

D

DHFS began making these incentive payments to counties in 1992. However, since that time, advances in information technology have resulted in the automation of this data collection function. DHFS indicates that the incentive payments are no longer necessary and that elimination of the payments would not affect the collection of this data.

Under current law, DHFS is required to make incentive payments to counties for the collection of health insurance data from MA applicants. DHFS argues that a statutory change is not needed if these payments are discontinued, since the payments are contingent upon available funding.

d. *MA and BadgerCare Recipient and Provider Hotlines.* The request would reduce the MA and BadgerCare contract administration appropriations by \$53,600 GPR and \$53,600 FED in 2001-02 and by \$58,400 GPR and \$58,400 FED in 2002-03. Federal funding is available to support MA administrative activities on a 50% GPR/50% FED matching basis. Under the plan, DHFS proposes to reduce the hours of operation for MA and BadgerCare recipients and providers telephone hotline and reducing the number of individuals responding to calls on the recipient hotline by from 15 to 13.

e. *MA and BadgerCare Consumer and Provider Meetings.* The request would reduce the MA and BadgerCare contract administration appropriations by \$48,100 GPR and \$48,100 FED annually budgeted for regional meetings with consumers and providers. These meetings are held to solicit input from consumers and providers on DHFS policies relating to MA and BadgerCare services provided through managed care organizations. Under the plan, DHFS would combine two regions into one and reduce the frequency of regional meetings. Under federal requirements, DHFS is required to seek consumer and provider input on managed care waivers and contracts. However, DHFS indicates that amount and quality of input from consumers and providers would not be affected by this change.

f. *Actuarial Services.* The request would reduce the MA and BadgerCare contract administration appropriations by \$18,900 GPR and \$18,900 FED annually to reflect a reduction in actuarial services budgeted for MA, BadgerCare and Family Care. Currently, \$759,000 (all funds) annually is budgeted for actuarial services for these programs. Actuarial services are required under federal law in the development of payments to managed care organizations serving clients under these programs. DHFS indicates that reducing funding for actuarial services would not affect the adequacy or quality of actuarial data available for current programs.

g. *Public Health Position Funding Change.* DHFS proposes to convert 3.5 GPR public health positions to 3.5 FED positions, beginning in 2001-02, and reduce annual GPR funding by \$214,900 and increase FED funding by a corresponding amount. The DHFS request would: (a) fund 2.0 positions with additional funds the state has received under the Ryan White Comprehensive Resource Emergency Act and the Centers for Disease Control and Prevention prevention block grant; (b) fund 1.0 position with additional funds the state has received under the maternal and child health block grant; and (c) fund 0.5 positions with additional funds the state has received from a variety of other federal funding sources. DHFS indicates that the conversions will

not reduce the level of direct services provided under these programs and that, in some instances, the transfer of funding reflects the duties currently performed by the affected positions.

h. *Supplemental Security Income (SSI) Administration.* The request would delete \$200,000 GPR annually to support the administration of the state SSI and caretaker supplement programs. Currently, \$859,800 GPR and \$138,000 PR is budgeted in 2001-02 and 2002-03 to fund these administrative costs. DHFS has recently determined that it can claim a portion of these SSI administrative costs as MA administrative costs, since the MA eligibility for individuals who receive the state-only SSI benefit is dependent upon their SSI eligibility.

i. *Pathways to Independence.* The request would delete \$196,600 GPR annually that is budgeted to fund the pathways to independence program to reflect GPR savings resulting from changes in federal claiming. DHFS and DWD jointly administer this program. When the program was created as part of the 1999-01 biennial budget act, it was assumed that a portion of the program's services would be eligible for federal MA matching funds or federal Rehabilitation Services Administration (RSA) funds available from the U.S. Department of Education, Division of Vocational Rehabilitation (DVR). DHFS has since concluded that services under this program are not eligible for reimbursement under MA. However, all services are eligible for federal matching DVR funds. Due to the higher federal claiming rate for DVR services (approximately 79%, compared to approximately 59% under MA), less GPR funding is needed to support this program. In 2001-02, \$1,081,400 GPR is budgeted in DHFS for the pathways to independence program. Under the plan, 518 slots would be funded for DVR-eligible individuals, an increase from the 314 federally funded slots in the 1999-01 biennium. In addition, the plan supports 25 slots that are funded entirely with GPR, a decrease from 40 slots in the 1999-01 biennium. These slots are available for non-DVR eligible individuals.

The pathways to independence program assists people with significant disabilities to overcome employment barriers and develop career goals. The program offers participants improved health care insurance options, as well as access to specialized benefits consultants and vocational planning specialists, an individualized team of employment advisors, follow-along services to help consumers maintain services, and the full range of DWD services.

j. *Child Abuse and Neglect Prevention Technical Assistance.* DHFS is currently budgeted \$160,000 GPR annually to fund technical assistance and training to counties and tribes that are selected to participate in the prevention of child abuse and neglect (POCAN) program. DHFS currently has a contract with the University of Wisconsin – Extension to provide this service. The DHFS plan deletes this GPR funding and increases federal funding by \$160,000 FED annually to reflect the availability of federal funds provided under the Child Abuse Prevention and Treatment Act (CAPTA) to support this function. This is an allowable use of CAPTA funds. These CAPTA funds were previously used for one-time projects. Consequently, funding for ongoing programs and services would not be affected by this provision.

k. *Computerized Patient Records.* The request would delete \$42,600 GPR annually that was provided to DHFS in the 1997-99 biennial budget act to design a computerized patient records system for use by the Division of Care and Treatment Facilities. At that time, it was

k. Computerized Patient Records.

1. Billing Position Funding Changes and Unspecified Administrative Funding Reductions.

3. Deny all requested funding changes.

Elections
MO# Alt 2 + 3a

2 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
ROSENZWEIG	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 _____

DNR
MO# A-2d, B-2a+b

2 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
ROSENZWEIG	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 _____

anticipated that DHFS would use these funds to begin to design a system that would be consistent with the patient recordkeeping needs of other agencies, including the Department of Corrections and the Department of Veterans Affairs. Although DHFS has increased automation of its patient records systems, the Department of Administration decided not to develop a single system that would be used by these state agencies.

1. *Billing Position Funding Changes and Unspecified Administrative Funding Reductions.* The request would increase funding by \$307,000 (-\$379,500 GPR, \$45,100 FED and \$641,400 PR) in 2001-02 and \$311,800 (-\$360,700 GPR, \$31,100 FED and \$641,400 PR) in 2002-03 and delete 0.5 positions (-6.5 GPR positions and 6.0 PR positions), beginning in 2001-02, to reduce GPR state operations costs by: (a) funding 6.0 GPR positions that currently conduct billing activities in the Division of Management and Technology (DMT) with PR charged to DCTF, which is partially supported by federal MA matching funds; and (b) reducing funding for general DMT activities and deleting 0.5 GPR position, beginning in 2001-02. This item includes GPR and federal funding increases for MA benefits costs to support PR funding increases for DCTF to pay increased amounts charged by DMT.

Alternatives

1. Adopt the funding and position changes requested by DHFS, as shown in the table.
2. Modify Alternative 1 by deleting the requested funding changes related to any one or more of the following items:
 - a. Sand Ridge Secure Treatment Center and Wisconsin Resource Center Units.
 - b. Fund Certain Child Welfare Services as Targeted Case Management Services.
 - c. MA and BadgerCare County Incentive Payments.
 - d. MA and BadgerCare Recipient and Provider Hotlines.
 - e. MA and BadgerCare Consumer and Provider Meetings.
 - f. Actuarial Services.
 - g. Public Health Position Funding Change.
 - h. Supplemental Security Income (SSI) Administration.
 - i. Pathways to Independence.
 - j. Child Abuse and Neglect Prevention Technical Assistance.

Kevin
Shubiski

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

YES

NO

Kevin Shubiski
Signature

12/3/01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

X YES

_____ NO

Kim Plache
Signature

11-29-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

 ✓ YES

 NO

Robert W. Wurch
Signature

12-4-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

_____ NO

Albert Darling
Signature

12/3/01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

 X NO

Peggy Rosenzweig
Signature

Dec. 9, 2001
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

_____ X NO

John B. Gund
Signature

12-3-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

 X NO

Dean Kerper
Signature

11-30-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

_____ NO

She [Signature]
Signature

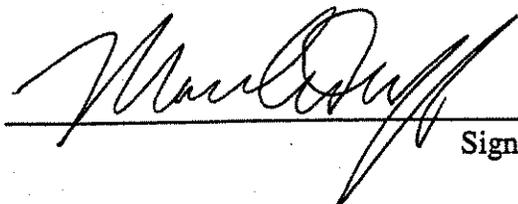
11/30/01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

 X NO


Signature

11/29/01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

YES

NO

Daniel A. W. [Signature]
Signature

11-29-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

_____ YES

_____ ✓ NO

Michael D. Sharp
Signature

12-4-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

 X YES

 NO

Greg Huber
Signature

12-04-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

 X YES

 NO

 Brian Burke

Signature

 12/5/01

Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

✓ YES

_____NO

Russ Decker
Signature

11-30-01
Date

BALLOT

Shall the November 5, 2001, action of the Joint Committee on Finance on Agenda Item VIII, directing DHFS to reallocate current funding and staff to perform activities to increase Wisconsin's compliance with Title IV-E regulations and prohibiting DHFS from contracting with a private vendor to perform these services, be upheld, notwithstanding the objection of the Governor?

YES

NO

Dwendolynne J. Moor
Signature

Dec 5 2001
Date



SIXTEENTH STREET COMMUNITY HEALTH CENTER

1337 S. 16TH STREET
MILWAUKEE, WISCONSIN 53204
(414) 672-1353

MEDICAL & DENTAL SERVICES • MENTAL HEALTH & SOCIAL SERVICES
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February 13, 2002

Statement Regarding Budget Cuts to Health Centers

Good Morning; My name is John Bartkowski and I am CEO at the Sixteenth Street Community Health Center.

I appreciate the opportunity to speak on the impact that Governor McCallum's budget will have on the Sixteenth Street Community Health Center and the other community, migrant and homeless health centers in Wisconsin.

As you know, the budget reform bill not only cuts \$3 million from the Health Center Grant program this year, it eliminates the entire program. This grant program has been used to provide primary health care and dental services to low income un-insured people in urban and rural areas all across the state.

For Sixteenth Street, this means a loss of more than \$400,000. Similar cuts will be felt by the other Milwaukee Health Centers – Milwaukee Health Services, Westside Healthcare and HealthCare for the Homeless.

For the Governor to say that his budget reform bill does not cut services to our most vulnerable residents is disingenuous at best.

More importantly, the "savings" that are envisioned by cutting these funds will not materialize. The cost to the state will undoubtedly increase. People without access to health care, will delay seeking treatment, will develop more serious illnesses and will ultimately turn to hospital emergency rooms.

For Sixteenth Street, the funds from the Health Center grant program support 4 medical provider positions in our peri-natal program.

We will be forced to make cuts in staff and there will be corresponding cuts in services.

This will translate into as many as 10,000 LOST patient visits. Women who rely on us for care will make their first pre-natal visit to a hospital emergency room when it is time to deliver.

There will be more complications with emergency births and more low birth weight babies. Longer hospital stays, less healthy moms and babies and future learning and developmental delays will be the result. The costs will be enormous.

(over)



**Mujer a
Mujer por
Dra. Silvia
Páginia 5**



**Award
Winning
Column
'Taking Sides'
Page 12**



**Bucks'
3 Time
All-Star
Guard
Page 10**

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Governor's Proposed Budget Cuts Threaten 16th Street Community Health Center

By Matt Nelson

Governor McCallum proposed eliminating the \$3 million State Community Health Center Grants Program. The grants go to the state's network of 14 community, migrant and homeless health centers, providing primary medical and dental care to more than 100,000 people in under-served rural and urban areas in Wisconsin. For the Sixteenth Street Community Health



From left to right: Sandra Esparza, Anthony Noguera Esparza (10 months), and Serina Aguirre, Medical Assistant. Photo by Harry Kemp

Center, the cuts would 2002. If the proposal would result in a loss equate to a loss of goes into effect the of 7,800 doctor visits. nearly \$500,000 center may have to In Milwaukee, the cuts starting July 1st of reduce staff which *Budget -see page 9*

Budget

Continued from front page
would also impact the Isaac Coggs Community Health Center and the MLK heritage Health Center.

these services will inevitably result in more emergency room deliveries and less healthy babies - which will have a far higher cost to our community in the long run."

In operation since 1969, the Sixteenth Street Community Health Center has provided high quality health care to residents of Milwaukee's near south side regardless of economic, language, or cultural barriers. Last year more than 15,000 clients came to Sixteenth Street for medical care, dental services, behavioral health counseling, social services and

health education. "It would be a big problem if Sixteenth Street lost funding. I don't know where I would go," said Alberto Cruz, father of a three-month-old. The cuts to Sixteenth Street come at a time when the Hispanic population in the city has dramatically grown, especially in the near south side, which is the health center's primary service delivery area. The cuts come from the Governor's Proposed Budget Deficit Adjustment initiative. This is one of many proposed cuts that seek to

reduce the state's \$1.1 billion deficit. In 2000 statewide community health centers cared for 14,410 patients needing interpretive, sign language, and bilingual services, 10,315 people over the age of 65, 6,938 homeless patients, 4,519 infants, and 14,915 people needing dental care. Sixteenth Street will be working with the 13 other community health centers in Wisconsin to restore state funding.

commitment to state funding for the Community Health Centers. Thirty-four percent of health center patients statewide are African-American and Hispanic/Latino. Sixty-nine percent of health center patients live below 200 percent of the poverty level. "If these funding cuts go through, the people who seek medical attention at community health centers are only going to turn to already over crowded emergency rooms. That's going to cost more in the long run. It is both morally and economically right to keep these health centers fully funded." Said Coggs. Representative Coggs, who sits on the Joint Finance Committee, which will review McCallum's proposed budget repair bill, said he would sponsor an amendment to save the program. Coggs identifies the large amount of state support for the Community Health Center. People who are interested in making a comment to the Governor regarding this issue or other pending state budget issues surrounding the should call 414/227-4344.

"There is no way we can absorb a cut of this magnitude without reducing staff and the services they provide," said Dr. John Barkowski, Sixteenth Street's Chief Executive Officer. "Last year, our providers delivered 610 babies. The health center grant helped us provide pre-natal care and support services for these women and their families. Cuts in

social services and

cuts that seek to

pledged his

keep these health

centers fully funded."