1999 DRAFTING REQUEST

Bill

Received: 09/22/98	Received By: yacketa
Wanted: As time permits	Identical to LRB:

For: Administration-Budget By/Representing: Jablonsky

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

May Contact: Richard Chao, DHFS Alt. Drafters:

Subject: Public Assistance - med. assist. Extra Copies: DAK

Topic:

DOA:.....Jablonsky - AIDS/HIV waiver

Instructions:

See Attached

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/2	yacketa 01/15/99	gilfokm 01/15/99	jfrantze 01/15/99		lrb_docadmin 01/15/99		S&L

FE Sent For:

<END>

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Department of Health and Family Services 1999-2001 Biennial Budget Statutory Language Request August 25, 1998

AIDS/HIV Waiver

Current Language

No Current Language.

Proposed Change

AIDS/HIV Waiver. It is proposed that the Department shall be directed to request a waiver from the Secretary of the federal Department of Health and Human Services to permit the Department to conduct a demonstration project to provide a limited coverage HIV/AIDS Medicaid waiver. This waiver would cover laboratory services and their associated costs up to \$500 per year per individual.

Effect of the Change

The change would allow the Department to request a waiver from the Secretary of the federal artment of Health and Human Services to permit the department to conduct a demonstration project to provide a limited coverage HIV/AIDS Medicaid waiver, which would cover laboratory services and their associated costs up to \$500 per year per individual. If the federal government grants the waiver, the department would be permitted to include these services as benefits under the Wisconsin Medicaid program.

Rationale for the Change

- 1. By SFY 2000, there will be approximately 608 uninsured individuals living with HIV who will have incomes below 200% FPL, receive drugs through the AIDS Drug Reimbursement Program (ADRP), and who are not eligible for Medicaid, or eligible for the buy in of HIRSP coverage for individuals with HIV. This group of individuals may not have a stable source of income to pay for their comprehensive health care needs. This includes primary and acute care costs as well as critical laboratory tests including viral load and CD4 immune function tests. These tests are necessary for the prescribing of AIDS drugs and also for monitoring the progress and consequences of the drug therapy.
- 2. Currently, there are over 3,800 persons reported to be living with HIV infection or AIDS in the State of Wisconsin. In SFY97, Wisconsin Medicaid provided the heath care coverage for 719 individuals at an average cost of \$17,757 per person. In SFY98 the ADRP will provide

drug coverage for 660 individuals at an average cost of \$3,606 per person. The ADRP funding for SFY98 is approximately 68% federal funds, and 32% GPR. The majority of ADRP federal funding is specifically designated for drugs

- 3. In the medical community a diagnosis of HIV infection is now increasingly being treated in a manner consistent with a diagnosis of a chronic disease. On the other hand, what is known as clinical AIDS is defined as a disabling condition in most states. In Wisconsin, in order to be eligible for Medicaid benefits, a single adult male with AIDS must be categorized as SSI disabled. This group constitutes the majority of Medicaid recipients with HIV/AIDS.
- 4. Newly developed combination drug therapies are preventing HIV-infected individuals from progressing to clinical AIDS and therefore, delaying or preventing individuals from qualifying for Medicaid services thus saving the state money. However, these therapies may require rigorous patient monitoring and evaluation in order to be successful.
- 5. From SFY93-97, the number of Medicaid recipients with AIDS has increased 65%, and total Medicaid AIDS expenditures have increased 59%. However, protease inhibitors, which became available in 1995, have been keeping individuals with HIV healthier for longer periods of time. During SFY96 and SFY97, the number of new Medicaid AIDS cases increased only 5% each year, and Medicaid expenditures increased only 2% from SFY 96 to SFY 97. Currently there is not enough data on protease inhibitors to determine their long-term effectiveness. As a result, it is not possible to confidently predict future Medicaid cost and eligibility trends.
- 6. The Bureau of Health Care Financing proposes to seek a limited benefit Medicaid Waiver. This waiver would permit the Department to provide \$500 annual coverage for laboratory services and the supporting physician and outpatient hospital visits. Eligibility would be limited to individuals who: have been diagnosed as HIV-positive; are at or below 200% FPL; are clients of the ADRP; and do not have other insurance to cover laboratory services and the associated physician or outpatient hospital visit
- 7. The target population for this demonstration project does not meet Medicaid financial eligibility standards. Therefore an 1115 waiver will be required for Wisconsin to claim FFP. To justify this waiver, cost neutrality must be proven by a decrease in annual Medicaid expenditures offsetting the cost of the additional services being provided. This decrease in AIDS expenditures will be achieved by decreasing the number, or rate, of new Medicaid recipients with HIV/AIDS.

Desired Effective Date:

Upon Passage of the Bill

Agency:

DHFS

Agency Contact:

Richard T. Chao

Phone:

(608) 267-0356



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State of Misconsin 1999 - 2000 LEGISLATURE

LRB-0261/PV
TAY...:

DOA:.....Jablonsky - AIDS/HIV waiver

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

This bill requires the department of health and family services (DHFS) to request a waiver from the secretary of the federal department of health and human services to permit DHFS to cover laboratory services for certain persons with the human immunodeficiency virus (commonly known as HIV) under the medical assistance program (MA). HIV is the virus that causes acquired immunodeficiency syndrome, or AIDS. The bill limits coverage to \$500 per year per person.

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:

- **SECTION 1.** 49.46 (1p) of the statutes is created to read:
- 3 49.46 (1p) Demonstration project for persons with HIV. The department
- 4 shall request a waiver from the secretary of the federal department of health and

year per person.

human services to allow the department to provide under this section coverage of
services specified under sub. (2) (b) 17 . for persons who have HIV infection, as defined
in s. 252.01 (2). If a waiver is granted and in effect, the department shall provide
coverage for the services specified under sub. (2) (b) 17. for persons who qualify under
the terms of the waiver.
SECTION 2. 49.46 (2) (b) 17. of the statutes is created to read:
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services for persons who qualify for coverage under sub. (1p), not to exceed \$500 per

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Yacker, Tina

> Hope all is well,

> Richard T. Chao > Budget Section

> (608) 267-0356

> Department of Health and Family Services

> Rich

Jablonsky, Sue [sue.jablonsky@doa.state.wi.us] From: Tuesday, January 12, 1999 1:10 PM Sent: Yacker, Tina To: Subject: FW: MA HIV/AIDS waiver update 026/ Tina-I thought I forwarded this to you but guess I didn't. See second paragraph thanks > -----Original Message-----> From: Chao, Richard > Sent: Wednesday, November 18, 1998 1:43 PM > To: Jablonsky, Sue > Subject: MA HIV/AIDS waiver update > Hey Sue: > I just got an update to the HIRSP eligibility question. Currently, if your > participating in ADRP then you cannot be eligible for HIRSP. HIRSP does > permit federal funds to pay for the copayment. There no problem the other > way > around ie. being in HIRSP and being eligible for ADRP. > The Department is looking to submit a Stat lang request to change this. I > will_ > get back to you soon. > In addition, as far as feedback on the draft for the waiver application, > our > only concern is whether the term "laboratory services" is comprehensive > enough. > We are also including some outpatient services in the benefit. We thought > that > maybe using the term "clinical evaluation services" (maybe to be > determined by > the Department) would be better.

1999 - 2000 LEGISLATURE

LRB-0261/1 >-TAY:kmg;jf

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DOA:.....Jablonsky - AIDS/HIV waiver

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

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State of Misconsin 1999 – 2000 LEGISLATURE

LRB-0261/2 TAY:kmg;jf

DOA:.....Jablonsky - AIDS/HIV waiver

FOR 1999-01 BUDGET - NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

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(END)

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