 (4) (c) No family may be denied health care coverage under this section
6 solely because of a health condition of any family member and no eligible individual
7 may be denied^d health care coverage under this section solely because of a health
8 condition of that individual.

9 History: 1997 a. 27, 237.

9 **SECTION 12.** 49.665 (5) of the statutes is amended to read:

10 49.665 (5) LIABILITY FOR COST. (a) Except as provided in par. (b), a family that
11 or eligible individual who receives health care coverage under this section shall pay
12 a percentage of the cost of that coverage in accordance with a schedule established
13 by the department by rule. If the schedule established by the department requires
14 a family or eligible individual to contribute more than 3% of the family's or of the
15 eligible individual's income towards the cost of the health care coverage provided
16 under this section, the department shall submit the schedule to the joint committee
17 on finance for review and approval of the schedule. If the cochairpersons of the joint
18 committee on finance do not notify the department within 14 working days after the
19 date of the department's submittal of the schedule that the committee has scheduled
20 a meeting to review the schedule, the department may implement the schedule. If,
21 within 14 days after the date of the department's submittal of the schedule, the
22 cochairpersons of the committee notify the department that the committee has
23 scheduled a meeting to review the schedule, the department may not require a family
24 or eligible individual to contribute more than 3% of the family's or eligible

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BILL**SECTION 12**

1 individual's income unless the joint committee on finance approves the schedule.
2 The joint committee on finance may not approve and the department may not
3 implement a schedule that requires a family or eligible individual to contribute more
4 than 3.5% of the family's or of the eligible individual's income towards the cost of the
5 health care coverage provided under this section.

6 (b) The department may not require a family or eligible individual with an
7 income below 143% of the poverty line to contribute to the cost of health care coverage
8 provided under this section.

9 (c) The department may establish by rule requirements for wage withholding
10 as a means of collecting the family's or eligible individual's share of the cost of the
11 health care coverage under this section.

12 History: 1997 a. 27, 237.

(END)

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-2942/1dn

TAY.....

cmrj

✓
Representative Black:

Please note that s. 16.47[✓] (2), stats., states that neither house may pass any bill containing an appropriation, increasing the cost of state government or decreasing state revenues by more than \$10,000 annually until both houses pass the executive budget bill, except that the governor or joint committee on finance or, under certain circumstances, the committee on organization of either house may enact emergency appropriation bills prior to the passage of the executive budget bill.

→ Note that if this bill is introduced and enacted as an emergency measure prior to passage of the budget, the appropriation set forth in this bill will be repealed by action of the budget bill (which repeals and recreates the appropriations schedule). You may instead wish to consider having this bill drafted as an amendment to the budget bill to include the correct appropriation type. Alternatively, you may wish to include an effective date that is later than the projected date for passage of the budget bill. Finally, you may instead wish to introduce this bill for potential passage after the passage of the budget bill. If you choose this option, please check with me after budget passage to ensure that the cross references in this bill are still accurate and that the numbers for created statutes in the bill have not been supplanted by the budget bill.

Tina A. Yacker
Legislative Attorney
Phone: (608) 261-6927
E-mail: Tina.Yacker@legis.state.wi.us

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-2942/1dn
TAY:cmh:kjf

May 13, 1999

Representative Black:

Please note that s. 16.47 (2), stats., states that neither house may pass any bill containing an appropriation, increasing the cost of state government or decreasing state revenues by more than \$10,000 annually until both houses pass the executive budget bill, except that the governor or joint committee on finance or, under certain circumstances, the committee on organization of either house may enact emergency appropriation bills prior to the passage of the executive budget bill.

Note that if this bill is introduced and enacted as an emergency measure prior to passage of the budget, the appropriation set forth in this bill will be repealed by action of the budget bill (which repeals and recreates the appropriations schedule). You may instead wish to consider having this bill drafted as an amendment to the budget bill to include the correct appropriation type. Alternatively, you may wish to include an effective date that is later than the projected date for passage of the budget bill. Finally, you may instead wish to introduce this bill for potential passage after the passage of the budget bill. If you choose this option, please check with me after budget passage to ensure that the cross-references in this bill are still accurate and that the numbers for created statutes in the bill have not been supplanted by the budget bill.

Tina A. Yacker
Legislative Attorney
Phone: (608) 261-6927
E-mail: Tina.Yacker@legis.state.wi.us



State of Wisconsin
1999 - 2000 LEGISLATURE

LRB-29424 2

TAY(cm):kjf

R MR

cmH

1999 BILL

refer cut

1 **AN ACT** *to renumber and amend* 49.665 (1) (c); *to amend* 20.435 (5) (bc), 20.435
2 (5) (jz), 20.435 (5) (o), 20.435 (5) (p), 49.665 (3), 49.665 (4) (b), 49.665 (4) (c) and
3 49.665 (5); and *to create* 49.665 (1) (bq), 49.665 (1) (c) 2. and 49.665 (4) (am)
4 of the statutes; **relating to:** extending badger care to low-income child care
5 workers, granting rule-making authority and making an appropriation.

Analysis by the Legislative Reference Bureau

Currently, under the badger care program, families with incomes below 185% of the federal poverty line who meet certain criteria are eligible for partially or wholly subsidized coverage of the same health services and benefits offered under the medical assistance program. "Family" is defined as at least one dependent child and his or her custodial parent or parents.

This bill expands the badger care program to cover individuals who are child care workers who meet the income and nonfinancial eligibility requirements. Under the bill, child care workers need not be parents to qualify for the health care coverage.

For further information see the ***state and local*** 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:

BILL

1 **SECTION 1.** 20.435 (5) (bc) of the statutes is amended to read:

2 20.435 (5) (bc) *Health care for low-income families and eligible individuals.*

3 ~~As a continuing appropriation, the amounts in the schedule~~ A sum sufficient for the
4 badger care health care program for low-income families and eligible individuals
5 under s. 49.665.

6 **SECTION 2.** 20.435 (5) (jz) of the statutes is amended to read:

7 20.435 (5) (jz) *Badger care premiums.* All moneys received from payments
8 under s. 49.665 (5) to be used for the badger care health care program for low-income
9 families and eligible individuals under s. ~~49.466~~ 49.665.

10 **SECTION 3.** 20.435 (5) (o) of the statutes is amended to read:

11 20.435 (5) (o) *Federal aid; medical assistance.* All federal moneys received for
12 meeting costs of medical assistance administered under ~~ss. s.~~ s. 49.45 and, to the extent
13 permitted under federal law, s. 49.665.

14 **SECTION 4.** 20.435 (5) (p) of the statutes is amended to read:

15 20.435 (5) (p) *Federal aid; health care for low-income families.* All federal
16 moneys received for the badger care health care program ~~for low-income families~~
17 under s. 49.665, to be used for ~~that~~ the purpose of providing health care coverage to
18 low-income families that are eligible under s. 49.665 (4) (a) for the badger care health
19 care program.

20 **SECTION 5.** 49.665 (1) (bq) of the statutes is created to read:

21 49.665 (1) (bq) “Eligible individual” means an individual who is eligible under
22 sub. (4) (am) for health care coverage under this section.

23 **SECTION 6.** 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and
24 amended to read:

BILL

1 49.665 (1) (c) (intro.) “Employer–subsidized health care coverage” means one
2 of the following:

3 1. With respect to a family eligible under sub. (4) (a), family coverage under a
4 group health insurance plan offered by an employer for which the employer pays at
5 least 80% of the cost, excluding any deductibles or copayments that may be required
6 under the plan.

7 **SECTION 7.** 49.665 (1) (c) 2. of the statutes is created to read:

8 49.665 (1) (c) 2. With respect to an eligible individual, coverage under a group
9 health insurance plan offered by the eligible individual’s employer, or by the
10 employer of a family member of the eligible individual, for which the eligible
11 individual qualifies and for which the employer pays at least 80% of the cost,
12 excluding any deductibles or copayments that may be required under the plan.

13 **SECTION 8.** 49.665 (3) of the statutes is amended to read:

14 49.665 (3) ADMINISTRATION. The department shall administer a program to
15 provide the health services and benefits described in s. 49.46 (2) to families that meet
16 the eligibility requirements specified in sub. (4) and to eligible individuals. The
17 department shall promulgate rules setting forth the application procedures and
18 appeal and grievance procedures. The department may promulgate rules limiting
19 access to the program under this section to defined enrollment periods. The
20 department may also promulgate rules establishing a method by which the
21 department may purchase family coverage offered by the employer of a member of
22 an eligible family, or individual coverage offered by the employer of an eligible
23 individual, under circumstances in which the department determines that
24 purchasing that coverage would not be more costly than providing the coverage
25 under this section.

BILL

by a child care provider

for at least 30 hours per week

1 **SECTION 9.** 49.665 (4) (am) of the statutes is created to read:

2 49.665 (4) (am) An individual if eligible for health care coverage under this
3 section if the individual meets all of the following requirements:

4 1. The individual is employed as a ~~full-time~~ child care worker.

5 2. The individual's income does not exceed 185% of the poverty line, except that
6 an individual who is already receiving health care coverage under this section may
7 have an income that does not exceed 200% of the poverty line. The department shall
8 establish by rule the criteria to be used to determine income.

9 3. The individual does not have access to employer-subsidized health care
10 coverage and has not had access to employer-subsidized health care coverage within
11 the time period established by the department by rule, but not to exceed 18 months,
12 immediately preceding application for health care coverage under this section. The
13 department may establish exceptions to this subdivision by rule.

14 4. The individual meets all other requirements established by the department
15 by rule. The department may not require that an individual under this paragraph
16 be a parent as a condition of eligibility.

17 **SECTION 10.** 49.665 (4) (b) of the statutes is amended to read:

18 49.665 (4) (b) Notwithstanding fulfillment of the eligibility requirements
19 under this subsection, a family or eligible individual is not entitled to health care
20 coverage under this section.

21 **SECTION 11.** 49.665 (4) (c) of the statutes is amended to read:

22 49.665 (4) (c) No family may be denied health care coverage under this section
23 solely because of a health condition of any family member and no eligible individual
24 may be denied health care coverage under this section solely because of a health
25 condition of that individual.

BILL

1 **SECTION 12.** 49.665 (5) of the statutes is amended to read:

2 49.665 (5) LIABILITY FOR COST. (a) Except as provided in par. (b), a family that
3 or eligible individual who receives health care coverage under this section shall pay
4 a percentage of the cost of that coverage in accordance with a schedule established
5 by the department by rule. If the schedule established by the department requires
6 a family or eligible individual to contribute more than 3% of the family's or of the
7 eligible individual's income towards the cost of the health care coverage provided
8 under this section, the department shall submit the schedule to the joint committee
9 on finance for review and approval of the schedule. If the cochairpersons of the joint
10 committee on finance do not notify the department within 14 working days after the
11 date of the department's submittal of the schedule that the committee has scheduled
12 a meeting to review the schedule, the department may implement the schedule. If,
13 within 14 days after the date of the department's submittal of the schedule, the
14 cochairpersons of the committee notify the department that the committee has
15 scheduled a meeting to review the schedule, the department may not require a family
16 or eligible individual to contribute more than 3% of the family's or of the eligible
17 individual's income unless the joint committee on finance approves the schedule.
18 The joint committee on finance may not approve and the department may not
19 implement a schedule that requires a family or eligible individual to contribute more
20 than 3.5% of the family's or of the eligible individual's income towards the cost of the
21 health care coverage provided under this section.

22 (b) The department may not require a family or eligible individual with an
23 income below 143% of the poverty line to contribute to the cost of health care coverage
24 provided under this section.



1999 BILL

1 **AN ACT to renumber and amend** 49.665 (1) (c); **to amend** 20.435 (5) (bc), 20.435
2 (5) (jz), 20.435 (5) (o), 20.435 (5) (p), 49.665 (3), 49.665 (4) (b), 49.665 (4) (c) and
3 49.665 (5); and **to create** 49.665 (1) (bq), 49.665 (1) (c) 2. and 49.665 (4) (am)
4 of the statutes; **relating to:** extending badger care to low-income child care
5 workers, granting rule-making authority and making an appropriation.

Analysis by the Legislative Reference Bureau

Currently, under the badger care program, families with incomes below 185% of the federal poverty line who meet certain criteria are eligible for partially or wholly subsidized coverage of the same health services and benefits offered under the medical assistance program. "Family" is defined as at least one dependent child and his or her custodial parent or parents.

This bill expands the badger care program to cover individuals who are child care workers who meet the income and nonfinancial eligibility requirements. Under the bill, child care workers need not be parents to qualify for the health care coverage.

For further information see the ***state and local*** 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:

BILL

1 **SECTION 1.** 20.435 (5) (bc) of the statutes is amended to read:

2 20.435 (5) (bc) *Health care for low-income families and eligible individuals.*

3 ~~As a continuing appropriation, the amounts in the schedule A sum sufficient for the~~
4 badger care health care program for low-income families and eligible individuals
5 under s. 49.665.

6 **SECTION 2.** 20.435 (5) (jz) of the statutes is amended to read:

7 20.435 (5) (jz) *Badger care premiums.* All moneys received from payments
8 under s. 49.665 (5) to be used for the badger care health care program for low-income
9 families and eligible individuals under s. ~~49.466~~ 49.665.

10 **SECTION 3.** 20.435 (5) (o) of the statutes is amended to read:

11 20.435 (5) (o) *Federal aid; medical assistance.* All federal moneys received for
12 meeting costs of medical assistance administered under ~~ss. s.~~ s. 49.45 and, to the extent
13 permitted under federal law, s. 49.665.

14 **SECTION 4.** 20.435 (5) (p) of the statutes is amended to read:

15 20.435 (5) (p) *Federal aid; health care for low-income families.* All federal
16 moneys received for the badger care health care program ~~for low-income families~~
17 under s. 49.665, to be used for ~~that~~ the purpose of providing health care coverage to
18 low-income families that are eligible under s. 49.665 (4) (a) for the badger care health
19 care program.

20 **SECTION 5.** 49.665 (1) (bq) of the statutes is created to read:

21 49.665 (1) (bq) “Eligible individual” means an individual who is eligible under
22 sub. (4) (am) for health care coverage under this section.

23 **SECTION 6.** 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and
24 amended to read:

BILL

1 49.665 (1) (c) (intro.) “Employer–subsidized health care coverage” means one
2 of the following:

3 1. With respect to a family eligible under sub. (4) (a), family coverage under a
4 group health insurance plan offered by an employer for which the employer pays at
5 least 80% of the cost, excluding any deductibles or copayments that may be required
6 under the plan.

7 **SECTION 7.** 49.665 (1) (c) 2. of the statutes is created to read:

8 49.665 (1) (c) 2. With respect to an eligible individual, coverage under a group
9 health insurance plan offered by the eligible individual’s employer, or by the
10 employer of a family member of the eligible individual, for which the eligible
11 individual qualifies and for which the employer pays at least 80% of the cost,
12 excluding any deductibles or copayments that may be required under the plan.

13 **SECTION 8.** 49.665 (3) of the statutes is amended to read:

14 49.665 (3) ADMINISTRATION. The department shall administer a program to
15 provide the health services and benefits described in s. 49.46 (2) to families that meet
16 the eligibility requirements specified in sub. (4) and to eligible individuals. The
17 department shall promulgate rules setting forth the application procedures and
18 appeal and grievance procedures. The department may promulgate rules limiting
19 access to the program under this section to defined enrollment periods. The
20 department may also promulgate rules establishing a method by which the
21 department may purchase family coverage offered by the employer of a member of
22 an eligible family, or individual coverage offered by the employer of an eligible
23 individual, under circumstances in which the department determines that
24 purchasing that coverage would not be more costly than providing the coverage
25 under this section.

BILL

1 **SECTION 9.** 49.665 (4) (am) of the statutes is created to read:

2 49.665 (4) (am) An individual if eligible for health care coverage under this
3 section if the individual meets all of the following requirements:

4 1. The individual is employed by a child care provider as a child care worker
5 for at least 30 hours per week.

6 2. The individual's income does not exceed 185% of the poverty line, except that
7 an individual who is already receiving health care coverage under this section may
8 have an income that does not exceed 200% of the poverty line. The department shall
9 establish by rule the criteria to be used to determine income.

10 3. The individual does not have access to employer-subsidized health care
11 coverage and has not had access to employer-subsidized health care coverage within
12 the time period established by the department by rule, but not to exceed 18 months,
13 immediately preceding application for health care coverage under this section. The
14 department may establish exceptions to this subdivision by rule.

15 4. The individual meets all other requirements established by the department
16 by rule. The department may not require that an individual under this paragraph
17 be a parent as a condition of eligibility.

18 **SECTION 10.** 49.665 (4) (b) of the statutes is amended to read:

19 49.665 (4) (b) Notwithstanding fulfillment of the eligibility requirements
20 under this subsection, a family or eligible individual is not entitled to health care
21 coverage under this section.

22 **SECTION 11.** 49.665 (4) (c) of the statutes is amended to read:

23 49.665 (4) (c) No family may be denied health care coverage under this section
24 solely because of a health condition of any family member and no eligible individual

BILL

1 may be denied health care coverage under this section solely because of a health
2 condition of that individual.

3 **SECTION 12.** 49.665 (5) of the statutes is amended to read:

4 49.665 (5) LIABILITY FOR COST. (a) Except as provided in par. (b), a family that
5 or eligible individual who receives health care coverage under this section shall pay
6 a percentage of the cost of that coverage in accordance with a schedule established
7 by the department by rule. If the schedule established by the department requires
8 a family or eligible individual to contribute more than 3% of the family's or of the
9 eligible individual's income towards the cost of the health care coverage provided
10 under this section, the department shall submit the schedule to the joint committee
11 on finance for review and approval of the schedule. If the cochairpersons of the joint
12 committee on finance do not notify the department within 14 working days after the
13 date of the department's submittal of the schedule that the committee has scheduled
14 a meeting to review the schedule, the department may implement the schedule. If,
15 within 14 days after the date of the department's submittal of the schedule, the
16 cochairpersons of the committee notify the department that the committee has
17 scheduled a meeting to review the schedule, the department may not require a family
18 or eligible individual to contribute more than 3% of the family's or of the eligible
19 individual's income unless the joint committee on finance approves the schedule.
20 The joint committee on finance may not approve and the department may not
21 implement a schedule that requires a family or eligible individual to contribute more
22 than 3.5% of the family's or of the eligible individual's income towards the cost of the
23 health care coverage provided under this section.

BILL

1 (b) The department may not require a family or eligible individual with an
2 income below 143% of the poverty line to contribute to the cost of health care coverage
3 provided under this section.

4 (c) The department may establish by rule requirements for wage withholding
5 as a means of collecting the family's or eligible individual's share of the cost of the
6 health care coverage under this section.

7 (END)

**SUBMITTAL
FORM**

**LEGISLATIVE REFERENCE BUREAU
Legal Section Telephone: 266-3561
5th Floor, 100 N. Hamilton Street**

The attached draft is submitted for your inspection. Please check each part carefully, proofread each word, and **sign** on the appropriate line(s) below.

Date: 5/23/99

To: Representative Black

Relating to LRB drafting number: LRB-2942

Topic

Child care workers to be eligible for Badger Care

Subject(s)

Children - day care, Public Assistance - med. assist.

1. **JACKET** the draft for introduction _____
in the **Senate** ____ or the **Assembly** ____ (check only one). Only the requester under whose name the drafting request is entered in the LRB's drafting records may authorize the draft to be submitted. Please allow one day for the preparation of the required copies.

2. **REDRAFT.** See the changes indicated or attached _____.
A revised draft will be submitted for your approval with changes incorporated.

3. Obtain **FISCAL ESTIMATE NOW**, prior to introduction _____.
If the analysis indicates that a fiscal estimate is required because the proposal makes an appropriation or increases or decreases existing appropriations or state or general local government fiscal liability or revenues, you have the option to request the fiscal estimate prior to introduction. If you choose to introduce the proposal without the fiscal estimate, the fiscal estimate will be requested automatically upon introduction. It takes about 10 days to obtain a fiscal estimate. Requesting the fiscal estimate prior to introduction retains your flexibility for possible redrafting of the proposal.

If you have any questions regarding the above procedures, please call 266-3561. If you have any questions relating to the attached draft, please feel free to call me.

Tina A. Yacker, Legislative Attorney
Telephone: (608) 261-6927