

TODAY - 6/15

1999 - 2000 LEGISLATURE

LRBb0591/3
DAK:kmg&wlj:km

LFB:.....Megna - Family Care changes

FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

LFB AMENDMENT

TO 1999 ASSEMBLY BILL 133 AND 1999 SENATE BILL 45

Changes
on p-19

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

2 1. Page 588, line 10: delete the material beginning with that line and ending
3 with page 589, line 6 and substitute:

4 "SECTION 1033g. 46.27 (4) (am) of the statutes is created to read:

5 46.27 (4) (am) If a local long-term care council in a county assumes under s.
6 46.282 (3) (b) the duties of the county long-term support planning committee under
7 this subsection, the county long-term support planning committee for the county is
8 dissolved.

9 SECTION 1033h. 46.27 (4) (c) (intro.) of the statutes is amended to read:

10 46.27 (4) (c) (intro.) The planning committee shall develop, or, if a local
11 long-term care council has under s. 46.282 (3) (b) assumed the duties of the planning

1 committee, the local long-term care council shall recommend a community options
2 plan for participation in the program. The plan shall include:

3 **SECTION 1033i.** 46.27 (4) (c) 5. of the statutes is amended to read:

4 46.27 (4) (c) 5. A description of the method to be used by the committee or, if
5 a local long-term care council has under s. 46.282 (3) (b) assumed the duties of the
6 planning committee, the local long-term care council to monitor the implementation
7 of the program.”.

8 **2.** Page 600, line 7: after that line insert:

9 **“(7m)** “Local long-term care council” means a local long-term care council that
10 is appointed under s. 46.282 (2) (a).”.

11 **3.** Page 600, line 23: after “care” insert “, including copies of reports submitted
12 to the department by local long-term care councils.”.

13 **4.** Page 601, line 9: delete “determined by the department” and substitute “in
14 which resides no more than 29% of the population that is eligible for the family care
15 benefit”.

16 **5.** Page 601, line 13: delete “Contract” and substitute “In geographic areas in
17 which resides no more than 29% of the population that is eligible for the family care
18 benefit, contract”.

19 **6.** Page 601, line 16: delete “contract with one or more entities” and substitute
20 “if the local long-term care council for the applicable area has developed the initial
21 plan under s. 46.282 (3) (a) 1., contract with entities specified under par. (d) and, only
22 if specifically authorized by the legislature and if the legislature appropriates
23 necessary funding, contract as so authorized with one or more entities in addition to
24 those specified in par. (d)”.

1 **7.** Page 602, line 23: after “county,” insert “hospital.”

2 **8.** Page 603, line 1: after “county,” insert “hospital.”

3 **9.** Page 603, line 11: delete that line and substitute:

4 **“46.282 Councils on long-term care. (1) COUNCIL ON LONG-TERM CARE. The**
5 **council on long-term care appointed”.**

6 **10.** Page 603, line 13: delete “(1)” and substitute “(a)”.

7 **11.** Page 603, line 15: delete “(2)” and substitute “(b)”.

8 **12.** Page 603, line 18: delete “(a)” and substitute “1.”

9 **13.** Page 603, line 20: delete “(b)” and substitute “2.”

10 **14.** Page 603, line 22: delete “(c)” and substitute “3.”

11 **15.** Page 603, line 23: delete “(d)” and substitute “4.”

12 **16.** Page 603, line 24: delete “(e)” and substitute “5.”

13 **17.** Page 604, line 1: delete “(f)” and substitute “6.”

14 **18.** Page 604, line 2: delete “(3)” and substitute “(c)”.

15 **19.** Page 604, line 4: delete “(4)” and substitute “(d)”.

16 **20.** Page 604, line 5: delete “(5)” and substitute “(e)”.

17 **21.** Page 604, line 7: delete “(6)” and substitute “(f)”.

18 **22.** Page 604, line 9: delete “(7)” and substitute “(g)”.

19 **23.** Page 604, line 12: delete “(a)” and substitute “1.”

20 **24.** Page 604, line 13: delete “(b)” and substitute “2.”

21 **25.** Page 604, line 14: delete “(c)” and substitute “3.”

1 **26.** Page 604, line 16: delete “(d)” and substitute “4.”.

2 **27.** Page 604, line 17: delete “(e)” and substitute “5.”.

3 **28.** Page 604, line 18: after that line insert:

4 “(2) LOCAL LONG-TERM CARE COUNCILS; APPOINTMENT; MEMBERSHIP; TERMS;
5 COMPENSATION AND TRAINING; OFFICERS. (a) *Appointment by a county.* In a county that
6 participates in a pilot project under s. 46.281 (1) (d) and before a county participates
7 in the program under ss. 46.2805 to 46.2895, the following shall be done:

8 1. The county board of supervisors of the county shall appoint a local long-term
9 care council or the county boards of supervisors of 2 or more contiguous counties shall
10 appoint a local long-term care council, except as follows:

11 a. In a county with a county executive or a county administrator, the county
12 executive or county administrator shall appoint the local long-term care council,
13 other than as provided in subd. 1. b., subject to confirmation by the county board of
14 supervisors.

15 b. If the lands of any tribe or band are located in the county or contiguous
16 counties to be served by a local long-term care council, each tribe or band with these
17 lands shall appoint at least one member of the local long-term care council.

18 2. A county board of supervisors or, in a county with a county executive or a
19 county administrator, the county executive or county administrator shall appoint
20 members of the local long-term care council who are required to be older persons or
21 persons with physical or developmental disabilities or their immediate family
22 members or other representatives from nominations that are submitted to the
23 county board of supervisors or the county executive or county administrator by older
24 persons or persons with physical or developmental disabilities or their immediate

1 family members or other representatives and by local organizations that represent
2 older persons or persons with physical or developmental disabilities.

3 (am) *Appointment by a tribe or band or council.* If a tribe or band or the Great
4 Lakes inter-tribal council, inc., intends to apply for a contract to operate a resource
5 center or for certification as a care management organization, the tribe or band or
6 the council shall, as a condition of the application or the certification appoint a local
7 long-term care council.

8 (b) *Membership.* 1. A local long-term care council that serves a single-county
9 area shall consist of 17 members, at least 9 of whom are older persons or persons with
10 physical or developmental disabilities or their immediate family members or other
11 representatives. The age or disability represented by these 9 members shall
12 correspond to the proportion of numbers of persons, as determined by the
13 department, receiving long-term care in this state who are aged 65 or older or have
14 a physical or developmental disability. The total remaining 8 members shall consist
15 of providers of long-term care services, persons residing in the county with
16 recognized ability and demonstrated interest in long-term care and up to 3 members
17 of the county board of supervisors or other elected officials.

18 2. A local long-term care council that serves an area of 2 or more contiguous
19 counties shall consist of 23 members, at least 12 of whom are older persons or persons
20 with physical or developmental disabilities or their immediate family members or
21 other representatives. The age or disability represented by these 12 members shall
22 correspond to the proportion of numbers of persons, as determined by the
23 department, receiving long-term care in this state who are aged 65 or older or have
24 a physical or developmental disability. The total remaining 11 members shall consist
25 of all of the following:

- 1 a. Providers of long-term care services.
- 2 b. Persons residing in the county with recognized ability and demonstrated
3 interest in long-term care.
- 4 c. Either up to 4 members of the county boards of supervisors or other elected
5 officials or, for a council that serves an area of more than 4 contiguous counties, up
6 to one member of the county board of supervisors of the contiguous counties or up to
7 one other elected official in each contiguous county area.
- 8 3. A local long-term care council that is appointed by a tribe or band or by the
9 Great Lakes inter-tribal council, inc., shall consist of 21 members, at least 11 of
10 whom are older persons or persons with physical or developmental disabilities or
11 their family members or other representatives. The age or disability represented by
12 these 11 members shall correspond to the proportion of numbers of persons, as
13 determined by the department, receiving long-term care in this state who are aged
14 65 or older or have a physical or developmental disability. The total remaining 10
15 members shall consist of providers of long-term care services, persons residing in the
16 county with recognized ability and demonstrated interest in long-term care and up
17 to 3 members of the governing board of the tribe or band or the Great Lakes
18 inter-tribal council, inc., that appoints the local long-term care council.
- 19 4. Vacancies in membership in a local long-term care council shall be filled for
20 the residue of the unexpired term in the manner that the original appointments are
21 made. A local long-term care council member may be removed from office for the
22 following reasons:
 - 23 a. For cause, by a two-thirds vote of each county board of supervisors or
24 governing body of a tribe or band participating in the appointment, on due notice in
25 writing and hearing of the charges against the member.

1 b. If the member, when appointed, was a member of the county board of
2 supervisors or was another elected official and was not reelected to that office, on due
3 notice in writing.

4 (c) *Terms.* The members of the local long-term care council appointed under
5 par. (a) shall serve 3-year terms. No member may serve more than 2 consecutive
6 terms. Of the members first appointed under par. (b) 1., 6 shall be appointed for 3
7 years; 6 shall be appointed for 4 years; and 5 shall be appointed for 5 years. Of the
8 members first appointed under par. (b) 2., 8 shall be appointed for 3 years; 8 shall be
9 appointed for 4 years; and 7 shall be appointed for 5 years. Of the members appointed
10 under par. (b) 3., one-third shall be appointed for 3 years; one-third shall be
11 appointed for 4 years; and one-third shall be appointed for 5 years.

12 (d) *Compensation and training.* Members of the local long-term care council
13 who are older persons, persons with physical or developmental disabilities or the
14 family members or other representatives of these persons shall receive compensation
15 from the applicable county for reasonable expenses associated with membership
16 participation. The county board of supervisors or, in the case of a member appointed
17 by the governing body of a tribe or band or by the Great Lakes inter-tribal council,
18 inc., the tribe or band or the Great Lakes inter-tribal council, inc., shall provide
19 training to these members to enable them to participate effectively.

20 (e) *Officers.* At the first meeting of a local long-term care council, members
21 shall elect from their number a chairperson, a secretary and other officers as
22 necessary. Vacancies in these offices shall be filled for the unexpired terms. The
23 chairperson shall preside at all meetings when present and countersign all actions
24 taken by the local long-term care council. In case of the absence of the chairperson
25 for any meeting, the members present shall choose a temporary chairperson.

1 **(3) LOCAL LONG-TERM CARE COUNCILS; POWERS AND DUTIES.** (a) A local long-term
2 care council shall do all of the following within the council's area:

3 1. Develop the initial plan for the structure of the county, multicounty or tribal
4 resource center and care management organization or organizations, including
5 formulating recommendations to the county board or boards of supervisors and, in
6 a county with a county executive or a county administrator, to the county executive
7 or county administrator, to the governing body of the tribe or band or of the Great
8 Lakes inter-tribal council, inc., if applicable, and to the department on all of the
9 following:

10 a. Whether or not the county, counties, tribe or band or Great Lakes inter-tribal
11 council, inc., should exercise its right to apply under s. 46.283 (1) for a contract to
12 operate a resource center or to apply under s. 46.284 (1) for a contract to operate a
13 care management organization and how the operation should proceed.

14 b. Whether the county should create a family care district to operate a resource
15 center or under a care management organization.

16 c. Whether local organizations other than the county should serve as
17 alternatives or in addition to county-operated entities to operate a resource center
18 or a care management organization and, if so, which organizations should be
19 considered.

20 d. If applicable, how county-operated functions should interact with a resource
21 center or care management organization that is operated by a tribe or band or by the
22 Great Lakes inter-tribal council, inc.

23 2. a. In the years 2000 and 2001, under criteria that the department prescribes,
24 after consulting with the council on long-term care, evaluate the performance of the
25 care management organization or organizations in the area of the local long-term

1 care council and determine whether additional care management organizations are
2 needed in the area and, if so, recommend this to the department.

3 b. In the year 2002 and thereafter, under criteria that the department
4 prescribes, evaluate the performance of the care management organization or
5 organizations in the area of the local long-term care council and determine whether
6 additional care management organizations are needed in the area and, if so
7 recommend this to the department.

8 3. Advise the department regarding applications for initial certification or
9 certification renewal of care management organizations in the area of the local
10 long-term care council, including providing recommendations for organizations
11 applying for certification or recertification, and assist the department in reviewing
12 and evaluating the applications.

13 4. Receive information about and monitor complaints from persons served by
14 the care management organization in the area concerning whether the numbers of
15 providers of long-term care services used by the care management organization are
16 sufficient to ensure convenient and desirable consumer choice and provide
17 recommendations under subd. 3. to the department about this issue.

18 5. Review initial plans and existing provider networks of any care management
19 organization in the area to assist the care management organization in developing
20 a network of service providers that includes a sufficient number of accessible,
21 convenient and desirable services.

22 6. Advise care management organizations about whether to offer optional
23 acute and primary health care services and, if so, how these benefits should be
24 offered.

1 7. Review the utilization of various types of long-term care services by care
2 management organizations in the area.

3 8. Monitor the pattern of enrollments and disenrollments in local care
4 management organizations.

5 9. Identify gaps in services, living arrangements and community resources and
6 develop strategies to build local capacity to serve older persons and persons with
7 physical or developmental disabilities, especially those with long-term care needs.

8 10. Perform long-range planning on policy for older persons and persons with
9 physical or developmental disabilities.

10 11. Annually review interagency agreements between a resource center and
11 care management organization or organizations and make recommendations, as
12 appropriate, on the interaction between the resource center and the care
13 management organization or organizations to assure coordination between or
14 among them.

15 12. Annually review the number and types of complaints and grievances about
16 the long-term care system by persons who receive or may receive care under the
17 system, to determine if a need exists for system changes, and recommend system or
18 other changes if appropriate.

19 13. Identify potential new sources of community resources and funding for
20 needed services for older persons and persons with physical or developmental
21 disabilities.

22 14. Support long-term care system improvements to improve services to older
23 persons and persons with physical or developmental disabilities and their families.

1 15. Annually report to the department and, before July 1, 2001, to the
2 long-term care council concerning significant achievements and problems in the
3 local long-term care system.

4 (b) A local long-term care council may, within the local long-term care council's
5 area, assume the duties of the county long-term community support planning
6 committee as specified under s. 46.27 (4)."

7 **29.** Page 604, line 19: after "46.282" insert "(1)".

8 **30.** Page 604, line 22: delete "A county" and substitute "After considering
9 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
10 county".

11 **31.** Page 605, line 7: delete "The governing" and substitute "After considering
12 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., the
13 governing".

14 **32.** Page 606, line 1: delete "may contract" and substitute "shall contract with
15 the entities specified under s. 46.281 (1) (d) 1. and may, in addition to contracting
16 with these entities and subject to approval of necessary funding, contract to operate
17 a resource center with counties, family care districts, the governing body of a tribe
18 or band or the Great Lakes inter-tribal council, inc., or under a joint application of
19 any of these, or".

20 **33.** Page 606, line 2: delete "to operate a resource center".

21 **34.** Page 606, line 9: delete lines 9 to 13.

1 **35.** Page 608, line 12: after “facility” insert “and the person is determined by
2 the resource center to have a condition that is expected to last at least 90 days that
3 would require care, assistance or supervision”.

4 **36.** Page 609, line 3: delete that line and substitute:

5 “(7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s.
6 19.32 (2), of a resource center that contains personally identifiable information, as
7 defined in s. 19.62 (5), concerning an individual who receives services from the
8 resource center may be disclosed by the resource center without the individual’s
9 informed consent, except as follows:

10 (a) A resource center may provide information as required to comply with s.
11 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer the
12 program under ss. 46.2805 to 46.2895.

13 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

14 **37.** Page 609, line 13: delete “A county board” and substitute “After
15 considering recommendations of the local long-term care council under s. 46.282 (3)
16 (a) 1., a county board”.

17 **38.** Page 610, line 22: delete the material beginning with that line and ending
18 with page 611, line 16, and substitute “selected group or groups. With respect to
19 contracts exclusively with counties to operate a care management organization, all
20 of the following apply:

21 1. Before January 1, 2003, the department may not contract with an
22 organization other than the county to operate a care management organization in
23 the county unless any of the following applies:

1 a. The county and the local long-term care council agree in writing that at least
2 one additional care management organization is necessary or desirable.

3 b. The governing body of a tribe or band or the Great Lakes inter-tribal council,
4 inc., elects to operate a care management organization within the area and is
5 certified under sub. (3).

6 2. After December 31, 2002, and before January 1, 2004, the department may
7 not contract with an organization other than the county to operate a care
8 management organization in the county unless any of the following applies:

9 a. Subdivision 1. a. or b. applies.

10 b. The county fails to meet requirements of sub. (3) and performance standards
11 prescribed by the department.

12 c. The county does not have the capacity to serve all county residents who are
13 entitled to the family care benefit in the client group or groups that the county serves
14 and cannot develop the capacity. If this subd. 2. c. applies, the department may
15 contract with an organization in addition to the county.

16 3. After December 31, 2003, the department may contract with counties, family
17 care districts, the governing body of a tribe or band or the Great Lakes inter-tribal
18 council, inc., or under a joint application of any of these, or with a private nonprofit
19 organization that has no significant connection to an entity that operates a resource
20 center. Proposals for contracts under this subdivision shall be solicited under a
21 competitive sealed proposal process under s. 16.75 (2m) and, after consulting with
22 the local long-term care council for the county or counties, the department shall
23 evaluate the proposals primarily as to the quality of care that is proposed to be
24 provided, certify those applicants that meet the requirements specified in sub. (3) (a),
25 select certified applicants for contract and contract with the selected applicants.”.

1 **39.** Page 611, line 20: after the period insert “An application shall include
2 comments about the applicant and recommendations about the application that are
3 provided by the appropriate local long-term care council, as specified under s. 46.282
4 (3) (a) 3.”.

5 **40.** Page 616, line 19: delete that line and substitute:

6 “(7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s.
7 19.32 (2), of a care management organization that contains personally identifiable
8 information, as defined in s. 19.62 (5), concerning an individual who receives services
9 from the care management organization may be disclosed by the care management
10 organization without the individual’s informed consent, except as follows:

11 (a) A care management organization may provide information as required to
12 comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to
13 administer the program under ss. 46.2805 to 46.2895.

14 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

15 **41.** Page 617, line 3: delete lines 3 to 10.

16 **42.** Page 617, line 13: after “**organization.**” insert “(1)”.

17 **43.** Page 617, line 16: delete that line and substitute “directly operate both a
18 resource center and a care management organization, except as follows:”.

19 **44.** Page 617, line 16: after that line insert:

20 “(a) For a pilot project established under s. 46.281 (1) (d) 2., provision of the
21 services specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate
22 from the provision of services of the care management organization by January 1,
23 2001.

1 (b) The department may approve separation of the functions of a resource
2 center from those of a care management organization by a means other than those
3 specified in sub. (2).

4 (2) Except as provided in sub. (1), all of”.

5 **45.** Page 617, line 19: delete that line and substitute:

6 “(a) 1. If a county board of supervisors and, if applicable,”.

7 **46.** Page 617, line 24: delete “(b)” and substitute “2.”.

8 **47.** Page 618, line 3: delete that line and substitute:

9 “(b) 1. If the governing body of a tribe or band”.

10 **48.** Page 618, line 9: delete “(b)” and substitute “2.”.

11 **49.** Page 618, line 14: delete that line and substitute:

12 “(c) Any county or family care”.

13 **50.** Page 618, line 22: delete lines 22 and 23 and substitute “person is at least
14 18 years of age; has a physical disability, as defined in s. 15.197 (4) (a) 2., or
15 infirmities of aging, as defined in s. 55.01 (3); and meets all of the”.

16 **51.** Page 619, line 14: delete “was receiving” and substitute “had been
17 receiving for at least 60 days, under a written plan of care,”.

18 **52.** Page 619, line 15: after “department,” insert “which were”.

19 **53.** Page 620, line 3: after “financial” insert “or disability”.

20 **54.** Page 621, line 23: after that line insert:

21 “3. The department or its designee determines that the person no longer meets
22 eligibility criteria under sub. (1).”.

23 **55.** Page 622, line 22: after “correctly” insert “and incorrectly”.

1 **56.** Page 623, line 4: delete lines 4 to 6 and substitute “the following applicable
2 matters by filing, within 45 days of the failure of a resource center or care
3 management organization to act on the contested matter within the time frames
4 specified by rule by the department or within 45 days after receipt of notice of a
5 decision in a contested matter, a written request for a hearing under s. 227.44 to the
6 division of hearings and appeals created under s. 15.103 (1):”.

7 **57.** Page 623, line 17: after that line insert:

8 “h. Imposition of ineligibility for the family care benefit under s. 46.286 (4).

9 i. Denial of eligibility or reduction of the amounts of the family care benefit
10 under s. 46.286 (5).

11 j. Determinations similar to those specified under s. 49.455 (8) (a), made under
12 s. 46.286 (6).

13 k. Recovery of family care benefit payments under s. 46.286 (7).”.

14 **58.** Page 623, line 21: delete lines 21 to 23 and substitute:

15 “(b) An enrollee may contest a decision, omission or action of a care
16 management organization other than those specified in par. (a), or may contest the
17 choice of”.

18 **59.** Page 624, line 14: delete lines 14 and 15.

19 **60.** Page 624, line 16: delete “(3)” and substitute “(2)”.

20 **61.** Page 625, line 9: delete that line and substitute:

21 “(3) Procedures and standards for procedures for s. 46.287 (2), including time
22 frames for action by a resource center or a care management organization on a
23 contested matter.”.

1 **62.** Page 625, line 19: delete “A county” and substitute “After considering
2 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
3 county”.

4 **63.** Page 626, line 6: on lines 6 and 18, delete “contiguous”.

5 **64.** Page 627, line 4: delete lines 4 and 5 and substitute:

6 “2. The family care district board appointed under par. (a) 2. shall consist of an
7 odd number of members that is at least 15 but not more than 21 persons, all of whom
8 are”.

9 **65.** Page 627, line 12: delete that line and substitute “Up to one-fourth of the
10 members of the board may be elected or appointed officials or employes of the”.

11 **66.** Page 627, line 21: after “appointed” insert “, unless removed for cause
12 under s. 17.13”.

13 **67.** Page 628, line 15: after “center” insert “or a portion of its functions”.

14 **68.** Page 628, line 16: after “both” insert “a resource center or its functions and
15 a care management organization”.

16 **69.** Page 738, line 20: after that line insert:

17 “**SECTION 1433v.** 49.46 (1) (a) 14m. of the statutes is created to read:

18 49.46 (1) (a) 14m. Any person who would meet the financial and other eligibility
19 requirements for home or community-based services under the family care benefit
20 but for the fact that the person engages in substantial gainful activity under 42 USC
21 1382c (a) (3), if a waiver under s. 46.281 (1) (c) is in effect or federal law permits
22 federal financial participation for medical assistance coverage of the person and if
23 funding is available for the person under the family care benefit.”.

1 **70.** Page 762, line 5: after that line insert:

2 “**SECTION 1501d.** 50.034 (6) of the statutes is amended to read:

3 50.034 (6) FUNDING. Funding for supportive, personal or nursing services that
4 a person who resides in a residential care apartment complex receives, other than
5 private or 3rd-party funding, may be provided only under s. 46.27 (11) (c) 7. or 46.277
6 (5) (e), unless except if the provider of the services is a certified medical assistance
7 provider under s. 49.45 or if the funding is provided as a family care benefit under
8 ss. 46.2805 to 46.2895.”.

9 **71.** Page 767, line 16: delete “(a)”.

10 **72.** Page 1405, line 22: on lines 22 and 24, delete “46.288 (1) to (4)” and
11 substitute “46.288 (1) to (3)”.

12 **73.** Page 1406, line 6: after that line insert:

13 “(1m) REPORT ON FAMILY CARE. By November 1, 2000, the department of health
14 and family services shall submit to the governor, as part of the department’s 2001–03
15 biennial budget request, a report that describes the implementation and outcomes
16 of the pilot projects under section 46.281 (1) (d) of the statutes and that makes
17 recommendations on the family care program under sections 46.2805 to 46.2895 of
18 the statutes, as created by this act.

19 (1n) ALTERNATIVE TO FAMILY CARE.

20 (a) The department of health and family services shall, as soon as possible
21 before July 1, 2002, seek waivers of federal medical assistance statutes and
22 regulations from the federal department of health and human services that are
23 necessary to implement in up to 3 pilot sites a model for the provision of long-term
24 care that is an alternative to the family care program under sections 46.2805 to

Counties in which the

1 46.2895 of the statutes, as created by this act, that would have all of the following
2 characteristics:

3 1. Medical assistance coverage of services under waiver programs under
4 sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes would be expanded to
5 include selected services specified under section 49.46 (2) (b) of the statutes,
6 including personal care and home health care.

or contract for the provision of,
organize or arrange for

are located

7

2. Pilot sites would provide long-term care to eligible persons, but would not
8 be required to compete with private or nonprofit organizations for contracts to
9 provide the long-term care.

services

Counties in which the pilot sites are located
would

However, the entity
providing the services

10

3. ~~An entity that~~ provides services of a resource center, as specified under

11

section 46.283 (4) of the statutes, as created by this act, need not be separate from
12 an entity that provides care under subdivision 2.

contracts for the
provision of, organize
or arranges for
long-term

services

13

4. The cost of the program would not exceed the cost of relevant aspects of the
14 family care program.

except that a county may contract
for the provision of functions if
necessary to obtain federal waiver
approval

15

5. Pilot sites would be required to reduce average costs per person served in the
16 areas of the sites under sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes
17 for the calendar year preceding implementation of the alternative model, in order to
18 serve additional persons on waiting lists for the services.

19

6. The department of health and family services would distribute funding to
20 the pilot sites on a per person per month payment basis using the same methodology
21 as that used under section 46.284 (5) (a) of the statutes, as created by this act, as
22 adjusted for the specific services provided.

23

7. The risk-sharing provisions specified under section 46.284 (5) of the
24 statutes, as created by this act, would apply to pilot sites.

1 8. Resource centers operated by pilot sites would be required to provide or
2 contract for the provision of services specified under section 46.283 (3) (a), (b), (e), (f),
3 (g), (i) and (k) of the statutes, as created by this act.

4 (b) If the federal waivers specified under paragraph (a) are approved, the
5 department of health and family services shall as soon as possible before July 1,
6 2002, seek enactment of statutory language, including appropriation of necessary
7 funding, to implement the model described under paragraph (a), as approved under
8 the federal waivers.”.

9 **74.** Page 1410, line 12: after that line insert:

10 “(1m) EVALUATION OF FAMILY CARE PILOT PROJECTS. As soon as possible, the
11 legislative audit bureau shall contract with an organization other than an agency of
12 the state to evaluate the pilot projects under section 46.281 (1) (d) of the statutes, as
13 created by this act, and pilot projects under SECTION 9123 (1n) of this act as to
14 cost-effectiveness, client access to services and quality of care.”.

15 **75.** Page 1472, line 9: delete lines 9 and 10 and substitute “(5), 46.281 (1) (a)
16 and (b) and 46.282 (1) of the statutes take effect on July 1, 2001, or on the day after
17 publication”.

18

(END)

SUN or by 9:00 a.m. MON

1999 - 2000 LEGISLATURE

LRBb0591/34

DAK:kmg&wj:kan

D-NOTE

cmm

LFB:.....Megna - Family Care changes

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 588, line 10: delete the material beginning with that line and ending
3 with page 589, line 6 and substitute:

4 "SECTION 1033g. 46.27 (4) (am) of the statutes is created to read:

5 46.27 (4) (am) If a local long-term care council in a county assumes under s.
6 46.282 (3) (b) the duties of the county long-term support planning committee under
7 this subsection, the county long-term support planning committee for the county is
8 dissolved.

9 SECTION 1033h. 46.27 (4) (c) (intro.) of the statutes is amended to read:

10 46.27 (4) (c) (intro.) The planning committee shall develop, or, if a local
11 long-term care council has under s. 46.282 (3) (b) assumed the duties of the planning

1 committee, the local long-term care council shall recommend a community options
2 plan for participation in the program. The plan shall include:

3 **SECTION 1033i.** 46.27 (4) (c) 5. of the statutes is amended to read:

4 46.27 (4) (c) 5. A description of the method to be used by the committee or, if
5 a local long-term care council has under s. 46.282 (3) (b) assumed the duties of the
6 planning committee, the local long-term care council to monitor the implementation
7 of the program.”.

INSERT 2-7

8 **2.** Page 600, line 7: after that line insert:

No bold

9 **(7m)** “Local long-term care council” means a local long-term care council that
10 is appointed under s. 46.282 (2) (a).”.

11 **3.** Page 600, line 23: after “care” insert “, including copies of reports submitted
12 to the department by local long-term care councils,”.

13 **4.** Page 601, line 9: delete “determined by the department” and substitute “in
14 which resides no more than 29% of the population that is eligible for the family care
15 benefit”.

16 **5.** Page 601, line 13: delete “Contract” and substitute “In geographic areas in
17 which resides no more than 29% of the population that is eligible for the family care
18 benefit, contract”.

19 **6.** Page 601, line 16: delete “contract with one or more entities” and substitute
20 “if the local long-term care council for the applicable area has developed the initial
21 plan under s. 46.282 (3) (a) 1., contract with entities specified under par. (d) and, only
22 if specifically authorized by the legislature and if the legislature appropriates
23 necessary funding, contract as so authorized with one or more entities in addition to
24 those specified in par. (d)”.

1 **7.** Page 602, line 23: after “county,” insert “hospital.”

2 **8.** Page 603, line 1: after “county,” insert “hospital,”

3 **9.** Page 603, line 11: delete that line and substitute:

4 *No Bold* **“46.282 Councils on long-term care. (1) COUNCIL ON LONG-TERM CARE. The**
5 **council on long-term care appointed”.**

6 **10.** Page 603, line 13: delete “(1)” and substitute “(a)”.

7 **11.** Page 603, line 15: delete “(2)” and substitute “(b)”.

8 **12.** Page 603, line 18: delete “(a)” and substitute “1.”.

9 **13.** Page 603, line 20: delete “(b)” and substitute “2.”.

10 **14.** Page 603, line 22: delete “(c)” and substitute “3.”.

11 **15.** Page 603, line 23: delete “(d)” and substitute “4.”.

12 **16.** Page 603, line 24: delete “(e)” and substitute “5.”.

13 **17.** Page 604, line 1: delete “(f)” and substitute “6.”.

14 **18.** Page 604, line 2: delete “(3)” and substitute “(c)”.

15 **19.** Page 604, line 4: delete “(4)” and substitute “(d)”.

16 **20.** Page 604, line 5: delete “(5)” and substitute “(e)”.

17 **21.** Page 604, line 7: delete “(6)” and substitute “(f)”.

18 **22.** Page 604, line 9: delete “(7)” and substitute “(g)”.

19 **23.** Page 604, line 12: delete “(a)” and substitute “1.”.

20 **24.** Page 604, line 13: delete “(b)” and substitute “2.”.

21 **25.** Page 604, line 14: delete “(c)” and substitute “3.”.

1 **26.** Page 604, line 16: delete “(d)” and substitute “4.”.

2 **27.** Page 604, line 17: delete “(e)” and substitute “5.”.

3 **28.** Page 604, line 18: after that line insert:

4 ²⁰⁰²~~(2)~~ LOCAL LONG-TERM CARE COUNCILS; APPOINTMENT; MEMBERSHIP; TERMS;
5 COMPENSATION AND TRAINING; OFFICERS. (a) *Appointment by a county.* In a county that
6 participates in a pilot project under s. 46.281 (1) (d) and before a county participates
7 in the program under ss. 46.2805 to 46.2895, the following shall be done:

8 1. The county board of supervisors of the county shall appoint a local long-term
9 care council or the county boards of supervisors of 2 or more contiguous counties shall
10 appoint a local long-term care council, except as follows:

11 a. In a county with a county executive or a county administrator, the county
12 executive or county administrator shall appoint the local long-term care council,
13 other than as provided in subd. 1. b., subject to confirmation by the county board of
14 supervisors.

15 b. If the lands of any tribe or band are located in the county or contiguous
16 counties to be served by a local long-term care council, each tribe or band with these
17 lands shall appoint at least one member of the local long-term care council.

18 2. A county board of supervisors or, in a county with a county executive or a
19 county administrator, the county executive or county administrator shall appoint
20 members of the local long-term care council who are required to be older persons or
21 persons with physical or developmental disabilities or their immediate family
22 members or other representatives from nominations that are submitted to the
23 county board of supervisors or the county executive or county administrator by older
24 persons or persons with physical or developmental disabilities or their immediate

1 family members or other representatives and by local organizations that represent
2 older persons or persons with physical or developmental disabilities.

3 (am) *Appointment by a tribe or band or council.* If a tribe or band or the Great
4 Lakes inter-tribal council, inc., intends to apply for a contract to operate a resource
5 center or for certification as a care management organization, the tribe or band or
6 the council shall, as a condition of the application or the certification appoint a local
7 long-term care council.

8 (b) *Membership.* 1. A local long-term care council that serves a single-county
9 area shall consist of 17 members, at least 9 of whom are older persons or persons with
10 physical or developmental disabilities or their immediate family members or other
11 representatives. The age or disability represented by these 9 members shall
12 correspond to the proportion of numbers of persons, as determined by the
13 department, receiving long-term care in this state who are aged 65 or older or have
14 a physical or developmental disability. The total remaining 8 members shall consist
15 of providers of long-term care services, persons residing in the county with
16 recognized ability and demonstrated interest in long-term care and up to 3 members
17 of the county board of supervisors or other elected officials.

18 2. A local long-term care council that serves an area of 2 or more contiguous
19 counties shall consist of 23 members, at least 12 of whom are older persons or persons
20 with physical or developmental disabilities or their immediate family members or
21 other representatives. The age or disability represented by these 12 members shall
22 correspond to the proportion of numbers of persons, as determined by the
23 department, receiving long-term care in this state who are aged 65 or older or have
24 a physical or developmental disability. The total remaining 11 members shall consist
25 of all of the following:

- 1 a. Providers of long-term care services.
- 2 b. Persons residing in the county with recognized ability and demonstrated
3 interest in long-term care.
- 4 c. Either up to 4 members of the county boards of supervisors or other elected
5 officials or, for a council that serves an area of more than 4 contiguous counties, up
6 to one member of the county board of supervisors of the contiguous counties or up to
7 one other elected official in each contiguous county area.
- 8 3. A local long-term care council that is appointed by a tribe or band or by the
9 Great Lakes inter-tribal council, inc., shall consist of 21 members, at least 11 of
10 whom are older persons or persons with physical or developmental disabilities or
11 their family members or other representatives. The age or disability represented by
12 these 11 members shall correspond to the proportion of numbers of persons, as
13 determined by the department, receiving long-term care in this state who are aged
14 65 or older or have a physical or developmental disability. The total remaining 10
15 members shall consist of providers of long-term care services, persons residing in the
16 county with recognized ability and demonstrated interest in long-term care and up
17 to 3 members of the governing board of the tribe or band or the Great Lakes
18 inter-tribal council, inc., that appoints the local long-term care council.
- 19 4. Vacancies in membership in a local long-term care council shall be filled for
20 the residue of the unexpired term in the manner that the original appointments are
21 made. A local long-term care council member may be removed from office for the
22 following reasons:
- 23 a. For cause, by a two-thirds vote of each county board of supervisors or
24 governing body of a tribe or band participating in the appointment, on due notice in
25 writing and hearing of the charges against the member.

1 b. If the member, when appointed, was a member of the county board of
2 supervisors or was another elected official and was not reelected to that office, on due
3 notice in writing.

4 (c) *Terms.* The members of the local long-term care council appointed under
5 par. (a) shall serve 3-year terms. No member may serve more than 2 consecutive
6 terms. Of the members first appointed under par. (b) 1., 6 shall be appointed for 3
7 years; 6 shall be appointed for 4 years; and 5 shall be appointed for 5 years. Of the
8 members first appointed under par. (b) 2., 8 shall be appointed for 3 years; 8 shall be
9 appointed for 4 years; and 7 shall be appointed for 5 years. Of the members appointed
10 under par. (b) 3., one-third shall be appointed for 3 years; one-third shall be
11 appointed for 4 years; and one-third shall be appointed for 5 years.

12 (d) *Compensation and training.* Members of the local long-term care council
13 who are older persons, persons with physical or developmental disabilities or the
14 family members or other representatives of these persons shall receive compensation
15 from the applicable county for reasonable expenses associated with membership
16 participation. The county board of supervisors or, in the case of a member appointed
17 by the governing body of a tribe or band or by the Great Lakes inter-tribal council,
18 inc., the tribe or band or the Great Lakes inter-tribal council, inc., shall provide
19 training to these members to enable them to participate effectively.

20 (e) *Officers.* At the first meeting of a local long-term care council, members
21 shall elect from their number a chairperson, a secretary and other officers as
22 necessary. Vacancies in these offices shall be filled for the unexpired terms. The
23 chairperson shall preside at all meetings when present and countersign all actions
24 taken by the local long-term care council. In case of the absence of the chairperson
25 for any meeting, the members present shall choose a temporary chairperson.

1 **(3) LOCAL LONG-TERM CARE COUNCILS; POWERS AND DUTIES.** (a) A local long-term
2 care council shall do all of the following within the council's area:

3 1. Develop the initial plan for the structure of the county, multicounty or tribal
4 resource center and care management organization or organizations, including
5 formulating recommendations to the county board or boards of supervisors and, in
6 a county with a county executive or a county administrator, to the county executive
7 or county administrator, to the governing body of the tribe or band or of the Great
8 Lakes inter-tribal council, inc., if applicable, and to the department on all of the
9 following:

10 a. Whether or not the county, counties, tribe or band or Great Lakes inter-tribal
11 council, inc., should exercise its right to apply under s. 46.283 (1) for a contract to
12 operate a resource center or to apply under s. 46.284 (1) for a contract to operate a
13 care management organization and how the operation should proceed.

14 b. Whether the county should create a family care district to operate a resource
15 center or under a care management organization.

16 c. Whether local organizations other than the county should serve as
17 alternatives or in addition to county-operated entities to operate a resource center
18 or a care management organization and, if so, which organizations should be
19 considered.

20 d. If applicable, how county-operated functions should interact with a resource
21 center or care management organization that is operated by a tribe or band or by the
22 Great Lakes inter-tribal council, inc.

23 2. a. In the years 2000 and 2001, under criteria that the department prescribes,
24 after consulting with the council on long-term care, evaluate the performance of the
25 care management organization or organizations in the area of the local long-term

1 care council and determine whether additional care management organizations are
2 needed in the area and, if so, recommend this to the department.

3 b. In the year 2002 and thereafter, under criteria that the department
4 prescribes, evaluate the performance of the care management organization or
5 organizations in the area of the local long-term care council and determine whether
6 additional care management organizations are needed in the area and, if so
7 recommend this to the department.

8 3. Advise the department regarding applications for initial certification or
9 certification renewal of care management organizations in the area of the local
10 long-term care council, including providing recommendations for organizations
11 applying for certification or recertification, and assist the department in reviewing
12 and evaluating the applications.

13 4. Receive information about and monitor complaints from persons served by
14 the care management organization in the area concerning whether the numbers of
15 providers of long-term care services used by the care management organization are
16 sufficient to ensure convenient and desirable consumer choice and provide
17 recommendations under subd. 3. to the department about this issue.

18 5. Review initial plans and existing provider networks of any care management
19 organization in the area to assist the care management organization in developing
20 a network of service providers that includes a sufficient number of accessible,
21 convenient and desirable services.

22 6. Advise care management organizations about whether to offer optional
23 acute and primary health care services and, if so, how these benefits should be
24 offered.

1 7. Review the utilization of various types of long-term care services by care
2 management organizations in the area.

3 8. Monitor the pattern of enrollments and disenrollments in local care
4 management organizations.

5 9. Identify gaps in services, living arrangements and community resources and
6 develop strategies to build local capacity to serve older persons and persons with
7 physical or developmental disabilities, especially those with long-term care needs.

8 10. Perform long-range planning on policy for older persons and persons with
9 physical or developmental disabilities.

10 11. Annually review interagency agreements between a resource center and
11 care management organization or organizations and make recommendations, as
12 appropriate, on the interaction between the resource center and the care
13 management organization or organizations to assure coordination between or
14 among them.

15 12. Annually review the number and types of complaints and grievances about
16 the long-term care system by persons who receive or may receive care under the
17 system, to determine if a need exists for system changes, and recommend system or
18 other changes if appropriate.

19 13. Identify potential new sources of community resources and funding for
20 needed services for older persons and persons with physical or developmental
21 disabilities.

22 14. Support long-term care system improvements to improve services to older
23 persons and persons with physical or developmental disabilities and their families.

1 15. Annually report to the department and, before July 1, 2001, to the
2 long-term care council concerning significant achievements and problems in the
3 local long-term care system.

4 (b) A local long-term care council may, within the local long-term care council's
5 area, assume the duties of the county long-term community support planning
6 committee as specified under s. 46.27 (4)."

7 **29.** Page 604, line 19: after "46.282" insert "(1)".

8 **30.** Page 604, line 22: delete "A county" and substitute "After considering
9 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
10 county".

11 **31.** Page 605, line 7: delete "The governing" and substitute "After considering
12 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., the
13 governing".

14 **32.** Page 606, line 1: delete "may contract" and substitute "shall contract with
15 the entities specified under s. 46.281 (1) (d) 1. and may, in addition to contracting
16 with these entities and subject to approval of necessary funding, contract to operate
17 a resource center with counties, family care districts, the governing body of a tribe
18 or band or the Great Lakes inter-tribal council, inc., or under a joint application of
19 any of these, or".

20 **33.** Page 606, line 2: delete "to operate a resource center".

21 **34.** Page 606, line 9: delete lines 9 to 13.

1 **35.** Page 608, line 12: after “facility” insert “and the person is determined by
2 the resource center to have a condition that is expected to last at least 90 days that
3 would require care, assistance or supervision”.

4 **36.** Page 609, line 3: delete that line and substitute:

5 ~~(7)~~ **(7)** CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s.
6 19.32 (2), of a resource center that contains personally identifiable information, as
7 defined in s. 19.62 (5), concerning an individual who receives services from the
8 resource center may be disclosed by the resource center without the individual’s
9 informed consent, except as follows:

10 (a) A resource center may provide information as required to comply with s.
11 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer the
12 program under ss. 46.2805 to 46.2895.

13 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

14 **37.** Page 609, line 13: delete “A county board” and substitute “After
15 considering recommendations of the local long-term care council under s. 46.282 (3)
16 (a) 1., a county board”.

17 **38.** Page 610, line 22: delete the material beginning with that line and ending
18 with page 611, line 16, and substitute “selected group or groups. With respect to
19 contracts exclusively with counties to operate a care management organization, all
20 of the following apply:

21 1. Before January 1, 2003, the department may not contract with an
22 organization other than the county to operate a care management organization in
23 the county unless any of the following applies:

1 a. The county and the local long-term care council agree in writing that at least
2 one additional care management organization is necessary or desirable.

3 b. The governing body of a tribe or band or the Great Lakes inter-tribal council,
4 inc., elects to operate a care management organization within the area and is
5 certified under sub. (3).

6 2. After December 31, 2002, and before January 1, 2004, the department may
7 not contract with an organization other than the county to operate a care
8 management organization in the county unless any of the following applies:

9 a. Subdivision 1. a. or b. applies.

10 b. The county fails to meet requirements of sub. (3) and performance standards
11 prescribed by the department.

12 c. The county does not have the capacity to serve all county residents who are
13 entitled to the family care benefit in the client group or groups that the county serves
14 and cannot develop the capacity. If this subd. 2. c. applies, the department may
15 contract with an organization in addition to the county.

16 3. After December 31, 2003, the department may contract with counties, family
17 care districts, the governing body of a tribe or band or the Great Lakes inter-tribal
18 council, inc., or under a joint application of any of these, or with a private nonprofit
19 organization that has no significant connection to an entity that operates a resource
20 center. Proposals for contracts under this subdivision shall be solicited under a
21 competitive sealed proposal process under s. 16.75 (2m) and, after consulting with
22 the local long-term care council for the county or counties, the department shall
23 evaluate the proposals primarily as to the quality of care that is proposed to be
24 provided, certify those applicants that meet the requirements specified in sub. (3) (a),
25 select certified applicants for contract and contract with the selected applicants.”.

1 **39.** Page 611, line 20: after the period insert “An application shall include
2 comments about the applicant and recommendations about the application that are
3 provided by the appropriate local long-term care council, as specified under s. 46.282
4 (3) (a) 3.”.

5 **40.** Page 616, line 19: delete that line and substitute:

6 ²⁰⁰¹ ~~(7)~~ **CONFIDENTIALITY, EXCHANGE OF INFORMATION.** No record, as defined in s.
7 19.32 (2), of a care management organization that contains personally identifiable
8 information, as defined in s. 19.62 (5), concerning an individual who receives services
9 from the care management organization may be disclosed by the care management
10 organization without the individual’s informed consent, except as follows:

11 (a) A care management organization may provide information as required to
12 comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to
13 administer the program under ss. 46.2805 to 46.2895.

14 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

15 **41.** Page 617, line 3: delete lines 3 to 10.

16 **42.** Page 617, line 13: after “**organization.**” insert “(1)”.

17 **43.** Page 617, line 16: delete that line and substitute “directly operate both a
18 resource center and a care management organization, except as follows:”.

19 **44.** Page 617, line 16: after that line insert:

20 “(a) For a pilot project established under s. 46.281 (1) (d) 2., provision of the
21 services specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate
22 from the provision of services of the care management organization by January 1,
23 2001.

1 (b) The department may approve separation of the functions of a resource
2 center from those of a care management organization by a means other than those
3 specified in sub. (2).

4 (2) Except as provided in sub. (1), all of”.

5 **45.** Page 617, line 19: delete that line and substitute:

6 “(a) 1. If a county board of supervisors and, if applicable,”.

7 **46.** Page 617, line 24: delete “(b)” and substitute “2.”.

8 **47.** Page 618, line 3: delete that line and substitute:

9 “(b) 1. If the governing body of a tribe or band”.

10 **48.** Page 618, line 9: delete “(b)” and substitute “2.”.

11 **49.** Page 618, line 14: delete that line and substitute:

12 “(c) Any county or family care”.

13 **50.** Page 618, line 22: delete lines 22 and 23 and substitute “person is at least
14 18 years of age; has a physical disability, as defined in s. 15.197 (4) (a) 2., or
15 infirmities of aging, as defined in s. 55.01 (3); and meets all of the”.

16 **51.** Page 619, line 14: delete “was receiving” and substitute “had been
17 receiving for at least 60 days, under a written plan of care,”.

18 **52.** Page 619, line 15: after “department,” insert “which were”.

19 **53.** Page 620, line 3: after “financial” insert “or disability”.

20 **54.** Page 621, line 23: after that line insert:

21 “3. The department or its designee determines that the person no longer meets
22 eligibility criteria under sub. (1).”.

23 **55.** Page 622, line 22: after “correctly” insert “and incorrectly”.

1 **56.** Page 623, line 4: delete lines 4 to 6 and substitute “the following applicable
2 matters by filing, within 45 days of the failure of a resource center or care
3 management organization to act on the contested matter within the time frames
4 specified by rule by the department or within 45 days after receipt of notice of a
5 decision in a contested matter, a written request for a hearing under s. 227.44 to the
6 division of hearings and appeals created under s. 15.103 (1):”.

7 **57.** Page 623, line 17: after that line insert:

8 “h. Imposition of ineligibility for the family care benefit under s. 46.286 (4).

9 i. Denial of eligibility or reduction of the amounts of the family care benefit
10 under s. 46.286 (5).

11 j. Determinations similar to those specified under s. 49.455 (8) (a), made under
12 s. 46.286 (6).

13 k. Recovery of family care benefit payments under s. 46.286 (7).”.

14 **58.** Page 623, line 21: delete lines 21 to 23 and substitute:

15 “(b) An enrollee may contest a decision, omission or action of a care
16 management organization other than those specified in par. (a), or may contest the
17 choice of”.

18 **59.** Page 624, line 14: delete lines 14 and 15.

19 **60.** Page 624, line 16: delete “(3)” and substitute “(2)”.

20 **61.** Page 625, line 9: delete that line and substitute:

21 “(3) Procedures and standards for procedures for s. 46.287 (2), including time
22 frames for action by a resource center or a care management organization on a
23 contested matter.”.

1 **62.** Page 625, line 19: delete “A county” and substitute “After considering
2 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
3 county”.

4 **63.** Page 626, line 6: on lines 6 and 18, delete “contiguous”.

5 **64.** Page 627, line 4: delete lines 4 and 5 and substitute:

6 “2. The family care district board appointed under par. (a) 2. shall consist of an
7 odd number of members that is at least 15 but not more than 21 persons, all of whom
8 are”.

9 **65.** Page 627, line 12: delete that line and substitute “Up to one-fourth of the
10 members of the board may be elected or appointed officials or employes of the”.

11 **66.** Page 627, line 21: after “appointed” insert “, unless removed for cause
12 under s. 17.13”.

13 **67.** Page 628, line 15: after “center” insert “or a portion of its functions”.

14 **68.** Page 628, line 16: after “both” insert “a resource center or its functions and
15 a care management organization”.

16 **69.** Page 738, line 20: after that line insert:

17 “**SECTION 1433v.** 49.46 (1) (a) 14m. of the statutes is created to read:

18 49.46 (1) (a) 14m. Any person who would meet the financial and other eligibility
19 requirements for home or community-based services under the family care benefit
20 but for the fact that the person engages in substantial gainful activity under 42 USC
21 1382c (a) (3), if a waiver under s. 46.281 (1) (c) is in effect or federal law permits
22 federal financial participation for medical assistance coverage of the person and if
23 funding is available for the person under the family care benefit.”.

1 **70.** Page 762, line 5: after that line insert:

2 “SECTION 1501d. 50.034 (6) of the statutes is amended to read:

3 50.034 (6) FUNDING. Funding for supportive, personal or nursing services that
4 a person who resides in a residential care apartment complex receives, other than
5 private or 3rd-party funding, may be provided only under s. 46.27 (11) (c) 7. or 46.277
6 (5) (e), unless except if the provider of the services is a certified medical assistance
7 provider under s. 49.45 or if the funding is provided as a family care benefit under
8 ss. 46.2805 to 46.2895.”

*Notwithstanding section
16.42(1) of the statutes,*

9 **71.** Page 767, line 16: delete “(a)”.

10 **72.** Page 1405, line 22: on lines 22 and 24, delete “46.288 (1) to (4)” and
11 substitute “46.288 (1) to (3)”.

12 **73.** Page 1406, line 6: after that line insert:

*, as created by
this act,*

13 “(1m) REPORT ON FAMILY CARE. ~~By~~ November 1, 2000, the department of health
14 and family services shall submit to the governor, as part of the department’s 2001–03
15 biennial budget request, a report that describes the implementation and outcomes
16 of the pilot projects under section 46.281 (1) (d) of the statutes and that makes
17 recommendations on the family care program under sections 46.2805 to 46.2895 of
18 the statutes, as created by this act.

19 (1n) ALTERNATIVE TO FAMILY CARE.

20 (a) The department of health and family services shall, as soon as possible
21 before July 1, 2002, seek waivers of federal medical assistance statutes and
22 regulations from the federal department of health and human services that are
23 necessary to implement in up to 3 pilot sites a model for the provision of long-term
24 care that is an alternative to the family care program under sections 46.2805 to

1 46.2895 of the statutes, as created by this act, that would have all of the following
2 characteristics:

3 1. Medical assistance coverage of services under waiver programs under
4 sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes would be expanded to
5 include selected services specified under section 49.46 (2) (b) of the statutes,
6 including personal care and home health care.

7 2. Counties in which the pilot sites are located would provide or contract for the
8 provision of, organize or arrange for long-term care services to eligible persons, but
9 would not be required to compete with private or nonprofit organizations for
10 contracts to provide the long-term care.

11 3. Counties in which the pilot sites are located would provide services of a
12 resource center, as specified under section 46.283 (4) of the statutes, as created by
13 this act. However, the entity providing the services need not be separate from an
14 entity that provides, contracts for the provision of, organizes or arranges for
15 long-term care services under subdivision 2., except that a county may contract for
16 the provision of functions if necessary to obtain federal waiver approval.

17 4. The cost of the program would not exceed the cost of relevant aspects of the
18 family care program.

19 5. Pilot sites would be required to reduce average costs per person served in the
20 areas of the sites under sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes
21 for the calendar year preceding implementation of the alternative model, in order to
22 serve additional persons on waiting lists for the services.

23 6. The department of health and family services would distribute funding to
24 the pilot sites on a per person per month payment basis using the same methodology

1 as that used under section 46.284 (5) (a) of the statutes, as created by this act, as
2 adjusted for the specific services provided.

3 7. The risk-sharing provisions specified under section 46.284 (5) of the
4 statutes, as created by this act, would apply to pilot sites.

5 8. Resource centers operated by pilot sites would be required to provide or
6 contract for the provision of services specified under section 46.283 (3) (a), (b), (e), (f),
7 (g), (i) and (k) of the statutes, as created by this act.

8 (b) If the federal waivers specified under paragraph (a) are approved, the
9 department of health and family services shall as soon as possible before July 1,
10 2002, seek enactment of statutory language, including appropriation of necessary
11 funding, to implement the model described under paragraph (a), as approved under
12 the federal waivers.”.

13 **74.** Page 1410, line 12: after that line insert:

14 “(1m) EVALUATION OF FAMILY CARE PILOT PROJECTS. As soon as possible, the
15 legislative audit bureau shall contract with an organization other than an agency of
16 the state to evaluate the pilot projects under section 46.281 (1) (d) of the statutes, as
17 created by this act, and pilot projects under SECTION 9123 (1n) of this act as to
18 cost-effectiveness, client access to services and quality of care.”.

19 **75.** Page 1472, line 9: delete lines 9 and 10 and substitute “(5), 46.281 (1) (a)
20 and (b) and 46.282 (1) of the statutes take effect on July 1, 2001, or on the day after
21 publication.”

22

(END)

D - NOTE

~~#. Page 589, line 7: on lines 7 and 8, delete
"renumbered 46.27(4)(c) l. h. and".~~

#. Page 589, line 7: delete the material beginning
with "renumbered" and ending with "and" on
line 8.

Page 589, line ⁹ 9: delete "(c) l. h." and
substitute "(c) 8."

(END OF INSERT)

D-NOTE

CMH

To Richard Magna:

This redraft makes two technical changes to SECTION 9123 (1m), one to notwithstanding the current prescribing of the content of budget requests by the secretary of administration under s. 16.42 (1), state., and the other to add "as created by this act" after s. 46.281 (1) (d). The redraft also changes the treatment of s. 46.27 (4) (c) 8., state., to amend it only, rather than to also renumber it.

DAK

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

LRBb0591/4dn
DAK:cmh:km

June 21, 1999

To Richard Megna:

This redraft makes two technical changes to SECTION 9123 (1m), one to notwithstanding the current prescribing of the content of budget requests by the secretary of administration under s. 16.42 (1), stats., and the other to add "as created by this act" after s. 46.281 (1)(d). The redraft also changes the treatment of s. 46.27 (4)(c) 8., stats., to amend it only, rather than to also renumber it.

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0232/2
DAK:kmg&jlg:km

LFB:.....Goldman – DHFS proposal to conduct health care data collection activities

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 1408, line 15: after that line insert:

3 “(8x) HEALTH CARE INFORMATION PROPOSAL. By June 30, 2001, the department
4 of health and family services may develop and submit a proposal to the department
5 of administration for supplemental expenditure and position authority for the
6 conduct of health care data collection activities by the subunit of the department of
7 health and family services that deals with health care information. If submitted, the
8 proposal shall identify potential sources of revenue to support proposed health care
9 data collection activities. The department of administration may modify any
10 proposal received and may submit the proposal, together with any proposed
11 legislation required to implement the proposal, to the cochairpersons of the joint

1 committee on finance. If the cochairpersons of the committee do not notify the
2 secretary of administration within 14 working days after receiving the proposal that
3 the cochairpersons have scheduled a meeting for the purpose of reviewing the
4 proposal, the department of administration may approve the proposed expenditure
5 and position authority, including any proposed modifications of the department of
6 administration. If, within 14 working days after receiving the proposal, the
7 cochairpersons notify the secretary of administration that the cochairpersons have
8 scheduled a meeting for the purpose of reviewing the proposal, the department of
9 administration may not approve the proposed expenditure and position authority,
10 including any proposed modifications of the department of administration, except as
11 approved by the committee.”

12

(END)



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBb0591/4
DAK:kmg&wlj&cmh:km

LFB:.....Megna – Family Care changes

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 588, line 10: delete the material beginning with that line and ending
3 with page 589, line 6 and substitute:

4 **“SECTION 1033g.** 46.27 (4) (am) of the statutes is created to read:

5 46.27 (4) (am) If a local long-term care council in a county assumes under s.
6 46.282 (3) (b) the duties of the county long-term support planning committee under
7 this subsection, the county long-term support planning committee for the county is
8 dissolved.

9 **SECTION 1033h.** 46.27 (4) (c) (intro.) of the statutes is amended to read:

10 46.27 (4) (c) (intro.) The planning committee shall develop, or, if a local
11 long-term care council has under s. 46.282 (3) (b) assumed the duties of the planning

1 committee, the local long-term care council shall recommend a community options
2 plan for participation in the program. The plan shall include:

3 **SECTION 1033i.** 46.27 (4) (c) 5. of the statutes is amended to read:

4 46.27 (4) (c) 5. A description of the method to be used by the committee or, if
5 a local long-term care council has under s. 46.282 (3) (b) assumed the duties of the
6 planning committee, the local long-term care council to monitor the implementation
7 of the program.”.

8 **2.** Page 589, line 7: delete the material beginning with “renumbered” and
9 ending with “and” on line 8.

10 **3.** Page 589, line 9: delete “(c) 1. h.” and substitute “(c) 8.”.

11 **4.** Page 600, line 7: after that line insert:

12 **“(7m)** “Local long-term care council” means a local long-term care council that
13 is appointed under s. 46.282 (2) (a).”.

14 **5.** Page 600, line 23: after “care” insert “, including copies of reports submitted
15 to the department by local long-term care councils,”.

16 **6.** Page 601, line 9: delete “determined by the department” and substitute “in
17 which resides no more than 29% of the population that is eligible for the family care
18 benefit”.

19 **7.** Page 601, line 13: delete “Contract” and substitute “In geographic areas in
20 which resides no more than 29% of the population that is eligible for the family care
21 benefit, contract”.

22 **8.** Page 601, line 16: delete “contract with one or more entities” and substitute
23 “if the local long-term care council for the applicable area has developed the initial
24 plan under s. 46.282 (3) (a) 1., contract with entities specified under par. (d) and, only

1 if specifically authorized by the legislature and if the legislature appropriates
2 necessary funding, contract as so authorized with one or more entities in addition to
3 those specified in par. (d)”.

4 **9.** Page 602, line 23: after “county,” insert “hospital,”

5 **10.** Page 603, line 1: after “county,” insert “hospital,”

6 **11.** Page 603, line 11: delete that line and substitute:

7 **“46.282 Councils on long-term care. (1) COUNCIL ON LONG-TERM CARE. The**
8 **council on long-term care appointed”.**

9 **12.** Page 603, line 13: delete “(1)” and substitute “(a)”.

10 **13.** Page 603, line 15: delete “(2)” and substitute “(b)”.

11 **14.** Page 603, line 18: delete “(a)” and substitute “1.”

12 **15.** Page 603, line 20: delete “(b)” and substitute “2.”

13 **16.** Page 603, line 22: delete “(c)” and substitute “3.”

14 **17.** Page 603, line 23: delete “(d)” and substitute “4.”

15 **18.** Page 603, line 24: delete “(e)” and substitute “5.”

16 **19.** Page 604, line 1: delete “(f)” and substitute “6.”

17 **20.** Page 604, line 2: delete “(3)” and substitute “(c)”.

18 **21.** Page 604, line 4: delete “(4)” and substitute “(d)”.

19 **22.** Page 604, line 5: delete “(5)” and substitute “(e)”.

20 **23.** Page 604, line 7: delete “(6)” and substitute “(f)”.

21 **24.** Page 604, line 9: delete “(7)” and substitute “(g)”.

22 **25.** Page 604, line 12: delete “(a)” and substitute “1.”

1 **26.** Page 604, line 13: delete “(b)” and substitute “2.”

2 **27.** Page 604, line 14: delete “(c)” and substitute “3.”

3 **28.** Page 604, line 16: delete “(d)” and substitute “4.”

4 **29.** Page 604, line 17: delete “(e)” and substitute “5.”

5 **30.** Page 604, line 18: after that line insert:

6 “(2) LOCAL LONG-TERM CARE COUNCILS; APPOINTMENT; MEMBERSHIP; TERMS;
7 COMPENSATION AND TRAINING; OFFICERS. (a) *Appointment by a county.* In a county that
8 participates in a pilot project under s. 46.281 (1) (d) and before a county participates
9 in the program under ss. 46.2805 to 46.2895, the following shall be done:

10 1. The county board of supervisors of the county shall appoint a local long-term
11 care council or the county boards of supervisors of 2 or more contiguous counties shall
12 appoint a local long-term care council, except as follows:

13 a. In a county with a county executive or a county administrator, the county
14 executive or county administrator shall appoint the local long-term care council,
15 other than as provided in subd. 1. b., subject to confirmation by the county board of
16 supervisors.

17 b. If the lands of any tribe or band are located in the county or contiguous
18 counties to be served by a local long-term care council, each tribe or band with these
19 lands shall appoint at least one member of the local long-term care council.

20 2. A county board of supervisors or, in a county with a county executive or a
21 county administrator, the county executive or county administrator shall appoint
22 members of the local long-term care council who are required to be older persons or
23 persons with physical or developmental disabilities or their immediate family
24 members or other representatives from nominations that are submitted to the

1 county board of supervisors or the county executive or county administrator by older
2 persons or persons with physical or developmental disabilities or their immediate
3 family members or other representatives and by local organizations that represent
4 older persons or persons with physical or developmental disabilities.

5 (am) *Appointment by a tribe or band or council.* If a tribe or band or the Great
6 Lakes inter-tribal council, inc., intends to apply for a contract to operate a resource
7 center or for certification as a care management organization, the tribe or band or
8 the council shall, as a condition of the application or the certification appoint a local
9 long-term care council.

10 (b) *Membership.* 1. A local long-term care council that serves a single-county
11 area shall consist of 17 members, at least 9 of whom are older persons or persons with
12 physical or developmental disabilities or their immediate family members or other
13 representatives. The age or disability represented by these 9 members shall
14 correspond to the proportion of numbers of persons, as determined by the
15 department, receiving long-term care in this state who are aged 65 or older or have
16 a physical or developmental disability. The total remaining 8 members shall consist
17 of providers of long-term care services, persons residing in the county with
18 recognized ability and demonstrated interest in long-term care and up to 3 members
19 of the county board of supervisors or other elected officials.

20 2. A local long-term care council that serves an area of 2 or more contiguous
21 counties shall consist of 23 members, at least 12 of whom are older persons or persons
22 with physical or developmental disabilities or their immediate family members or
23 other representatives. The age or disability represented by these 12 members shall
24 correspond to the proportion of numbers of persons, as determined by the
25 department, receiving long-term care in this state who are aged 65 or older or have

1 a physical or developmental disability. The total remaining 11 members shall consist
2 of all of the following:

3 a. Providers of long-term care services.

4 b. Persons residing in the county with recognized ability and demonstrated
5 interest in long-term care.

6 c. Either up to 4 members of the county boards of supervisors or other elected
7 officials or, for a council that serves an area of more than 4 contiguous counties, up
8 to one member of the county board of supervisors of the contiguous counties or up to
9 one other elected official in each contiguous county area.

10 3. A local long-term care council that is appointed by a tribe or band or by the
11 Great Lakes inter-tribal council, inc., shall consist of 21 members, at least 11 of
12 whom are older persons or persons with physical or developmental disabilities or
13 their family members or other representatives. The age or disability represented by
14 these 11 members shall correspond to the proportion of numbers of persons, as
15 determined by the department, receiving long-term care in this state who are aged
16 65 or older or have a physical or developmental disability. The total remaining 10
17 members shall consist of providers of long-term care services, persons residing in the
18 county with recognized ability and demonstrated interest in long-term care and up
19 to 3 members of the governing board of the tribe or band or the Great Lakes
20 inter-tribal council, inc., that appoints the local long-term care council.

21 4. Vacancies in membership in a local long-term care council shall be filled for
22 the residue of the unexpired term in the manner that the original appointments are
23 made. A local long-term care council member may be removed from office for the
24 following reasons:

1 a. For cause, by a two-thirds vote of each county board of supervisors or
2 governing body of a tribe or band participating in the appointment, on due notice in
3 writing and hearing of the charges against the member.

4 b. If the member, when appointed, was a member of the county board of
5 supervisors or was another elected official and was not reelected to that office, on due
6 notice in writing.

7 (c) *Terms.* The members of the local long-term care council appointed under
8 par. (a) shall serve 3-year terms. No member may serve more than 2 consecutive
9 terms. Of the members first appointed under par. (b) 1., 6 shall be appointed for 3
10 years; 6 shall be appointed for 4 years; and 5 shall be appointed for 5 years. Of the
11 members first appointed under par. (b) 2., 8 shall be appointed for 3 years; 8 shall be
12 appointed for 4 years; and 7 shall be appointed for 5 years. Of the members appointed
13 under par. (b) 3., one-third shall be appointed for 3 years; one-third shall be
14 appointed for 4 years; and one-third shall be appointed for 5 years.

15 (d) *Compensation and training.* Members of the local long-term care council
16 who are older persons, persons with physical or developmental disabilities or the
17 family members or other representatives of these persons shall receive compensation
18 from the applicable county for reasonable expenses associated with membership
19 participation. The county board of supervisors or, in the case of a member appointed
20 by the governing body of a tribe or band or by the Great Lakes inter-tribal council,
21 inc., the tribe or band or the Great Lakes inter-tribal council, inc., shall provide
22 training to these members to enable them to participate effectively.

23 (e) *Officers.* At the first meeting of a local long-term care council, members
24 shall elect from their number a chairperson, a secretary and other officers as
25 necessary. Vacancies in these offices shall be filled for the unexpired terms. The

1 chairperson shall preside at all meetings when present and countersign all actions
2 taken by the local long-term care council. In case of the absence of the chairperson
3 for any meeting, the members present shall choose a temporary chairperson.

4 (3) LOCAL LONG-TERM CARE COUNCILS; POWERS AND DUTIES. (a) A local long-term
5 care council shall do all of the following within the council's area:

6 1. Develop the initial plan for the structure of the county, multicounty or tribal
7 resource center and care management organization or organizations, including
8 formulating recommendations to the county board or boards of supervisors and, in
9 a county with a county executive or a county administrator, to the county executive
10 or county administrator, to the governing body of the tribe or band or of the Great
11 Lakes inter-tribal council, inc., if applicable, and to the department on all of the
12 following:

13 a. Whether or not the county, counties, tribe or band or Great Lakes inter-tribal
14 council, inc., should exercise its right to apply under s. 46.283 (1) for a contract to
15 operate a resource center or to apply under s. 46.284 (1) for a contract to operate a
16 care management organization and how the operation should proceed.

17 b. Whether the county should create a family care district to operate a resource
18 center or under a care management organization.

19 c. Whether local organizations other than the county should serve as
20 alternatives or in addition to county-operated entities to operate a resource center
21 or a care management organization and, if so, which organizations should be
22 considered.

23 d. If applicable, how county-operated functions should interact with a resource
24 center or care management organization that is operated by a tribe or band or by the
25 Great Lakes inter-tribal council, inc.

1 2. a. In the years 2000 and 2001, under criteria that the department prescribes,
2 after consulting with the council on long-term care, evaluate the performance of the
3 care management organization or organizations in the area of the local long-term
4 care council and determine whether additional care management organizations are
5 needed in the area and, if so, recommend this to the department.

6 b. In the year 2002 and thereafter, under criteria that the department
7 prescribes, evaluate the performance of the care management organization or
8 organizations in the area of the local long-term care council and determine whether
9 additional care management organizations are needed in the area and, if so
10 recommend this to the department.

11 3. Advise the department regarding applications for initial certification or
12 certification renewal of care management organizations in the area of the local
13 long-term care council, including providing recommendations for organizations
14 applying for certification or recertification, and assist the department in reviewing
15 and evaluating the applications.

16 4. Receive information about and monitor complaints from persons served by
17 the care management organization in the area concerning whether the numbers of
18 providers of long-term care services used by the care management organization are
19 sufficient to ensure convenient and desirable consumer choice and provide
20 recommendations under subd. 3. to the department about this issue.

21 5. Review initial plans and existing provider networks of any care management
22 organization in the area to assist the care management organization in developing
23 a network of service providers that includes a sufficient number of accessible,
24 convenient and desirable services.

1 6. Advise care management organizations about whether to offer optional
2 acute and primary health care services and, if so, how these benefits should be
3 offered.

4 7. Review the utilization of various types of long-term care services by care
5 management organizations in the area.

6 8. Monitor the pattern of enrollments and disenrollments in local care
7 management organizations.

8 9. Identify gaps in services, living arrangements and community resources and
9 develop strategies to build local capacity to serve older persons and persons with
10 physical or developmental disabilities, especially those with long-term care needs.

11 10. Perform long-range planning on policy for older persons and persons with
12 physical or developmental disabilities.

13 11. Annually review interagency agreements between a resource center and
14 care management organization or organizations and make recommendations, as
15 appropriate, on the interaction between the resource center and the care
16 management organization or organizations to assure coordination between or
17 among them.

18 12. Annually review the number and types of complaints and grievances about
19 the long-term care system by persons who receive or may receive care under the
20 system, to determine if a need exists for system changes, and recommend system or
21 other changes if appropriate.

22 13. Identify potential new sources of community resources and funding for
23 needed services for older persons and persons with physical or developmental
24 disabilities.

1 14. Support long-term care system improvements to improve services to older
2 persons and persons with physical or developmental disabilities and their families.

3 15. Annually report to the department and, before July 1, 2001, to the
4 long-term care council concerning significant achievements and problems in the
5 local long-term care system.

6 (b) A local long-term care council may, within the local long-term care council's
7 area, assume the duties of the county long-term community support planning
8 committee as specified under s. 46.27 (4)."

9 **31.** Page 604, line 19: after "46.282" insert "(1)".

10 **32.** Page 604, line 22: delete "A county" and substitute "After considering
11 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
12 county".

13 **33.** Page 605, line 7: delete "The governing" and substitute "After considering
14 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., the
15 governing".

16 **34.** Page 606, line 1: delete "may contract" and substitute "shall contract with
17 the entities specified under s. 46.281 (1) (d) 1. and may, in addition to contracting
18 with these entities and subject to approval of necessary funding, contract to operate
19 a resource center with counties, family care districts, the governing body of a tribe
20 or band or the Great Lakes inter-tribal council, inc., or under a joint application of
21 any of these, or".

22 **35.** Page 606, line 2: delete "to operate a resource center".

23 **36.** Page 606, line 9: delete lines 9 to 13.

1 **37.** Page 608, line 12: after “facility” insert “and the person is determined by
2 the resource center to have a condition that is expected to last at least 90 days that
3 would require care, assistance or supervision”.

4 **38.** Page 609, line 3: delete that line and substitute:

5 “(7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s.
6 19.32 (2), of a resource center that contains personally identifiable information, as
7 defined in s. 19.62 (5), concerning an individual who receives services from the
8 resource center may be disclosed by the resource center without the individual’s
9 informed consent, except as follows:

10 (a) A resource center may provide information as required to comply with s.
11 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer the
12 program under ss. 46.2805 to 46.2895.

13 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

14 **39.** Page 609, line 13: delete “A county board” and substitute “After
15 considering recommendations of the local long-term care council under s. 46.282 (3)
16 (a) 1., a county board”.

17 **40.** Page 610, line 22: delete the material beginning with that line and ending
18 with page 611, line 16, and substitute “selected group or groups. With respect to
19 contracts exclusively with counties to operate a care management organization, all
20 of the following apply:

21 1. Before January 1, 2003, the department may not contract with an
22 organization other than the county to operate a care management organization in
23 the county unless any of the following applies:

1 a. The county and the local long-term care council agree in writing that at least
2 one additional care management organization is necessary or desirable.

3 b. The governing body of a tribe or band or the Great Lakes inter-tribal council,
4 inc., elects to operate a care management organization within the area and is
5 certified under sub. (3).

6 2. After December 31, 2002, and before January 1, 2004, the department may
7 not contract with an organization other than the county to operate a care
8 management organization in the county unless any of the following applies:

9 a. Subdivision 1. a. or b. applies.

10 b. The county fails to meet requirements of sub. (3) and performance standards
11 prescribed by the department.

12 c. The county does not have the capacity to serve all county residents who are
13 entitled to the family care benefit in the client group or groups that the county serves
14 and cannot develop the capacity. If this subd. 2. c. applies, the department may
15 contract with an organization in addition to the county.

16 3. After December 31, 2003, the department may contract with counties, family
17 care districts, the governing body of a tribe or band or the Great Lakes inter-tribal
18 council, inc., or under a joint application of any of these, or with a private nonprofit
19 organization that has no significant connection to an entity that operates a resource
20 center. Proposals for contracts under this subdivision shall be solicited under a
21 competitive sealed proposal process under s. 16.75 (2m) and, after consulting with
22 the local long-term care council for the county or counties, the department shall
23 evaluate the proposals primarily as to the quality of care that is proposed to be
24 provided, certify those applicants that meet the requirements specified in sub. (3)(a),
25 select certified applicants for contract and contract with the selected applicants.”.

1 **41.** Page 611, line 20: after the period insert “An application shall include
2 comments about the applicant and recommendations about the application that are
3 provided by the appropriate local long-term care council, as specified under s. 46.282
4 (3) (a) 3.”.

5 **42.** Page 616, line 19: delete that line and substitute:

6 “(7) CONFIDENTIALITY; EXCHANGE OF INFORMATION. No record, as defined in s.
7 19.32 (2), of a care management organization that contains personally identifiable
8 information, as defined in s. 19.62 (5), concerning an individual who receives services
9 from the care management organization may be disclosed by the care management
10 organization without the individual’s informed consent, except as follows:

11 (a) A care management organization may provide information as required to
12 comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to
13 administer the program under ss. 46.2805 to 46.2895.

14 (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4),”.

15 **43.** Page 617, line 3: delete lines 3 to 10.

16 **44.** Page 617, line 13: after “**organization.**” insert “(1)”.

17 **45.** Page 617, line 16: delete that line and substitute “directly operate both a
18 resource center and a care management organization, except as follows”.

19 **46.** Page 617, line 16: after that line insert:

20 “(a) For a pilot project established under s. 46.281 (1) (d) 2., provision of the
21 services specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate
22 from the provision of services of the care management organization by January 1,
23 2001.

1 (b) The department may approve separation of the functions of a resource
2 center from those of a care management organization by a means other than those
3 specified in sub. (2).

4 (2) Except as provided in sub. (1), all of”.

5 **47.** Page 617, line 19: delete that line and substitute:

6 “(a) 1. If a county board of supervisors and, if applicable,”.

7 **48.** Page 617, line 24: delete “(b)” and substitute “2.”.

8 **49.** Page 618, line 3: delete that line and substitute:

9 “(b) 1. If the governing body of a tribe or band”.

10 **50.** Page 618, line 9: delete “(b)” and substitute “2.”.

11 **51.** Page 618, line 14: delete that line and substitute:

12 “(c) Any county or family care”.

13 **52.** Page 618, line 22: delete lines 22 and 23 and substitute “person is at least
14 18 years of age; has a physical disability, as defined in s. 15.197 (4) (a) 2., or
15 infirmities of aging, as defined in s. 55.01 (3); and meets all of the”.

16 **53.** Page 619, line 14: delete “was receiving” and substitute “had been
17 receiving for at least 60 days, under a written plan of care,”.

18 **54.** Page 619, line 15: after “department,” insert “which were”.

19 **55.** Page 620, line 3: after “financial” insert “or disability”.

20 **56.** Page 621, line 23: after that line insert:

21 “3. The department or its designee determines that the person no longer meets
22 eligibility criteria under sub. (1).”.

23 **57.** Page 622, line 22: after “correctly” insert “and incorrectly”.

1 **58.** Page 623, line 4: delete lines 4 to 6 and substitute “the following applicable
2 matters by filing, within 45 days of the failure of a resource center or care
3 management organization to act on the contested matter within the time frames
4 specified by rule by the department or within 45 days after receipt of notice of a
5 decision in a contested matter, a written request for a hearing under s. 227.44 to the
6 division of hearings and appeals created under s. 15.103 (1):”.

7 **59.** Page 623, line 17: after that line insert:

8 “h. Imposition of ineligibility for the family care benefit under s. 46.286 (4).

9 i. Denial of eligibility or reduction of the amounts of the family care benefit
10 under s. 46.286 (5).

11 j. Determinations similar to those specified under s. 49.455 (8) (a), made under
12 s. 46.286 (6).

13 k. Recovery of family care benefit payments under s. 46.286 (7).”.

14 **60.** Page 623, line 21: delete lines 21 to 23 and substitute:

15 “(b) An enrollee may contest a decision, omission or action of a care
16 management organization other than those specified in par. (a), or may contest the
17 choice of”.

18 **61.** Page 624, line 14: delete lines 14 and 15.

19 **62.** Page 624, line 16: delete “(3)” and substitute “(2)”.

20 **63.** Page 625, line 9: delete that line and substitute:

21 “(3) Procedures and standards for procedures for s. 46.287 (2), including time
22 frames for action by a resource center or a care management organization on a
23 contested matter.”.

1 **64.** Page 625, line 19: delete “A county” and substitute “After considering
2 recommendations of the local long-term care council under s. 46.282 (3) (a) 1., a
3 county”.

4 **65.** Page 626, line 6: on lines 6 and 18, delete “contiguous”.

5 **66.** Page 627, line 4: delete lines 4 and 5 and substitute:

6 “2. The family care district board appointed under par. (a) 2. shall consist of an
7 odd number of members that is at least 15 but not more than 21 persons, all of whom
8 are”.

9 **67.** Page 627, line 12: delete that line and substitute “Up to one-fourth of the
10 members of the board may be elected or appointed officials or employes of the”.

11 **68.** Page 627, line 21: after “appointed” insert “, unless removed for cause
12 under s. 17.13”.

13 **69.** Page 628, line 15: after “center” insert “or a portion of its functions”.

14 **70.** Page 628, line 16: after “both” insert “a resource center or its functions and
15 a care management organization”.

16 **71.** Page 738, line 20: after that line insert:

17 “**SECTION 1433v.** 49.46 (1) (a) 14m. of the statutes is created to read:

18 49.46 (1) (a) 14m. Any person who would meet the financial and other eligibility
19 requirements for home or community-based services under the family care benefit
20 but for the fact that the person engages in substantial gainful activity under 42 USC
21 1382c (a) (3), if a waiver under s. 46.281 (1) (c) is in effect or federal law permits
22 federal financial participation for medical assistance coverage of the person and if
23 funding is available for the person under the family care benefit.”.

1 **72.** Page 762, line 5: after that line insert:

2 “**SECTION 1501d.** 50.034 (6) of the statutes is amended to read:

3 50.034 (6) FUNDING. Funding for supportive, personal or nursing services that
4 a person who resides in a residential care apartment complex receives, other than
5 private or 3rd-party funding, may be provided only under s. 46.27 (11)(c) 7. or 46.277
6 (5) (e), unless except if the provider of the services is a certified medical assistance
7 provider under s. 49.45 or if the funding is provided as a family care benefit under
8 ss. 46.2805 to 46.2895.”

9 **73.** Page 767, line 16: delete “(a)”.

10 **74.** Page 1405, line 22: on lines 22 and 24, delete “46.288 (1) to (4)” and
11 substitute “46.288 (1) to (3)”.

12 **75.** Page 1406, line 6: after that line insert:

13 “(1m) REPORT ON FAMILY CARE. Notwithstanding section 16.42(1) of the statutes,
14 by November 1, 2000, the department of health and family services shall submit to
15 the governor, as part of the department’s 2001–03 biennial budget request, a report
16 that describes the implementation and outcomes of the pilot projects under section
17 46.281 (1)(d) of the statutes, as created by this act, and that makes recommendations
18 on the family care program under sections 46.2805 to 46.2895 of the statutes, as
19 created by this act.

20 (1n) ALTERNATIVE TO FAMILY CARE.

21 (a) The department of health and family services shall, as soon as possible
22 before July 1, 2002, seek waivers of federal medical assistance statutes and
23 regulations from the federal department of health and human services that are
24 necessary to implement in up to 3 pilot sites a model for the provision of long-term

1 care that is an alternative to the family care program under sections 46.2805 to
2 46.2895 of the statutes, as created by this act, that would have all of the following
3 characteristics:

4 1. Medical assistance coverage of services under waiver programs under
5 sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes would be expanded to
6 include selected services specified under section 49.46 (2) (b) of the statutes,
7 including personal care and home health care.

8 2. Counties in which the pilot sites are located would provide or contract for the
9 provision of, organize or arrange for long-term care services to eligible persons, but
10 would not be required to compete with private or nonprofit organizations for
11 contracts to provide the long-term care.

12 3. Counties in which the pilot sites are located would provide services of a
13 resource center, as specified under section 46.283 (4) of the statutes, as created by
14 this act. However, the entity providing the services need not be separate from an
15 entity that provides, contracts for the provision of, organizes or arranges for
16 long-term care services under subdivision 2., except that a county may contract for
17 the provision of functions if necessary to obtain federal waiver approval.

18 4. The cost of the program would not exceed the cost of relevant aspects of the
19 family care program.

20 5. Pilot sites would be required to reduce average costs per person served in the
21 areas of the sites under sections 46.27 (11), 46.275, 46.277 and 46.278 of the statutes
22 for the calendar year preceding implementation of the alternative model, in order to
23 serve additional persons on waiting lists for the services.

24 6. The department of health and family services would distribute funding to
25 the pilot sites on a per person per month payment basis using the same methodology

1 as that used under section 46.284 (5) (a) of the statutes, as created by this act, as
2 adjusted for the specific services provided.

3 7. The risk-sharing provisions specified under section 46.284 (5) of the
4 statutes, as created by this act, would apply to pilot sites.

5 8. Resource centers operated by pilot sites would be required to provide or
6 contract for the provision of services specified under section 46.283 (3) (a), (b), (e), (f),
7 (g), (i) and (k) of the statutes, as created by this act.

8 (b) If the federal waivers specified under paragraph (a) are approved, the
9 department of health and family services shall as soon as possible before July 1,
10 2002, seek enactment of statutory language, including appropriation of necessary
11 funding, to implement the model described under paragraph (a), as approved under
12 the federal waivers.”.

13 **76.** Page 1410, line 12: after that line insert:

14 “(1m) EVALUATION OF FAMILY CARE PILOT PROJECTS. As soon as possible, the
15 legislative audit bureau shall contract with an organization other than an agency of
16 the state to evaluate the pilot projects under section 46.281 (1) (d) of the statutes, as
17 created by this act, and pilot projects under SECTION 9123 (1n) of this act as to
18 cost-effectiveness, client access to services and quality of care.”.

19 **77.** Page 1472, line 9: delete lines 9 and 10 and substitute “(5), 46.281 (1) (a)
20 and (b) and 46.282 (1) of the statutes take effect on July 1, 2001, or on the day after
21 publication.”.

22 (END)