

1999 DRAFTING REQUEST

Assembly Amendment (AA-AB133)

Received: **06/4/99**

Received By: **kenneda**

Wanted: **As time permits**

Identical to LRB:

For: **Legislative Fiscal Bureau 6-3912**

By/Representing: **Megna**

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

Drafter: **kenneda**

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Subject: **Public Assistance - med. assist.**

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Pre Topic:

LFB:.....Megna -

Topic:

Permit payments for specialized services for all residents of IMDs

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>
/?	kenneda 06/4/99	jgeller 06/4/99		_____			
/1			martykr 06/6/99	_____	lrb_docadmin 06/7/99		

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/?	kenneda	1 6/4 JG	*m/6	JZ *m/6			

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Done
DHFS

**Department of Health and Family Services
Technicals to 1999-2001 Biennial Budget Request
April 13, 1999**

DIN Title IMD Funding Transfer

DIN Number 5610

Description of Change

Amend s. 46.266(3) to allow payments for specialized services to be made for all residents of the IMD, rather than only those residents who occupy beds that were decertified for Medical Assistance funding in 1989.

Explanation

The Governor's Budget transfers GPR funding for specialized services for all three IMDs in the state from the Medical Assistance (MA) appropriation to the IMD GPR appropriation in the Division of Supportive Living. This IMD appropriation funds a portion of the care of residents who occupy IMD beds that were decertified for MA reimbursement in 1989. The amount transferred to DSL is equal to the actual amount that MA paid for specialized services for eligible people in the three institutions in FY 98. The Governor's Budget recommends transferring the funds because the Trempealeau County IMD was completely decertified for MA funding in September 1998 and therefore can no longer receive specialized services funding from the MA appropriation. The intent of the transfer is to continue funding specialized services for all beds on an ongoing basis regardless of whether the institution was decertified.

The current language in the statute (s. 46.266) that governs the IMD GPR appropriation limits the number of IMD residents the Department can fund from the appropriation in two ways. First, under par. (1), it defines eligible persons as those who a) were residents of the facility in 1989 and whose care is disallowed for MA reimbursement, b) a non elderly adult who has replaced one of the people in (a), and c) people relocated to the community who return to the IMD within 6 months. Second, under par. (3), it limits the total number of beds that can be funded from the appropriation at any time to the number of beds that were originally occupied by people under (1)(a) minus the number of beds that have closed since then.

Under this language, with the transferred funds, the Department would be able to fund specialized services for 63 IMD beds at Trempealeau that were decertified in 1989 and similar beds at the other two IMDs. However, it would not allow the Department to fund services for the other 13 beds at Trempealeau that were MA certified until last summer or for beds at the other IMDs that remain MA certified.

The governor's budget bill partially solves this problem by expanding the eligible persons under (1) to include any resident of the facility determined to require specialized services. However, it does not amend (3) to increase the number of beds we can fund services for above the number decertified in 1989.

FY 00		FY 01		Appropriation	
\$	FTE	\$	FTE	Alpha	Numeric



Legislative Fiscal Bureau

One East Main, Suite 301 • Madison, WI 53703 • (608) 266-3847 • Fax: (608) 267-6873

April 22, 1999

Joint Committee on Finance

Paper #554

Funding for Active Treatment in Institutes for Mental Disease (DHFS -- Supportive Living)

[LFB 1999-01 Budget Summary: Page 333, #19]

CURRENT LAW

DHFS provides funding from the GPR medical assistance (MA) benefits appropriation for specialized mental health treatment services to persons residing in nursing homes and institutes for mental disease (IMDs) who are determined to need such services under a federally-required preadmission screen. Although DHFS pays for these services from the GPR MA benefits appropriation, they are not MA benefits, and, consequently, are not eligible for federal MA matching funds.

Under federal law, services provided to persons who are 22 through 64 years of age who reside in IMDs cannot be funded under MA. However, under a separate GPR appropriation, DHFS provides counties funding to pay a portion of the costs of care for such persons. However, this funding does not cover mental health treatment services to all individuals in that group. Instead, DHFS may only use this funding for counties to pay for services for persons age 22 through 64 in IMDs who: (a) were previously eligible for MA coverage but lost such coverage in 1989 when MA discontinued coverage for a number of nursing homes that were found to be IMDs in 1989; or (b) persons who occupied the beds that were decertified for MA funding in 1989.

GOVERNOR

Transfer \$473,000 GPR annually from the MA benefits appropriation to the mental health treatment services appropriation to provide funding for active treatment for persons in IMDs. In addition, expand the purposes for which funding budgeted for treatment services can be used to authorize DHFS to use these funds to support services to persons who have been determined under a preadmission screen to require active treatment for mental illness.

MODIFICATION

Modify the provision to permit counties to use funding for treatment services for all residents of an IMD who have been determined under a preadmission screen to require active treatment for mental illness, rather than only those residents who occupy beds that were decertified for MA funding in 1989.

Explanation: This modification, requested by DHFS, would permit DHFS to implement the Governor's intent to fund services for all eligible patients in IMDs who require active treatment for mental illness, regardless of whether the patients occupy beds that were decertified in 1989.

Prepared by: Charles Morgan



SOON - In edit 6/4

State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0514/1
DAK.....

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jlg

LFB:.....Megna - Permit payments for specialized services for all residents of IMDs

FOR 1999-01 BUDGET - NOT READY FOR INTRODUCTION

LFB AMENDMENT

TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

1 At the locations indicated, amend the bill as follows:

2 1. Page 587, line 23: after that line insert:

3 "SECTION 1030d. 46.266 (3) of the statutes is amended to read:

4 46.266 (3) The total number of beds in skilled nursing facilities or intermediate
5 care facilities that are funded at any one time under subs. (1) and (2) may not exceed
6 the number of beds available for the persons specified in sub. (1) (a), minus the
7 number of beds reduced under sub. (8) (a), plus the number of beds added for persons
8 who are specified under sub. (1) (c) and (d). The department may redistribute funds
9 for a vacant bed from one county to another county that is seeking to effect the
10 placement of a person in an institution for mental diseases."

History: 1987 a. 27, 399; 1989 a. 31; 1991 a. 39; 1993 a. 16, 212.



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0514/1
DAK:jlj:km

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11 (END)