1999 DRAFTING REQUEST

Assembly Amendment (AA-AB133)

Received: 06/2/99 Wanted: As time permits For: Legislative Fiscal Bureau 6-7044 This file may be shown to any legislator: NO May Contact:					Received By: yacketa							
					Identical to LRB: By/Representing: Goldman							
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					Subject: Public Assistance - med. assist.							Extra Copies:
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yacketa

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Proofed

Submitted

HEALTH AND FAMILY SERVICES -- MEDICAL ASSISTANCE

Nocturnal Enuresis -- Feasibility Study

Motion:

Move to direct DHFS to conduct a study on the costs and efficacy of behavioral modification therapy in conjunction with the use of a urine alarms and case management including bi-monthly visits for six months as a method of treatment for nocturnal enuresis (commonly referred to as bedwetting). Direct DHFS to report on the findings of this study to the appropriate standing committee of the Legislature by January 1, 2000.

Note:

Under this motion, DHFS would be required to conduct a study on behavioral modification in conjunction with the use of urine alarms and case management including bi-monthly visits for six months as a method of treatment for nocturnal enuresis. DHFS would be required to include information on the effectiveness of this type of treatment and the estimated costs of including this treatment as a fee-for-service MA benefit as part of the study.

Currently, MA covers the costs of urine alarms and a number of medications commonly used to treat nocturnal enuresis. Urine alarms are generally provided under the general supervision of a primary care physician.



State of Misconsin 1999 - 2000 LEGISLATURE

LRBb0488/1 TAY....

LFB:.....Goldman - Nocturnal enuresis feasibility study

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

LFB AMENDMENT

TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

At the locations indicated, amend the bill as follows:

1. Page 1408, line : after that line insert:

"(*) NOCTURNAL ENURESIS STUDY. The department of health and family services shall conduct a study the efficacy of urine alarms used in conjunction with behavior modification therapy and case management, including bizmonthly visits with a specialist, as a treatment for nocturnal enuresis. Not later than January 1, 2000, the department shall report its findings to the appropriate standing committees of the legislature in the manner provided under section 13.172 (3) of the statutes. The department shall include in its report the estimated costs of covering under the medical assistance program the treatment studied."

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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBb0488/1dn TAY...:...

Amie Goldman:

I wasn't sure by or to whom the big weekly visits were made, so I guessed. Please let me know if my guess was incorrect.

Tina A. Yacker Legislative Attorney Phone: (608) 261–6927

bimonth

E-mail: Tina.Yacker@legis.state.wi.us

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBb0488/1dn TAY:kmg:kjf

June 3, 1999

Amie Goldman:

I wasn't sure by or to whom the bimonthly visits were made, so I guessed that it was with some type of specialist. Please let me know if my guess was incorrect.

Tina A. Yacker Legislative Attorney Phone: (608) 261–6927

E-mail: Tina.Yacker@legis.state.wi.us



State of Misconsin 1999 - 2000 LEGISLATURE

LRBb0488/1 TAY:kmg:kjf

LFB:.....Goldman – Nocturnal enuresis feasibility study

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

LFB AMENDMENT

TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

At the locations indicated, amend the bill as follows:

1. Page 1408, line 10: after that line insert:

"(7t) Nocturnal enuresis study. The department of health and family services shall conduct a study of the efficacy of urine alarms used in conjunction with behavior modification therapy and case management, including bimonthly visits with a specialist, as a treatment for nocturnal enuresis. Not later than January 1, 2000, the department shall report its findings to the appropriate standing committees of the legislature in the manner provided under section 13.172 (3) of the statutes. The department shall include in its report the estimated costs of covering under the medical assistance program the treatment studied."

(END)

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