

WISCONSIN HEALTH AND EDUCATIONAL FACILITIES AUTHORITY

Base Agency

LFB Summary Item for Introduction as Separate Legislation

Item #	Title
1	Definition of an Educational Facility
2	Authority to Use Out-of-State Trust Companies and Banks

MO# _____

BURKE	Y	N	A
DECKER	Y	N	A
MOORE	Y	N	A
SHIBILSKI	Y	N	A
PLACHE	Y	N	A
WIRCH	Y	N	A
DARLING	Y	N	A
WELCH	Y	N	A
GARD	Y	N	A
KAUFERT	Y	N	A
ALBERS	Y	N	A
DUFF	Y	N	A
WARD	Y	N	A
HUEBSCH	Y	N	A
HUBER	Y	N	A
COGGS	Y	N	A

AYE 16 NO 0 ABS _____



Legislative Fiscal Bureau

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

June 5, 2001

Joint Committee on Finance

Paper 235

Miscellaneous Adjustments (Board on Aging and Long-Term Care)

[LFB 2001-03 Budget Summary: Page 149, #6]

CURRENT LAW

In its 2001-03 biennial budget instructions, DOA directs agencies not to request expenditure authority to fund the estimated costs of pay plan increases in the upcoming biennium. Instead, agencies must set aside funding to reflect these projected cost increases as non-appropriated reserves in program revenue account statements. Consequently, the state operations appropriations supported by program revenue (PR) and segregated revenue (SEG) funds in the bill should not include funding to support projected compensation state employee compensation increases. Agencies request pay plan supplements from these non-appropriated reserves to support prospective increases in salary and fringe benefit costs.

GOVERNOR

Provide \$27,900 PR in 2001-02 and \$59,700 PR in 2002-03 to fund: (a) health insurance premiums (\$7,100 PR in 2001-02 and \$17,500 PR in 2002-03); and (b) pay plan compensation reserves (\$20,800 PR in 2001-02 and \$42,200 PR in 2002-03).

MODIFICATION

Delete provision.

Explanation: This modification would treat compensation reserves for the Board in the same manner as all other PR- and SEG- funded state operations appropriations. Consequently, funding for projected compensation increases for the Board would not be reflected in the Chapter 20 appropriations schedule, and instead be treated as non-appropriated reserves.

Modification

PR

2001-03 FUNDING (Change to Bill)

- \$87,600

Prepared by: Charles Morgan

MO# _____

BURKE	Y	N	A
DECKER	Y	N	A
MOORE	Y	N	A
SHIBILSKI	Y	N	A
PLACHE	Y	N	A
WIRCH	Y	N	A
DARLING	Y	N	A
WELCH	Y	N	A
GARD	Y	N	A
KAUFERT	Y	N	A
ALBERS	Y	N	A
DUFF	Y	N	A
WARD	Y	N	A
HUEBSCH	Y	N	A
HUBER	Y	N	A
COGGS	Y	N	A

AYE 16 NO 0 ABS _____

AGENCY: Board on Aging & Long Term Care

LFB PAPER #: Summary Item for Which No Paper Prepared

ISSUE: Item #5, Ombudsman Position Funding

ALTERNATIVE: Motion

SUMMARY:

Restore the 2 volunteer ombudsman positions the BOALTC put in their budget request, but were not included in the Gov's budget. Cost is \$60,000 each year from the civil penalties fund in DHFS. This fund is from fines collected from nursing homes & is to be used for practices that improve the lives of nursing home residents.

BY: Cindy

BOARD ON AGING AND LONG-TERM CARE

Volunteer Coordinator Position

Motion:

Move to provide \$35,300 PR in 2001-02 and \$40,200 PR in 2002-03 and provide 1.0 PR position, beginning in 2001-02, to fund a volunteer coordinator position at the Board on Aging and Long-Term Care. Direct DHFS to request approval by the U.S. Department of Health and Human Services Health Care Financing Administration to use civil money penalties related to federal nursing home deficiencies for funding of this volunteer coordinator.

Note:

The Board currently employs one volunteer coordinator to recruit, screen and supervise volunteer ombudsmen in 49 facilities in four counties. The additional of another volunteer coordinator would allow the program to be expanded to other counties.

Nursing homes may be assessed civil money penalties for violation of federal rules and regulations relating to nursing home care. These monies are provided to the state, but federal rules require that the monies be used for the "protection of the health and property of residents of facilities that the state or HCFA finds non compliant." The Department of Health and Family Services indicates that they would have to request HCFA approval to use the funds for a use other than: a) payment for the costs of relocating residents to other facilities; (b) state costs related to the operation of a facility pending correction of deficiencies or closure; or (c) reimbursement of residents for personal funds or property lost at a facility as a result of actions by the facility or by individuals used by the facility to provide services to residents.

Annual civil money penalty revenues have ranged from \$189,300 to \$461,700 over the last four year. The current balance is \$1,194,039. Although the balance is sizable, the Department indicates that the balance in the nursing home monitoring and receivership account is a negative \$1,111,500 due to a number of problem facilities recently. The Department has indicated that it

was planning to use the civil money penalties to cover these monitoring and receivership costs. The Department received approval through a s. 16.515 request for a "value added technical assistance" project that would use \$247,000 of civil money penalties in year one and \$200,000 in year two. The Department has deferred this project because of the large receivership and monitoring costs, but would like to start the project once an adequate balance of revenues has accumulated.

[Change to Bill: \$75,500 PR and 1.0 PR position]

MO#			
BURKE	Y	N	A
DECKER	Y	N	A
MOORE	Y	N	A
SHIBILSKI	Y	N	A
PLACHE	Y	N	A
WIRCH	Y	N	A
DARLING	Y	N	A
WELCH	Y	N	A
GARD	Y	N	A
KAUFERT	Y	N	A
ALBERS	Y	N	A
DUFF	Y	N	A
WARD	Y	N	A
HUEBSCH	Y	N	A
HUBER	Y	N	A
COGGS	Y	N	A

AYE 15 NO 1 ABS _____

BOARD ON AGING AND LONG-TERM CARE

Bill Agency

LFB Summary Items for Which No Issue Paper Has Been Prepared

<u>Item #</u>	<u>Title</u>
1	Standard Budget Adjustments
4	Small Agency Support Infrastructure (SASI) Initiative
5	Ombudsman Position Funding
7	Computer Monitors
8	Convert PR appropriation to a Continuing Appropriation

LFB Summary Items to be Addressed in a Separate Paper

<u>Item #</u>	<u>Title</u>
2	Base Budget Reductions
3	Family Care Ombudsman Services

AGENCY: DHFS – Family Care

LFB PAPER #: 520

ISSUE: Family Care Funding & Ombudsman Services

ALTERNATIVE: Most likely a package deal here. Otherwise A, B1, C4 (if C4 fails, go C3, then C2. DO NOT GO C1)

SUMMARY:

Alt A. is a reestimate on funding, B1 goes ahead with the Kenosha pilot, and the "C" options gets us various number of External Advocacy services. C4 gets us what the advocates want for the program, then C3 and C2 go down from there.

BY: Cindy



Legislative Fiscal Bureau

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June 5, 2001

Joint Committee on Finance

Paper #520

Family Care Funding and Ombudsman Services (DHFS -- Family Care and Other Community-Based Long-Term Care Programs and Board on Aging and Long-Term Care)

[LFB 2001-03 Budget Summary: Page 148, #3 and Page 408, #1]

CURRENT LAW

Currently, eight Family Care resource centers operate in Fond du Lac, La Crosse, Portage, Milwaukee, Kenosha, Marathon, Trempealeau, and Jackson Counties. Five care management organizations (CMOs) operate in Fond du Lac, La Crosse, Portage, Milwaukee, and Richland Counties. The resource centers have been operating since January, 1998, while the CMOs began operating in the first half of calendar year 2000.

In 2000-01, \$6,066,100 (\$5,756,300 GPR and \$309,800 FED) is budgeted to support Family Care resource centers, while \$58,289,700 (\$25,071,800 GPR and \$33,217,900 FED) is budgeted to fund capitation payments for CMOs. Most of these funds are budgeted as transfers from other programs, such as the community options program (COP) and community aids. In addition, \$4,635,400 (\$2,131,500 GPR and \$2,503,900 FED) is budgeted for state administration. In total, base funding for Family Care, net of transfers, is \$7,283,500 GPR and \$14,777,100 FED.

GOVERNOR

Health and Family Services. Delete \$4,508,500 (\$2,179,200 GPR, \$1,432,000 FED and -\$8,119,700 PR) in 2001-02 and delete \$6,032,500 (\$2,291,700 GPR, -\$272,600 FED and -\$8,051,600 PR) in 2002-03 to reflect the net fiscal effect of funding: (a) service costs for Family Care participants that are not eligible for medical assistance (MA); (b) costs to operate resource centers at all sites; and (c) costs of state oversight, including information technology.

Board on Aging and Long-Term Care. Delete \$450,300 PR annually and 1.0 PR position, beginning in 2001-02, to eliminate ombudsman services the Board currently provides for persons who apply for, and enroll in, Family Care.

DISCUSSION POINTS

Reestimate

1. This item does not include funding for the cost of providing services to MA clients in the current CMO pilot sites. The Governor's MA base reestimate included \$1,898,900 GPR and \$10,686,300 FED in 2001-02 and \$4,472,100 GPR and \$13,210,100 FED in 2002-03 to fund projected MA caseload increases for the existing CMO sites. Based on a reestimate of projected caseload, the MA base reestimate, as presented in Paper #465, would provide \$1,696,400 GPR and \$1,712,700 FED in 2001-02 and \$6,292,800 GPR and \$8,871,400 FED in 2002-03 to reflect projected increases in these costs.

2. Attachment 1 identifies the Governor's recommended funding amounts for each component of Family Care, excluding the MA service costs for MA-eligible participants. The GPR increases identified in Attachment 1 are greater than the GPR increases identified in this item, since some funding increases would be supported by transfers from community aids and COP.

3. Attachment 1 indicates that, under the Governor's recommendation, the largest factor accounting for the increase in GPR costs is the projected CMO service costs for non MA-eligible Family Care enrollees. This item accounts for \$3,141,700 of the \$3,451,800 GPR increase in 2001-02 and \$5,734,900 of the \$6,486,100 increase in 2002-03. The second largest item accounting for the increase in GPR costs is information technology (IT) costs, for which an additional \$426,900 GPR in 2001-02 and \$401,000 GPR in 2002-03 would be provided. Funding reductions recommended by the Governor include: (a) eliminating the Family Care ombudsman program (external advocacy); and (b) deleting base funding for the state's Long-Term Care Council, which is scheduled to sunset on July 1, 2001, under current law. These two items would reduce GPR costs by \$271,500 GPR annually.

4. The funding budgeted for Family Care should be modified to reflect more recent information on the costs of operating resource centers and revised CMO enrollment estimates. Attachment 2 identifies these reestimates. Attachment 2 shows that funding in the bill should be reduced by \$1,428,100 GPR and \$47,400 FED in 2001-02 and reduced by \$1,519,500 GPR and increased by \$2,056,200 FED to reflect the reestimates.

5. The funding change is primarily due to three factors. First, additional funding is required to reflect the actual time it takes for the resource centers to complete various required tasks, and to reflect increases in caseload. Incorporating those changes would suggest that funding in the bill for the resource centers should be increased by \$1,411,300 GPR in 2001-02 and \$1,413,100 GPR in 2002-03. Second, funding should be reduced by \$1,717,300 GPR in 2001-02 and \$1,915,200 GPR in 2002-03 to reflect lower projected enrollment of non-MA eligibles in the CMO

counties. Finally, there are additional GPR funds available to support program costs due to transfers from community aids and COP as a result of updated community aids amounts for calendar year 2001 and due to a larger shift of COP funds from supporting CMO MA costs.

6. The reestimate in Attachment 2 projects a lower number of non-MA enrollees than was projected under the Governor's bill. If the amount of funding provided for this purpose is insufficient to fund actual costs of providing services to this group, CMOs could establish waiting lists for this group. The Governor's budget includes a statutory change that would delay until January 1, 2004, the date by which persons who are not eligible for MA and who meet specified functional criteria are entitled to the Family Care benefit.

Expansion in 2001-03 and Beyond

7. The Governor's budget would provide funding to continue the current CMO and resource center sites, but would not provide any funding for any new sites or any developmental funding to add new sites in the 2003-05 biennium.

8. Under the 1999 Wisconsin Act 9, it was anticipated that Kenosha County, as well as three other counties, would establish CMOs by the end of the 1999-01 biennium, in addition to the five current CMO counties. However, after lengthy negotiations on capitation rates and concerns about the sufficiency of funding, only five counties established CMOs in the biennium.

9. Kenosha County has invested time and resources preparing for implementation of a CMO site, and could establish a CMO site, beginning on July 1, 2002, if state funding were provided. State funds have been provided to Kenosha County to prepare for establishing a CMO. The estimated cost of establishing a CMO in Kenosha County, beginning on July 1, 2002, would be \$3,032,100 GPR in 2002-03. This amount is somewhat less than the amount estimated by the Department in its 2001-03 biennial budget request.

10. If the Committee wished to expand the Family Care program to Kenosha County in the 2001-03 biennium, it could increase funding in the bill for this purpose. It could also provide a lesser amount by delaying the start date for the expansion.

11. The Committee could also consider increasing funding in the bill to partially support planning costs counties would incur if they wished to participate in Family Care in the 2003-05 biennium. Past experience indicates that there is a substantial amount of planning required by counties before they establish CMOs. For the current CMOs, the state has supported two-thirds of the planning costs (half of which are federally funded), while counties have funded one-third of these costs. DHFS estimates that the planning funds required for each site would be \$848,000 (all funds), of which \$688,800 would be needed for CMO planning and \$160,000 for resource center planning. Under these assumptions, the GPR cost in 2002-03 to provide developmental funding for one county, beginning in January 2003, would be approximately \$141,300 GPR. The cost to provide funding for five counties to conduct these activities would be \$706,700 GPR.

12. The rationale for not providing additional funding for expansion of Family Care is that Family Care is a pilot program, and before expanding it, its success in improving long-term

care services in a cost-effective manner should be evaluated. At this point, the CMO pilots have operated for only one year and there is not sufficient experience and data to assess the program.

13. Proponents of expanding Family Care argue that many aspects of Family Care, such as managed care, are fundamental to achieving efficiencies in long-term care, and that to address growing demand for long-term care services, it is important to move forward with the program at this time. It is argued that if no funding is provided at this time, the program may not expand to additional counties in the 2003-05 biennium.

External Advocacy Services

14. The Governor's budget would eliminate base funding that was provided in 1999 Act 9 for external advocacy for Family Care. Some groups view the external advocacy component as an important feature of Family Care because it ensures that the CMO is responsive to the needs of the recipient in a managed care delivery system.

15. The Governor's budget would delete \$450,300 (\$225,200 GPR and \$225,100 FED) annually in DHFS for external advocacy services and reduce funding for the Board on Aging by a corresponding amount. This funding currently supports 1.0 position for the Board of Aging and Long-Term Care to oversee and manage a contract for ombudsman services. The Board has contracted with the Wisconsin Coalition for Advocacy (WCA) for these services. WCA employs a project director, one staff attorney (0.80 FTE), and 6.0 ombudsmen in the five CMO counties.

16. There are several options to provide the external advocacy services at a lower cost. First, the advocate to client ratio could be reduced from one advocate per 1,000 clients to one advocate per 2,000 clients. The one-to-2,000 ratio would mirror the recommended ratio used by the Board of Aging and Long-Term Care for its ombudsman program for nursing home residents. Given the projected enrollment for the Family Care CMOs, this would suggest a need for three or four ombudsman positions, and could reduce costs by between \$100,000 to \$150,000 annually.

17. A second option would be to direct the Board on Aging and Long-Term Care to directly provide advocacy services, rather than requiring the Board to contract for these services. This would eliminate the costs of the project director and staff attorney that is supported under the current contract. The Board already has a full-time attorney and could provide necessary legal services for the ombudsman program. In addition, the current position at the Board that monitors the contracting could instead supervise the Family Care ombudsman positions and provide direction for that program. This could reduce costs by \$70,000 to \$90,000 annually.

ALTERNATIVES TO BASE

A. Family Care Reestimate

Modify funding in the bill to delete \$1,428,100 GPR and \$47,400 FED in 2001-02 and delete \$1,519,500 GPR and provide \$2,056,200 FED in 2002-03 to reflect a reestimate of the costs of Family Care in the 2001-03 biennium.

<u>Modification</u>	<u>GPR</u>	<u>FED</u>	<u>PR</u>	<u>TOTAL</u>
2001-03 FUNDING (Change to Base)	\$1,523,300	\$3,168,300	- \$16,171,300	- \$11,479,800
[Change to Bill]	- \$2,947,600	\$2,008,800	\$0	- \$938,800]

B. Kenosha County CMO

1. Provide \$3,032,100 GPR and \$8,202,000 FED in 2002-03 to establish a new CMO site in Kenosha County, beginning on July 1, 2002.

<u>Alternative B1</u>	<u>GPR</u>	<u>FED</u>	<u>TOTAL</u>
2001-03 FUNDING (Change to Base)	\$3,032,100	\$8,202,000	\$11,234,100
[Change to Bill]	\$3,032,100	\$8,202,000	\$11,234,100]

2. Provide \$1,758,900 GPR and \$3,776,800 FED in 2002-03 to establish a new CMO site in Kenosha County, beginning on January 1, 2003.

<u>Alternative B2</u>	<u>GPR</u>	<u>FED</u>	<u>TOTAL</u>
2001-03 FUNDING (Change to Base)	\$1,758,900	\$3,776,800	\$5,535,700
[Change to Bill]	\$1,758,900	\$3,776,800	\$5,535,700]

3. Maintain current law.

C. External Advocacy Services

1. Adopt the Governor's recommendations to delete \$225,200 GPR and \$225,100 FED annually in DHFS and \$450,300 PR annually and 1.0 PR position, beginning in 2001-02, in the Board on Aging and Long-Term Care to eliminate funding and positions for external advocacy services.

<u>Alternative C1</u>	<u>GPR</u>	<u>FED</u>	<u>PR</u>	<u>TOTAL</u>
2001-03 FUNDING (Change to Base)	- \$450,400	- \$450,200	- \$900,600	\$1,801,200
[Change to Bill]	\$0	\$0	\$0	\$0]
2002-03 POSITIONS (Change to Base)	0.00	0.00	- 1.00	- 1.00
[Change to Bill]	0.00	0.00	0.00	0.00]

2. Increase funding in the bill for DHFS by \$98,000 FED annually and increase funding in the Board on Aging and Long-Term Care by \$98,000 GPR and \$98,000 PR annually and provide the Board 4.0 positions (2.0 GPR positions and 2.0 PR positions), beginning in 2001-02, to establish a Family Care ombudsman program in the Board on Aging and Long-Term Care. Three of the positions would be ombudsman positions and one position would serve as a supervisor and director for the Family Care advocacy program.

Alternative C2	GPR	FED	PR	TOTAL
2001-03 FUNDING (Change to Base)	- \$254,400	- \$254,200	- \$704,600	- \$1,213,200
[Change to Bill]	\$196,000	\$196,000	\$196,000	\$588,000]
2002-03 POSITIONS (Change to Base)	2.00	0.00	1.00	3.00
[Change to Bill]	2.00	0.00	2.00	4.00]

3. Increase funding in the bill for DHFS by \$147,000 FED annually and increase funding in the bill for the Board by \$147,000 GPR and \$147,000 PR annually and provide the Board 1.0 positions (0.5 GPR positions and 0.5 PR positions), beginning in 2001-02, to contract for Family Care advocacy services. The positions at the Board would monitor the contract for advocacy services. Funding would support an estimated three ombudsman for Family Care.

Alternative C3	GPR	FED	PR	TOTAL
2001-03 FUNDING (Change to Base)	- \$156,400	- \$156,200	- \$606,600	- \$919,200
[Change to Bill]	\$294,000	\$294,000	\$294,000	\$882,000]
2002-03 POSITIONS (Change to Base)	0.50	0.00	- 0.50	0.00
[Change to Bill]	0.50	0.00	0.50	1.00]

4. Maintain current law. Under this alternative, base funding would be retained in DHFS (\$225,200 GPR, \$225,100 FED annually) and the Board on Aging and Long-Term Care (\$450,300 PR annually and 1.0 PR position) to fund external advocacy services. Funding would support an estimated six ombudsmen for Family Care.

Alternative C4	GPR	FED	PR	TOTAL
2001-03 FUNDING (Change to Base)	\$0	\$0	\$0	\$0
[Change to Bill]	\$450,300	\$450,300	\$900,600	\$1,772,000]
2002-03 POSITIONS (Change to Base)	0.00	0.00	0.00	0.00
[Change to Bill]	0.00	0.00	1.00	1.00]

Prepared by: Richard Megna

ATTACHMENT 1

Governor's Family Care Funding (Excludes CMO costs for MA-Eligibles)

Component	Base			2001-02			2002-03			
	2000-01		Change	Amount		Change	Amount		Change	
	GPR	All Funds		GPR	All Funds		GPR	All Funds		GPR
Resource Center Costs	\$5,756,300	\$ 6,066,100	\$6,018,700	\$7,438,000	\$262,400	\$1,371,900	\$6,347,400	\$7,958,800	\$591,100	\$1,892,700
CMO Non-MA										
Client Service Net Cost	\$1,748,600	\$1,748,600	\$4,890,300	\$4,890,300	\$3,141,700	\$3,141,700	\$7,483,500	\$7,483,500	\$5,734,900	\$5,734,900
Slate Administration										
IT Costs	\$996,600	\$2,502,700	\$1,423,500	\$3,252,200	\$426,900	\$749,500	\$1,397,600	\$3,214,800	\$401,000	\$712,100
Quality Assurance	705,100	1,273,100	447,300	859,500	-257,800	-413,600	529,600	1,011,700	-175,500	-261,400
Training for Resource Ctrs., CMOs	50,000	100,000	43,600	87,200	-6,400	-14,800	43,000	86,000	-7,000	-14,000
External Advocacy	221,500	443,100	0	0	-221,500	-443,100	0	0	-221,500	-443,100
LTC Council/Support for Consumer Involvement	50,000	100,000	0	0	-50,000	-100,000	0	0	-50,000	-100,000
Evaluation	47,500	95,000	100,000	200,000	52,500	105,000	35,400	70,900	-12,100	-24,100
Contract/Program Administration	0	0	11,200	22,500	11,200	22,500	11,600	23,100	11,600	23,100
Development Funds	0	0	0	0	0	0	0	0	0	0
Income Maintenance Costs	60,800	121,600	153,600	307,300	92,800	185,700	274,400	548,900	213,600	427,300
Subtotal	\$2,131,500	\$4,635,500	\$2,135,600	\$4,641,500	\$4,100	\$6,000	\$2,291,600	\$4,955,400	\$160,100	\$319,900
TOTAL	\$9,636,400	\$12,450,200	\$13,088,300	\$17,051,000	\$3,451,800	\$4,606,800	\$16,122,500	\$20,397,700	\$6,486,100	\$7,947,500

ATTACHMENT 2

Family Care Funding Reestimates of Governor's Recommendation

	2001-02				2002-03					
	Governor		Reestimate		Governor		Reestimate			
	GPR	All Funds								
Resource Center Costs	\$6,018,700	\$7,438,000	\$7,430,000	\$8,771,800	\$1,411,300	\$6,347,400	\$7,958,800	\$9,350,700	\$1,413,100	\$1,391,900
CMO Non-MA Client Service Net Cost	\$4,890,300	\$4,890,300	\$3,173,000	\$3,173,000	-\$1,717,300	\$7,483,500	\$7,483,500	\$5,568,300	-\$1,915,200	-\$1,915,200
State Administration										
IT Costs	\$1,423,500	\$3,252,200	\$1,423,500	\$3,252,200	\$0	\$1,397,600	\$3,214,800	\$1,397,600	\$3,214,800	\$0
Quality Assurance	447,300	859,500	437,400	851,200	-9,900	529,600	1,011,700	509,800	986,500	-19,800
Training for Resource Ctrs., CMOs	43,600	87,200	43,600	87,200	0	43,000	86,000	43,000	86,000	0
External Advocacy	0	0	0	0	0	0	0	0	0	0
LTC Council/Support for Consumer Involvement	0	0	0	0	0	0	0	0	0	0
Evaluation	100,000	200,100	100,000	200,100	0	35,400	70,900	35,400	70,900	0
Contract/Program Administration	11,200	22,500	11,200	22,500	0	11,600	23,100	11,600	23,100	0
Development Funds	0	0	0	0	0	0	0	0	0	0
Income Maintenance Costs	153,600	307,300	182,200	364,500	28,600	274,400	548,900	346,300	692,600	71,900
Subtotal	\$2,179,200	\$4,728,800	\$2,197,900	\$4,777,700	\$18,700	\$2,291,600	\$4,955,400	\$2,343,700	\$5,073,900	\$52,100
Total (excludes CMO costs for MA eligibles)	\$13,088,200	\$17,057,100	\$12,800,900	\$16,722,500	-\$287,300	\$16,122,500	\$20,397,700	\$15,672,500	\$19,992,900	-\$450,000
GPR Revenues										
Community Aids / COP transfers	\$8,744,800		\$9,885,600		\$1,140,800	\$11,666,500		\$12,736,000		\$1,069,500
Offset in COP-W Quality Assurance Funds	32,800		32,800	0	0	32,800		32,800		0
Base Funds	2,131,500		2,131,500	0	0	2,131,500		2,131,500		0
Subtotal	\$10,909,100		\$12,049,900		\$1,140,800	\$13,830,800		\$14,900,300		\$1,069,500
Funding Change	\$2,179,100		\$751,000		-\$1,428,100	\$2,291,700		\$772,200		-\$1,519,500

AGENCY: DHFS – COP, etc

LFB PAPER #: 521

ISSUE: COP and Other Community-Based Long Term Care Programs

ALTERNATIVE: Most likely a package deal here somewhere intertwined with the IGT paper. Otherwise A1, 3c (or whatever you can get), B2 (of that fails, B3, then B1), C1e (or whatever you can get), D1a, E2.

SUMMARY:

This may get rolled into the IGT deal, but in case it doesn't here goes.

Alt A1 approves the Gov's additional funding for COP. In addition, we do 3 which provides additional funding for COP W & R. This is the more fiscally prudent approach than doing Alt A2. A3c gets us 500 additional slots, kind of in the middle of the pack.

Alt B2 opens up more CIP II and CIP IB slots due to nursing home bed closures. This is the middle of the road approach, B3 is the high end, B1 is the low end.

Alt C1e gives us 100 more CIP IB slots. Again, the middle of the road approach.

Alt D1a give us 5 more Brain Injury Waiver slots in each year. We had the constituent request for 7 more each year, I went down from there to save \$, rather than going up to 10 each year.

Alt E2 gives an 8% increase to the PACE/WPP programs instead of the 13% and 22% increases the Gov. gave them. They're still getting an increase, but we can reallocate the money saved here to almost pay for all the additions made above.

BY: Cindy



Legislative Fiscal Bureau

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June 5, 2001 Joint Committee on Finance

Paper #521

COP and Other Community-Based Long Term Care Programs (DHFS -- Family Care and Other Community-Based Long-Term Care Programs)

[LFB 2001-03 Budget Summary: Page 411, #2 and #3]

CURRENT LAW

There are a number of programs that provide a comprehensive set of community-based services to persons who are at risk of entering a nursing home. Under the medical assistance (MA) program, there are five state-funded home and community-based waiver programs. There are several programs because each target group has different service needs and certain MA waiver programs are tied to the closing of nursing home beds. Persons with developmental disabilities are served by the community integration program IA (CIP IA) and community integration program IB (CIP IB). Both programs provide the same services -- the difference is that the CIP IA supports services for individuals who are relocated from the three state Centers for the Developmentally Disabled and requires a bed closure and budget reduction at a Center.

Persons who are elderly or physically disabled are served by two MA waiver programs - the community integration program II (CIP II) and the community options program waiver (COP-W). Both programs provide the same services -- the difference is that the CIP II program requires a nursing home bed closure to create a new slot. The final MA waiver program is the Brain Injury Waiver (BIW), which funds services for persons who are diverted or relocated from institutions that provide post acute rehabilitation care.

The COP-R program is state-funded only and is the most flexible of the several community-based, long-term care programs. COP-R can be used to serve five different target groups -- the elderly, physically disabled, developmentally disabled, persons with chronic mental illness and persons with Alzheimer's disease. Persons with chronic mental illness and individuals in the early stages of Alzheimer's disease are only eligible for COP-R and cannot

access the MA waiver programs, nor are they eligible for MA-funded nursing home care. The eligibility rules for COP-R are somewhat more flexible than the MA waiver programs and COP-R is more flexible in the types of covered services. COP-R is often used to fill gaps in the MA waiver programs, such as funding services not supported under the MA waivers. Also, if the state's per diem payments are insufficient to pay for all the costs of care, counties use COP-R funds to support excess waiver costs. Further, counties use COP funds to support the 41% match for local matched CIP IB slots. Although COP-R is state funded only, some of the uses of COP by counties generate federal matching funds, as in the case of locally matched CIP IB slots.

In addition to the COP and MA waiver programs, there are several long-term care managed care pilot programs that are significant, but limited to certain parts of the state. First, there is the Family Care pilot program, which serves the elderly, physically disabled and developmentally disabled in four counties (Fond du Lac, Portage, La Crosse, and Richland) and serves the elderly in one county (Milwaukee). In addition, the program for all inclusive care for the elderly (PACE) and the Wisconsin partnership program (WPP) provide both acute health and long-term care services to elderly and disabled persons who are eligible for nursing home care. There are PACE/WPP sites serving the following counties: Milwaukee, Dane, Eau Claire, Chippewa, Clark and Dunn Counties.

Table 1 provides a summary of all the state-funded, comprehensive, community-based long-term care programs. Table 1 indicates the target groups of each program and whether slots under that program require a closure of a nursing home bed. In addition, Table 1 provides estimates for the number of slots supported under each program and total estimated expenditures for 2000-01. Since a portion of the funding for Family Care is derived from transfers from COP and MA waiver programs, the estimated number of slots and expenditures for those programs has been reduced to reflect those transfers. The estimated number of CIP IB slots includes locally matched CIP IB slots. There are 5,470 locally-matched slots for which the county pays the required state match for MA using COP-R funds, community aids or local property taxes. Since counties use their COP-R funds for the local match, the locally match CIP IB participants are represented in part in the COP-R numbers and, as a result, there is some duplication of participants. Of the \$140,966,500 amount identified for CIP IB, \$94,522,400 represents the federal matching funds for locally matched CIP IB slots.

TABLE 1

Community-Based Long-Term Care Programs

Program	Target Groups				Tied to Nursing Bed Closure	Estimated Slots June, 2001	Estimated Expenditures 2000-01
	Elderly & Physically Disabled	Developmentally Disabled	Chronic Mental Illness/ Alzheimer	Brain Injured			
MA Waivers							
CIP II	X				Yes	2,301	\$44,651,600
COP-W	X				No	6,777	76,060,100
CIP IA		X			Yes	1,080	62,662,900
CIP IB		X			No	7,432	140,966,500
BIW				X	No	208	14,715,800
COP-R	X	X	X	X	No	6,077	\$64,593,400
Family Care	X	X			No	3,324	\$50,287,700
PACE/WPP	X				No	<u>1,569</u> 28,768	<u>\$48,171,000</u> \$502,109,000

GOVERNOR

COP. Provide \$1,336,300 in 2001-02 and \$1,343,000 in 2002-03 to fully fund COP slots that were created in 2000-01. 1999 Wisconsin Act 9 created 581 new COP slots that were phased-in during the 2000-01 fiscal year and, as a result, the full annualized cost of these slots is not included in the base budget. Federal matching funds for COP-waiver slots are included as part of the MA base reestimate.

CIP II & CIP IB Slots. Provide \$5,728,300 (\$2,362,900 GPR and \$3,365,400 FED) in 2001-02 and \$11,456,600 (\$4,746,500 GPR and \$6,710,100 FED) in 2002-03 to fund 60 new CIP IB slots and 686 new CIP II slots that will be phased-in over the 2001-02 fiscal year.

CIP IA. Increase the maximum reimbursement rate for persons who are relocated from state Centers for the Developmentally Disabled to the community under the CIP IA program, from the current rate of \$190 per day, to \$200 per day for placements made in state fiscal year 2001-02 and to \$225 per day for placements made in 2002-03. In addition, increase the budget reductions at the state Centers to the same amounts which, in combination with the CIP IA rate increase, would be cost neutral. [This item is not addressed in this paper.]

Family Care. Provide \$7,719,700 (\$4,078,100 GPR, \$12,118,300 FED, and -\$8,476,700 PR) in 2001-02 and \$11,224,600 (\$6,763,800 GPR, \$12,927,500 FED, and -\$8,476,700 PR) in 2002-03 to fund projected enrollment increases in the current Family Care CMO sites and to fund costs of Family Care resource centers and state administration. [This item is not addressed in this paper.]

PACE/WPP. Provide \$6,245,300 (\$2,774,900 GPR and \$3,470,400 FED) in 2001-02 and \$13,633,400 (\$5,975,400 GPR and \$7,658,000 FED) in 2002-03 to fund projected growth in enrollment and anticipated increases in contract costs. [This item is part of the MA base reestimate.]

DISCUSSION POINTS

1. Table 2 provides a history of funding for community-based long term care programs over the last five years.

TABLE 2

**Community-Based Long-Term Care Program Expenditures
1995-96 to 2000-01**

<u>Program</u>	<u>1995-96</u>	<u>1996-97</u>	<u>1997-98</u>	<u>1998-99</u>	<u>1999-00</u>	<u>2000-01 (estimated)</u>
CIP II	\$24,283,400	\$27,798,600	\$30,053,100	\$29,793,300	\$37,012,600	\$44,651,600
COP-W	56,421,900	57,839,000	58,720,300	77,621,200	86,119,200	76,060,100
CIP IA	35,431,500	41,845,600	50,429,700	55,636,900	62,900,500	62,662,900
CIP IB	69,622,800	84,731,100	118,490,400	119,543,200	142,980,500	140,966,500
BIW	1,526,900	4,273,600	7,332,100	10,155,200	11,663,600	14,715,800
COP-R	56,531,400	59,380,400	60,688,000	68,126,400	68,499,600	64,593,400
Family Care	0	0	0	0	6,973,600	50,287,700
PACE/WPP	8,737,900	12,982,900	18,769,300	27,230,200	37,272,600	48,171,000
Personal Care / Home health	<u>91,165,200</u>	<u>101,415,700</u>	<u>117,605,500</u>	<u>127,162,000</u>	<u>137,244,200</u>	<u>165,945,100</u>
Total	\$343,721,000	\$390,266,900	\$462,088,400	\$515,268,400	\$590,666,400	\$668,054,100
% increase		13.5%	18.4%	11.5%	14.6%	13.1%

2. There is no single, centralized list of persons who are waiting for services under the community-based, long-term care programs except there is a list compiled by DHFS of persons waiting for COP services. Table 3 indicates the number of persons on the COP waiting list over the last five years. The number identified for calendar year 2000 excludes 2,798 individuals in Family Care counties, since it is expected that all persons on waiting lists in the Family Care counties will be served during calendar year 2001. On December 31, 1999, there were 8,308 persons on waiting lists in non-Family Care counties. The number on waiting lists in non-Family Care counties increased to 9,202 on December 31, 2000.

TABLE 3

**Number of Persons on County COP Waiting Lists
1996 to 2000**

<u>December 31 of</u>	<u>Number</u>
1996	8,270
1997	9,189
1998	10,879
1999	11,353
2000	9,202

The waiting list figure for CY 2000 does not include 2,798 persons in family care counties since they are expected to be served in 2001.

3. Although Table 3 indicates that the statewide total number of persons on waiting lists decreased last year, this reduction has been concentrated in a limited number of counties. For most counties, the number of persons on waiting lists has increased.

4. Providing additional funding to the COP program or MA waiver programs would help address waiting lists in counties not served by the pilot programs. Also, if Family Care expands to other counties, there would be additional funding that could be transferred to support the expansion of Family Care.

5. If the Committee wished to provide additional funding to reduce waiting lists for long-term care services, it would need to decide which programs to expand. Since the CIP IA and CIP II programs are tied to nursing home bed closures, the choice is essentially between the COP-R, COP-W, CIP IB and BIW programs.

6. One piece of information that pertains to the allocation of any additional funding is the composition of the COP waiting list. On December 31, 2000, the total waiting list (excluding Family Care counties) included 9,202 individuals, of which 3,066 (33%) were elderly, 2,805 (30%) were developmentally disabled, 2,665 (29%) were physically disabled, 417 (5%) were chronically mentally ill, and 249 (3%) were persons with alcohol or drug abuse problems

7. Since 30% of the persons on waiting lists are developmentally disabled, increasing the CIP IB program and the COP-W program may be appropriate. Increases in these programs would ensure that state funds would be augmented by federal matching funds. If the portion of any additional funding for the developmentally disabled is delivered through the CIP IB program, then any funding increases to the COP program might be provided on a 85% COP-W and 15% COP-R split. This would provide some funding for the chronically mentally ill and persons with drug abuse problems (8% of the COP waiting list) and would provide some flexible funding for the counties for

gaps not covered under the MA waiver programs.

8. If funding is targeted for the COP program alone, the split between COP-W and COP-R might be 60% COP-W and 40% COP-R, since 60% of the COP is represented by elderly and physically disabled individual while the includes groups that cannot be served by COP-W.

9. Because of its flexibility, the COP-R program can be used to support persons and services that cannot be supported under the MA waiver programs. COP-R funds can also be used by counties to support costs in the MA waiver programs that are in excess of the state reimbursement rate.

10. The BIW program has not received any slot increases for several years. It is difficult to serve these individuals under other waivers because of their higher costs. The BIW program provides a relatively higher reimbursement rate because of the high costs of providing services to persons enrolled in the program.

CIP II & CIP IB Slots Tied to Bed Closures

11. The Governor's recommended increase for 686 new CIP II slots and 60 new CIP IB slots in 2001-02 is tied to nursing home bed closures. In the past, it has been the practice to create new CIP II slots when a nursing facility bed closes and to create a new CIP IB slot when a bed at an intermediate care facility for the mentally retarded (ICF-MR) closes. The rationale is that the elimination of a nursing home bed would reduce nursing home costs under MA, and an additional CIP II or CIP IB slot would provide a community slot in its place.

12. Although the Governor's budget provides a number of slots related to bed closings, the number of slots is less than the number of bed closings that have, and are expected to occur. The decision may reflect several concerns. First, some of the bed closures involve empty beds and, as a result, there may not be any nursing home bed savings to fund the additional community slot. Also, there is uncertainty in the number of future bed closures. Further, because of the unusual number of bed closures in 1999-00 and 2000-01, there would be a large number of slots to create when there is a lack of available funds.

13. There were 480 nursing facility bed closures in 1999-00 and 2000-01 for which CIP II slots were not created, since sufficient funding was not budgeted for that many bed closures. In addition, DHFS anticipates that there will be 675 bed closures in 2001-02. DHFS also estimates that there would be an additional 630 bed closures in 2002-03 as well as 60 ICF-MR bed closures in 2002-03. If new slots were provided for all the bed closures projected by DHFS, an additional 480 CIP slots in 2001-02 and another 620 CIP slots and 60 CIP IB slots in 2002-03 would be needed. Funding needed to support these additional slots would be \$3,572,300 (\$1,473,600 GPR) in 2001-02 and \$12,385,500 (\$5,139,700 GPR) in 2002-03.

14. A CIP II slot is essentially the same as a COP-W slot, since both programs serve the same target groups (elderly and physically disabled persons) and provide the same services. The difference between creating CIP II slots that are tied to bed closures and providing new COP-W

slots is in the allocation of the slots. CIP II slots are allocated to the counties in which the bed closure occurred or to the county that serves a person relocated from that closed bed. In contrast, new COP slots would be allocated to all counties.

Funding of PACE/WPP Programs

15. The Governor's budget recommends a significant increase in funding for the PACE/WPP partnership programs. The percentage increase in funding is 13.0% the first year and 22.8% in the second year. Since these programs serve a limited area, it may be appropriate to reduce this funding, and instead, use the funding for slots in COP or MA waiver programs that serve all parts of the state. If the funding increase for PACE/WPP were limited to 8% per year, this would reduce GPR costs by \$986,500 in 2001-02 and \$4,406,100 in 2002-03.

ALTERNATIVES TO BASE

A. COP Funding

1. Approve the Governor's recommendation to provide \$1,336,300 in 2001-02 and \$1,343,000 in 2002-03 to fully fund community option program (COP) slots that were created in 2000-01.

Alternative A1	GPR
2001-03 FUNDING (Change to Base)	\$2,679,300
[Change to Bill]	\$0]

2. In addition to the funding provided under the Governor's recommendation, increase funding for the COP program as indicated in one of the options shown below, based on a 60% COP-W and 40% COP-R split.

	New Slots		2001-02		2002-03		Biennium	
	2001-02	2002-03	GPR	FED	GPR	FED	GPR	FED
a.	100	100	\$403,900	\$186,700	\$1,082,000	\$548,000	\$1,485,900	\$734,700
b.	300	300	1,211,800	560,000	3,246,000	1,644,000	4,457,800	2,204,000
c.	500	500	2,019,600	933,300	5,410,000	2,740,100	7,429,600	3,673,400
d.	1,000	1,000	4,039,200	1,866,500	10,819,900	5,480,000	14,859,100	7,346,500
e.	2,000	2,000	8,078,300	3,733,000	21,639,800	10,960,000	29,718,100	14,693,000
f.	4,500	4,500	18,176,300	8,399,400	48,689,600	24,660,100	66,865,900	33,059,500

3. In addition to the funding provided under the Governor's recommendation, increase funding for the COP program as indicated in one of the options shown below, based on a 85% COP-W and 15% COP-R allocation.

	New Slots		2001-02		2002-03		Biennium	
	2001-02	2002-03	GPR	FED	GPR	FED	GPR	FED
a.	100	100	\$329,700	\$257,700	\$859,600	\$760,200	\$1,189,300	\$1,017,900
b.	300	300	989,000	773,200	2,578,800	2,280,700	3,567,800	3,053,900
c.	500	500	1,648,300	1,288,600	4,298,000	3,801,200	5,946,300	5,089,800
d.	1,000	1,000	3,296,700	2,577,200	8,596,200	7,602,600	11,892,900	10,179,800
e.	2,000	2,000	6,593,500	5,154,500	17,192,300	15,205,100	23,785,800	20,359,600
f.	3,000	3,000	9,890,200	7,731,700	25,788,400	22,807,600	35,678,600	30,539,300

B. CIP II and CIP IB Funding for Nursing Home Bed Closures

1. Approve the Governor's recommendation to provide \$2,362,900 GPR and \$3,365,400 FED in 2001-02 and \$4,746,500 GPR and \$6,710,100 FED in 2002-03 to fund 60 new CIP IB slots and 686 new CIP II slots that will be phased-in over the 2001-02 fiscal year.

Alternative B1	GPR	FED	TOTAL
2001-03 FUNDING (Change to Base)	\$7,109,400	\$10,075,500	\$17,184,900
[Change to Bill]	\$0	\$0	\$0

2. Modify the Governor's recommendation by providing an additional \$2,174,800 GPR and \$3,066,100 FED in 2002-03 to support an additional 620 CIP II slots and 60 CIP IB slots in 2002-03 for anticipated nursing home bed closures in 2002-03.

Alternative B2	GPR	FED	TOTAL
2001-03 FUNDING (Change to Base)	\$9,284,200	\$13,141,600	\$22,425,800
[Change to Bill]	\$2,174,800	\$3,066,100	\$5,240,900

3. Modify the Governor's recommendation by providing an additional \$1,473,600 GPR and \$2,098,700 FED in 2001-02 and \$5,139,600 GPR and \$7,245,900 Fed in 2002-03 to support an additional 480 CIP II slots in 2001-02 and an additional 620 CIP II slots and 60 CIP IB slots in 2002-03 for anticipated nursing home bed closures in 2001-02 and 2002-03.

Alternative B3	GPR	FED	TOTAL
2001-03 FUNDING (Change to Base)	\$13,722,600	\$19,420,100	\$33,142,700
[Change to Bill]	\$6,613,200	\$9,344,600	\$15,957,800

C. Additional CIP IB Funding

1. Provide increased funding and slots for the CIP IB program, as indicated in one of the following options:

	New Slots		2001-02		2002-03		Biennium	
	2001-02	2002-03	GPR	FED	GPR	FED	GPR	FED
a.	20	20	\$72,800	\$103,600	\$219,600	\$310,900	\$292,400	\$414,500
b.	40	40	145,500	207,300	439,200	621,800	584,700	829,100
c.	60	60	218,300	310,900	658,800	932,700	877,100	1,243,600
d.	80	80	291,100	414,600	878,400	1,243,700	1,169,500	1,658,300
e.	100	100	363,800	518,200	1,098,100	1,554,600	1,461,900	2,072,800
f.	200	200	727,700	1,036,400	2,196,100	3,109,100	2,923,800	4,145,500
g.	300	300	1,091,500	1,554,600	3,294,200	4,663,200	4,385,700	6,218,300

2. Maintain current law.

D. Additional BIW Funding

1. Provide increased funding for new slots under the BIW program as indicated in one of the options below:

	New Slots		2001-02		2002-03		Biennium	
	2001-02	2002-03	GPR	FED	GPR	FED	GPR	FED
a.	5	5	\$72,800	\$103,700	\$223,400	\$316,200	\$296,200	\$419,900
b.	10	10	145,600	207,400	446,700	632,500	592,300	839,900
c.	15	15	218,400	311,000	670,100	948,700	888,500	1,259,700
d.	20	20	291,200	414,700	893,500	1,264,900	1,184,700	1,679,600
e.	25	25	364,000	518,400	1,116,800	1,581,100	1,480,800	2,099,500

2. Maintain current law.

E. Funding for the PACE/WPP Programs

1. Maintain the funding recommended by the Governor in the MA base reestimate for the PACE/WPP programs.

2. Delete \$986,500 GPR and \$1,405,100 FED in 2001-02 and \$4,406,100 GPR and \$6,211,600 FED in 2002-03 from funding for the PACE/WPP programs to limit the increase in total funding to 8% in each year rather than 13.0% and 22.8%.

Alternative B2	GPR	FED	TOTAL
2001-03 FUNDING (Change to Base)	\$4,916,000	\$6,953,400	\$11,869,400
[Change to Bill]	- \$5,392,600	- 7,616,700	- \$13,009,300

Prepared by: Richard Megna

HEALTH AND FAMILY SERVICES

Family Care and Other Community-Based Long-Term Care Programs

Base Agency

LFB Summary Items for Which No Issue Paper Has Been Prepared

Item #	Title
4	CBRF Size Limit for COP-W and CIP II
6	Family Care--Entitlement
10	Family Care -- Eligibility
12	Family Care -- Estate Recovery

LFB Summary Items for Introduction as Separate Legislation

Item #	Title	MO#			
5	Children's Home and Community-Based Waiver				
7	Family Care -- Referrals to Resource Centers				
8	Family Care -- Services of Resource Centers and Miscellaneous				
9	Family Care -- Exempt CMO contractors from Home Health Requirement				
11	Family Care -- Family Care Districts	2	BURKE	Y	N A
			DECKER	Y	N A
13	Family Care -- Hearing Rights		MOORE	Y	N A
			SHIBILSKI	Y	N A
14	Preadmission Requirement for CBRFs and RCACs in Non-Home Health		PLACHE	Y	N A
			WIRCH	Y	N A
			DARLING	Y	N A
			WELCH	Y	N A
			GARD	Y	N A
			KAUFERT	Y	N A
			ALBERS	Y	N A
			DUFF	Y	N A
			WARD	Y	N A
			HUEBSCH	Y	N A
			HUBER	Y	N A
			COGGS	Y	N A

AYE 16 NO 0 ABS _____



Legislative Fiscal Bureau

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May 24, 2001

TO: Members
Joint Committee on Finance

FROM: Bob Lang, Director

SUBJECT: Budget Issue Papers

Attached are 2001-03 budget issue papers, prepared by this office, on the following agencies:

- Fox River Navigational System Authority
- Natural Resources -- Forestry and Parks
- Shared Revenue and Tax Relief -- Direct Aid Payments
- Shared Revenue and Tax Relief -- Property Tax Credits
- Transportation -- Transportation Finance
- Transportation -- Local Transportation Aid
- Transportation -- Local Transportation Projects
- Transportation -- State Highway Program
- Public Service Commission -- Office of the Commissioner of Railroads
- Medical College of Wisconsin
- Public Instruction -- General School Aids
- Public Instruction -- Revenue Limits
- Public Instruction -- Categorical Aids
- Public Instruction -- Choice, Charter and Open Enrollment
- Public Instruction -- Assessments and Licensing
- Public Instruction -- School District Operations
- Public Instruction -- Administrative and Other Funding
- Administration -- Attached Programs

These agencies have been scheduled for executive action by the Joint Committee on Finance on Tuesday, May 29 (beginning at 1:00 p.m.) and Wednesday, May 30 (beginning at 10:00 a.m.). The meetings will be held in Room 411 South, State Capitol.

BL/sas
Attachments

2001-03 BUDGET PAPERS

May 29-30, 2001

Paper #

Fox River Navigational System Authority

445 Fox River Navigational System Authority

Natural Resources -- Forestry and Parks

660 Shift Stewardship Debt Service to Forestry Account

661 Assistance to Private Forest Landowners

662 County Forestry Assistance

663 Forest Fire Suppression Grants

664 Forestry Education and Partnerships

665 Forestry Demonstration Center

666 Urban Forestry Grant Program

667 Forest Fire Emergency Fund Cap

668 State Parks Funding Adjustments

669 Funding for New State Parks Properties

Shared Revenue and Tax Relief -- Direct Aid Payments

826 Direct Aid Payments -- Funding Level

827 Use of Census Figures in Shared Revenue and Mandate Relief Calculations

828 Utility Tax on Wholesale Merchant Plants

829 Shared Revenue Payments on Utility Property

830 Use of County Shared Revenue

831 State Aid for Exempt Computers

Shared Revenue and Tax Relief -- Property Tax Credits

835 Homestead and Farmland Preservation Tax Credit Reestimates

Transportation -- Transportation Finance

897 Revenue Bonding Increases -- Bonding Policy

898 Driver's License and Vehicle Registration Abstract Fees

899 Tax Exemption for Air Carriers with Hub Terminal Facilities

900 Tax Exemption for Air Carriers with Hub Terminal Facilities -- Aeronautics Funding

901 Local Roads for Job Preservation Debt Service

Paper #

2015-2016 BUDGET

Transportation -- Local Transportation Aid

- 905 General Transportation Aid -- Funding Level
- 906 Grants to Local Professional Football Stadium Districts
- 907 Mass Transit Operating Assistance -- Funding Level
- 908 Supplemental Mass Transit Aids
- 909 Lift Bridge Aid

Transportation -- Local Transportation Projects

- 910 Transportation Economic Assistance Program -- Funding Level
- 911 Local Roads Improvement Program -- Town Road and Municipal Street Discretionary Program
- 912 Local Roads Improvement Program -- Basic Allocation
- 913 Freight Rail Infrastructure Improvement Program
- 914 Kenosha Transit Parking Facility

Transportation -- State Highway Program

- 922 State Highway Rehabilitation -- Funding Level
- 923 Park East Freeway
- 924 Major Highway Development -- Funding Level
- 925 State Highway Maintenance and Traffic Operations

Public Service Commission -- Office of the Commissioner of Railroads

- 785 Railroad Safety Analyst Salary Funding

Medical College of Wisconsin

Public Instruction -- General School Aids

- 730 General School Aids Funding Level
- 731 Secondary Cost Ceiling

Public Instruction -- Revenue Limits

- 735 Revenue Limit Per Pupil Annual Increase
- 736 Summer School Revenue Limit Enrollment Counts
- 737 Revenue Limit Flexibility

Paper #

Public Instruction -- Categorical Aids

- 740 Special Education Aids
- 741 Student Achievement Guarantee in Education
- 742 Tuition Payments
- 743 Bilingual-Bicultural Education Aids
- 744 School District Charter School Development Loans
- 745 Grants for Cooperative Educational Service Agencies and Grants for Consolidation and Coordination Studies

Public Instruction -- Choice, Charter and Open Enrollment

- 750 Milwaukee Parental Choice Program Student Eligibility
- 751 State Aid for Summer Classes for Milwaukee Charter Schools
- 752 Open Enrollment and Tuition Payment Amount
- 753 Funding Mechanism for the Milwaukee Parental Choice and the Milwaukee Charter School Programs

Public Instruction -- Assessments and Licensing

- 760 High School Graduation Test
- 761 Wisconsin Knowledge and Concepts Examinations and Reading Comprehensive Test

Public Instruction -- School District Operations

- 765 School District Referenda Scheduling

Public Instruction -- Administrative and Other Funding

- 770 National Teacher Certification Reestimate
- 771 Reorganization Plan
- 772 Distribution of Federal Aid

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