Received By: dkennedy

Received: 02/11/2004

2003 DRAFTING REQUEST

Bill

Wanted: As time permits				Identical to LRB:			
For: Dale	Schultz (608	3) 266-0703			By/Representing:	Eileen O'Nei	II
This file r	nay be shown	to any legislator	r: NO		Drafter: dkenned	\mathbf{y}	,
May Cont	act: Rachel (Carabell			Addl. Drafters:		
Subject:	Health -	medical assista	ance		Extra Copies:		
Submit vi	a email: YES			× .			
Requester	's email:	Sen.Schultz	@legis.state	e.wi.us			
Carbon co	py (CC:) to:						
Pre Topic	C:						
No specifi	c pre topic giv	ven	·				
Topic:							
Medical A	Assistance hos	pital payment or	reimbursen	nent on "eco	nomically and effic	ciently operate	d" basis
Instruction	ons:						
See Attacl	ned						
Drafting	History:						
Vers.	<u>Drafted</u>	Reviewed	Typed	Proofed	Submitted	Jacketed	Required
/?	dkennedy 02/11/2004	jdyer 02/12/2004					S&L
/1			rschluet 02/12/2004		lnorthro 02/12/2004		S&L
/2	dkennedy	kfollett	jfrantze		mbarman	mbarman	S&L

03/04/2004 08:00:17 AM Page 2

Vers.	<u>Drafted</u>	Reviewed	<u>Typed</u>	Proofed	Submitted	<u>Jacketed</u>	Required	
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/3	dkennedy 03/03/2004	kfollett 03/03/2004	jfrantze 03/04/200	14	sbasford 03/04/2004	sbasford 03/04/2004		
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2003 DRAFTING REQUEST

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Received: 02/11/2004					Received By: dkennedy		
Wanted:	As time perm	its			Identical to LR	B:	
For: Dale	Schultz (608	3) 266-0703			By/Representir	ng: Eileen O'Ne	ill
This file	may be shown	to any legislate	or: NO		Drafter: dkenn	edy	
May Con	tact: Rachel	Carabell			Addl. Drafters:		
Subject:	Health	- medical assis	tance		Extra Copies:		
Submit v	ia email: YES	·					
Requeste	r's émail:	Sen.Schult	z@legis.sta	te.wi.us			
Carbon c	opy (CC:) to:						
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Topic:		P. H.					
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2003 DRAFTING REQUEST

Bill

Received: 02/11/2004					Received By: dkennedy			
Wanted:	As time perm	its			Identical to LRB:			
For: Dal	le Schultz (608	3) 266-0703			By/Representing	: Eileen O'Ne	ill	
This file	may be shown	to any legislate	or: NO		Drafter: dkenne	dy	·	
May Co	ntact: Rachel	Carabell			Addl. Drafters:			
Subject: Health - medical assistance				Extra Copies:				
Submit	via email: YES							
Request	er's email:	Sen.Schult	z@legis.sta	te.wi.us				
Carbon	copy (CC:) to:							
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Medical	Assistance hos	pital payment o	or reimburse	ment on "eco	onomically and eff	iciently operate	ed" basis	
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FE Sent For:

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Received By: dkennedy

Received: 02/11/2004

2003 DRAFTING REQUEST

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Wanted: As time permits				Identical to LRB:			
For: Da	le Schultz (608	3) 266-0703			By/Representing	g: Eileen O'Ne	ill
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May Co	ntact: Rachel	Carabell			Addl. Drafters:		
Subject: Health - medical assistance				Extra Copies:			
Submit	via email: YES	•					
Request	er's email:	Sen.Schult	tz@legis.stat	te.wi.us			
Carbon	copy (CC:) to:						
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Medical	Assistance hos	pital payment	or reimburse	ment on "eco	nomically and eff	iciently operate	ed" basis
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02/12/2004 09:08:05 AM Page 2

FE Sent For:

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2003 DRAFTING REQUEST

Bill

Received: 02/11/2004

Received By: dkennedy

Wanted: As time permits

Identical to LRB:

For: Dale Schultz (608) 266-0703

By/Representing: Eileen O'Neill

This file may be shown to any legislator: NO

Drafter: dkennedy

May Contact: Rachel Carabell

Doobal Caraball

Addl. Drafters:

Subject:

Health - medical assistance

Extra Copies:

Submit via email: YES

Requester's email:

Sen.Schultz@legis.state.wi.us

Carbon copy (CC:) to:

Pre Topic:

No specific pre topic given

Topic:

Medical Assistance hospital payment or reimbursement on "economically and efficiently operated" basis

Instructions:

See Attached

Drafting History:

Vers.

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dkennedy

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Reimbursing economically and efficiently operated hospitals

The following statute amendments would require DHFS to reimburse hospitals for services provided to Medical Assistance recipients at a rate that is reasonable and adequate to meet the costs that must be incurred by an efficiently and economically operated hospital complying with all state and federal laws.

Section 49.45(3)(e)1. is amended to read:

The department may shall develop, implement, and periodically update methods for reimbursing hospitals for allowable services or commodities provided a recipient. The methods may shall include standards and criteria for limiting any given hospital's total reimbursement or payment to that which would be provided to an economically and efficiently operated facility provide a reimbursement rate for each hospital that is reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with applicable state and federal laws, regulations, and quality and safety standards. This method does not apply to hospitals reimbursed based on costs. Hospitals may, in addition to the implemented reimbursement rate, receive supplemental payments as provided by state or federal law.

what does?

Section 49.45(3)(e)4. is amended to read:

, determined in de

If the department maintains a retrospective reimbursement system under subd.1 for specific provided services or commodities, total reimbursement for allowable services, care or commodities provided recipients during the hospital's fiscal year may not exceed the lower of the hospital's charges for the services or the actual and reasonable allowable costs to the hospital of providing the services, plus any disproportionate share funding the hospital is qualified to receive under 42 USC 1396r-4.

How the state of t

2/5/03 From Laura Leiteh: Section 49.45 (3)(e) does not specify rembusement to hospitals based on cot (e.g., critical access, psych supt, meral providers) - is done by X-ref.

THURSDAY

2003 - 2004 LEGISLATURE

4251/1 LRB-4167/1 DAK: kif-pg

2003 BILL



AN ACT to amend 49.45 (2) (b) 2., 49.45 (3) (e) 1. and 49.45 (3) (e) 4. of the statutes;

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relating to: hospital payment or reimbursement and contracts for services

under Medical Assistance and making an appropriation.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health and Family Services (DHFS) is authorized to develop, implement, and periodically update methods for reimbursing or paying hospitals for allowable services or commodities that are provided to Medical Assistance (MA) recipients. The methods may include standards and criteria that limit reimbursement or payment to that which would be provided to an economically and efficiently operated facility. If DHFS reimburses hospitals retrospectively under these methods, total reimbursement for allowable services, care, or commodities may not exceed the lower of the hospital's charges or the actual and reasonable allowable costs to the hospital of providing the services, plus any federal disproportionate share funding that the hospital is qualified to receive.

This bill requires, rather than authorizes, DHFS to develop, implement, and update the methods for reimbursing or paying hospitals for MA services or commodities. The bill changes the methods standard that is related to an economically and efficiently operated facility to one under which the reimbursement or payment rate for each hospital must be reasonable and adequate to meet costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with state and federal law. The bill also specifies that hospitals may receive federally or state authorized supplemental

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payments in addition to the reimbursement or payment under the methods. The methods do not apply to hospitals that are reimbursed based on costs. If DHFS reimburses hospitals retrospectively under the methods, total reimbursement may not exceed the hospital's charges for the services, plus any federal disproportionate share funding.

Currently, DHFS may contract with any organization to administer MA benefits, including prepaid health care. This bill requires that any contract that includes provision of prepaid health care benefits require that prepaid payments be made on an actuarially sound basis that is consistent with federal law.

This bill increases the general purpose revenues appropriation account within DHFS for the state share of MA benefits by \$205,000,000 for fiscal year 2004–05 and specifies that this money may not be expended to expand MA eligibility or program benefits.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

Section 1: 49.45 (2) (b) 2. On tract with any organization whether or not organized for profit to administer, in full or in part, the benefits under the medical assistance program Medical Assistance including prepaid health care. Any contract that includes provision of prepaid health care benefits shall require that prepaid payments to the organization be made on an actuarially sound basis that is consistent with 42 USC 1396b (m) (2) (A) (iii). The department shall accept bids on contracts for administrative services and services evaluating the medical assistance program Medical Assistance as provided in ch. 16, but may accept the contract deemed most advantageous for claims processing services; or contract with any insurer authorized under the insurance code of this state to insure the program in full or in part and on behalf of the department. The department shall submit a report each December 31 to the governor, the joint committee on finance and the chief clerk of each house of the legislature, for distribution to the appropriate standing

1 committees under s. 13.172 (3), regarding the effectiveness of the management
2 information system for monitoring and analyzing medical assistance expenditures.

SECTION 2. 49.45 (3) (e) 1. of the statutes is amended to read:

49.45 (3) (e) 1. The department may shall develop, implement and periodically update methods for reimbursing or paying hospitals for allowable services or commodities provided a recipient. The methods may include standards and criteria for limiting any given hospital's total reimbursement or payment to that which would be provided to an economically and efficiently operated facility shall provide a reimbursement or payment rate for each hospital that is reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with applicable state statutes and rules and federal statutes and regulations, and quality and safety standards, except that these methods do not apply to hospitals, including critical access hospitals, that are reimbursed based on costs. In addition to the reimbursement rate specified under this subdivision, hospitals may receive supplemental payments as provided by state statutes or rules or federal statutes or regulations.

SECTION 3. 49.45 (3) (e) 4. of the statutes is amended to read:

49.45 (3) (e) 4. If the department maintains a retrospective reimbursement system under subd. 1. for specific provided services or commodities, total reimbursement determined under subd. 1. for allowable services, care, or commodities provided recipients during the hospital's fiscal year may not exceed the lower of the hospital's charges for the services or the actual and reasonable allowable costs to the hospital of providing the services, plus any disproportionate share funding that the hospital is qualified to receive under 42 USC 1396r-4.

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SECTION	4. 1	Nonstatutory	provisions
_			L- 0 1-0-0 TO

(1) Medical Assistance increase. The amount by which the appropriation account under section 20.435 (4) (b) of the statutes is increased for state fiscal year 2004–05 under Section 5 (1) of this act may not be expended to expand eligibility or program benefits of Medical Assistance, as defined in section 49.43 (8) of the statutes.

SECTION 5. Appropriation changes.

(1) Medical Assistance increase. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of health and family services under section 20.435 (4) (b) of the statutes, as affected by the acts of 2003, the dollar amount is increased by \$205,000,000 for fiscal year 2004–05 to provide the state share of Medical Assistance benefits administered under section 49.45 of the statutes.

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TELEPHONE DRAFTING INSTRUCTIONS

Drafting instructions received by Debora Kennedy.

DATE:

3/2/04

CONVERSATION WITH:

. Down Eileen

OF:

Sen Schultzis Mici

TELEPHONE NO:

REGARDING LRB #
OR DRAFT TOPIC:

03-4251/1

INSTRUCTIONS:

Redraft

Add same language for purposes of reministery hours



1

State of Misconsin 2003 - 2004 LEGISLATURE

D-NOTE)

LRB-4251/**≰** ⊋ DAK:kjf&jld:**≤**

2003 BILL

and nursing home

AN ACT to amend 49.45 (3) (e) 1. and 49.45 (3) (e) 4. of the statutes; relating to:

hospital/payment or reimbursement under Medical Assistance.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health and Family Services (DHFS) is authorized to develop, implement, and periodically update methods for reimbursing or paying hospitals for allowable services or commodities that are provided to Medical Assistance (MA) recipients. The methods may include standards and criteria that limit reimbursement or payment to that which would be provided to an economically and efficiently operated facility. If DHFS reimburses hospitals retrospectively under these methods, total reimbursement for allowable services, care, or commodities may not exceed the lower of the hospital's charges or the actual and reasonable allowable costs to the hospital of providing the services, plus any federal disproportionate share funding that the hospital is qualified to receive.

This bill requires, rather than authorizes, DHFS to develop, implement, and update the methods for reimbursing or paying hospitals for MA services or commodities. The bill changes the methods standard that is related to an economically and efficiently operated facility to one under which the reimbursement or payment rate for each hospital must be reasonable and adequate to meet costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with state and federal law. The bill also specifies that hospitals may receive federally or state authorized supplemental payments in addition to the reimbursement or payment under the methods. The methods do not apply to hospitals that are reimbursed based on costs. If DHFS

reimburses hospitals retrospectively under the methods, total reimbursement may not exceed the hospital's charges for the services, plus any federal disproportionate share funding.

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For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 49.45 (3) (e) 1. of the statutes is amended to read:

49.45 (3) (e) 1. The department may shall develop, implement and periodically update methods for reimbursing or paying hospitals for allowable services or commodities provided a recipient. The methods may include standards and criteria for limiting any given hospital's total reimbursement or payment to that which would be provided to an economically and efficiently operated facility shall provide a reimbursement or payment rate for each hospital that is reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with applicable state statutes and rules and federal statutes and regulations, and quality and safety standards, except that these methods do not apply to hospitals, including critical access hospitals, that are reimbursed based on costs. In addition to the reimbursement rate specified under this subdivision, hospitals may receive supplemental payments as provided by state statutes or rules or federal statutes or regulations.

SECTION 2. 49.45 (3) (e) 4. of the statutes is amended to read:

49.45 (3) (e) 4. If the department maintains a retrospective reimbursement system under subd. 1. for specific provided services or commodities, total reimbursement determined under subd. 1. for allowable services, care, or

commodities provided recipients during the hospital's fiscal year may not exceed the
lower of the hospital's charges for the services or the actual and reasonable allowable
costs to the hospital of providing the services, plus any disproportionate share
funding that the hospital is qualified to receive under 42 USC 1396r-4.

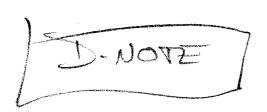
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2003-2004 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

$\prec_{\text{INSERT ANAL}}$

Currently, DHFS pays nursing homes for services or commodities provided to MA recipients under an annually updated prospective payment system. The system must implement standards that are necessary and proper for providing patient care and that meet certain quality and safety standards. Further, the system must reflect, among other things, standards established by DHFS that are based upon allowable costs incurred by nursing homes, as available from information compiled by DHFS concerning the overall financial operations of the nursing homes.

This bill requires that the prospective payment system, under which DHFS makes MA payments to nursing homes, implement standards that, instead of being necessary and proper for providing patient care, are reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care in conformity with applicable state statutes and rules, federal statutes and regulations and quality and safety standards. The bill also requires that the system reflect standards established by DHFS for costs of economically and efficiently operated nursing homes, based on the information DHFS compiles concerning the nursing homes' overall financial operations. Lastly, the bill specifies that nursing homes may receive payments that are supplemental to the prospective payment system, as provided by state statutes or rules or federal statutes or regulations.

INSERT 3-4

SECTION 49.45 (6m) (ag) (intro.) of the statutes, as affected by 2003 Wisconsin Act 33, is amended to read:

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49.45 (6m) (ag) (intro.) Payment for care provided in a facility under this subsection made under s. 20.435 (4) (b), (gp), (pa), (o), (w), or (wm) shall, except as provided in pars. (bg), (bm), and (br), be determined according to a prospective payment system updated annually by the department. The payment system shall implement standards that are necessary and proper for providing patient care and that meet reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care in conformity with this subsection, with applicable state statutes and rules, and with federal statutes and regulations, and with quality and safety standards established under subch. II of ch. 50 and ch. 150. In addition to the prospective payment system

specified under this subsection, facilities may receive supplemental payments as 1 2 provided by state statutes or rules or federal statutes or regulations. The payment 3 system shall reflect all of the following: History: 1971 c. 40 s. 93; 1971 c. 42, 125; 1971 c. 213 s. 5; 1971 c. 215, 217, 307; 1973 c. 62, 90, 147; 1973 c. 333 ss. 106g, 106h, 106j, 201w; 1975 c. 39; 1975 c. 223 s. 28; 1975 c. 224 ss. 54h, 56 to 59m; 1975 c. 383 s. 4; 1975 c. 411; 1977 c. 29, 418; 1979 c. 34 ss. 837f to 838, 2102 (20) (a); 1979 c. 102, 177, 221, 355; 1981 c. 20 ss. 839 to 854, 2202 (20) (r); 1981 c. 93, 317; 1983 a. 27 ss. 1046 to 1062m, 2200 (42); 1983 a. 245, 447, 527; 1985 a. 29 ss. 1026m to 1031d, 3200 (23), (56), 3202 (27); 1985 a. 120, 176, 269; 1985 a. 332 ss. 91, 251 (5), 253; 1985 a. 340; 1987 a. 27 ss. 989r to 1000s, 2247, 3202 (24); 1987 a. 186, 307, 339, 399; 1987 a. 403 s. 256; 1987 a. 413; 1989 a. 6; 1989 a. 31 ss. 1402 to 1452g, 2909g, 2909i; 1989 a. 107, 173, 310, 336, 351, 359; 1991 a. 22, 39, 80, 250, 269, 315, 316; 1993 a. 16 ss. 1362g to 1403, 3883; 1993 a. 27, 107, 112, 183, 212, 246, 269, 335, 356, 437, 446, 469; 1995 a. 20; 1995 a. 27 ss. 2947 to 3002r, 7299, 9126 (19), 9130 (4), 9145 (1); 1995 a. 191, 216, 225, 289, 303, 398, 417, 457; 1997 a. 3, 13, 27, 114, 175, 191, 237, 254, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109; 2003 a. 33.

SECTION 249.46.66m) (ag) 2. of the statutes is amended to read: 49.45 (6m) (ag) 2. Standards established by the department for costs of 5 6 economically and efficiently operated facilities that shall be based upon allowable 7 costs incurred by facilities in the state as available from information submitted 8 under par. (c) 3. and compiled by the department. NOTE: NOTE: Subd. 2. is shown as amended eff. 7-1-04 by 2003 Wis. Act 33. Prior to 7-1-04 it reads: NOTE: 2. Standards established by the department that shall be based upon allowable costs incurred by facilities in the state as available from information submitted 2. Standards established by the department. History: 1971 c. 40 s. 93; 1971 c. 42, 125; 1971 c. 213 s. 5; 1971 c. 215, 217, 307; 1973 c. 62, 90, 147; 1973 c. 333 ss. 106g, 106h, 106j, 201w; 1975 c. 39; 1975 c. 223 s. 28; 1975 c. 224 ss. 54h, 56 to 59m; 1975 c. 383 s. 4; 1975 c. 417; 1977 c. 29, 418; 1979 c. 34 ss. 837f to 838, 2102 (20) (a); 1979 c. 102, 177, 221, 355; 1981 c. 20 ss. 839 to 854, 2202 (20) (r); 1981 c. 93, 317; 1983 a. 27 ss. 1046 to 1062m, 2000 (42); 1983 a. 245, 447, 527; 1985 a. 29 ss. 1026m to 1031d, 3200 (23), (56), 3202 (27); 1985 a. 120, 176, 269; 1985 a. 332 ss. 91, 251 (5), 253; 1985 a. 340; 1987 a. 27 ss. 989r to 1000s, 2247, 3202 (24); 1987 a. 186, 307, 339, 399; 1987 a. 403 s. 256; 1987 a. 413; 1989 a. 6; 1989 a. 31 ss. 1402 to 1452g, 2909g, 2909i; 1989 a. 107, 173, 310, 336, 351, 359; 1991 a. 22, 39, 80, 250, 269, 315, 316; 1993 a. 16 ss. 1362g to 1403, 3883; 1993 a. 27, 107, 112, 113, 212, 246, 269, 335, 356, 437, 446, 469; 1995 a. 20; 1995 a. 27 ss. 2947 to 3002r, 7299, 9126 (19), 9130 (4), 9145 (1); 1995 a. 191, 216, 225, 289, 303, 398, 417, 457; 1997 a. 3, 13, 27, 114, 175, 191, 237, 232, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109; 2003 a. 33.

SECTION 3 49.45 (6m) (ag) 2. of the statutes, as affected by 2003 Wisconsin Acts 11

33 and (this act), is repealed and recreated to read:
49.45 (6m) (ag) 2. Except as provided in subd. 3r., standards established by the
department for costs of economically and efficiently operated facilities that shall be
based upon allowable costs incurred by facilities in the state as available from

information submitted under par. (c) 3. and compiled by the department.

2003

Nonstat File Sequence: \mathbf{F}

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[rev: 9/17/02 2003effdate(fm)]

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DAK

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-4251/2dn DAK:kjf:jf

March 3, 2004

To Senator Schultz:

The biennial budget act (2003 Wisconsin Act 33) modified s. 49.45 (6m) (ag) 2., stats., effective July 1, 2004, to provide flat—rate payment for nursing home costs specified under s. 49.45 (6m) (ag) 3r., stats. I have amended s. 49.45 (6m) (ag) 2., stats., to include the "economically and efficiently operated facilities language," as was done in the 1995 statutes, but, in line with the changes under 2003 Wisconsin Act 33, this standard would not specifically apply to nursing home costs paid at a flat rate under s. 49.45 (6m) (ag) 3r., stats. Is this drafted as you intend?

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

E-mail: debora.kennedy@legis.state.wi.us

Basford, Sarah

From:

ONeill, Eileen

Sent:

Wednesday, March 03, 2004 1:46 PM

To:

LRB.Legal

Subject:

Draft review: LRB 03-4251/1 Topic: Medical Assistance hospital payment or reimbursement

on "economically and efficiently operated" basis

It has been requested by <ONeill, Eileen> that the following draft be jacketed for the SENATE:

Draft review: LRB 03-4251/1 Topic: Medical Assistance hospital payment or reimbursement on "economically and efficiently operated" basis

TELEPHONE DRAFTING INSTRUCTIONS

Drafting instructions received by Debora Kennedy.

DATE:

3304.

CONVERSATION WITH:

Eileen

OF:

Sen Schultz 'Office

TELEPHONE NO:

REGARDING LRB# OR DRAFT TOPIC

INSTRUCTIONS:

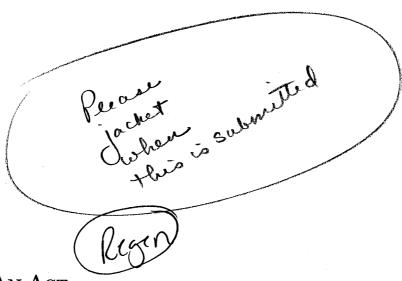
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2003 BILL



AN ACT to amend 49.45 (3) (e) 1., 49.45 (3) (e) 4., 49.45 (6m) (ag) (intro.) and 49.45

(6m) (ag) 2.; and to repeal and recreate 49.45 (6m) (ag) 2. of the statutes;

relating to: hospital payment or reimbursement under

Medical Assistance.

Analysis by the Legislative Reference Bureau

Under current law, the Department of Health and Family Services (DHFS) is authorized to develop, implement, and periodically update methods for reimbursing or paying hospitals for allowable services or commodities that are provided to Medical Assistance (MA) recipients. The methods may include standards and criteria that limit reimbursement or payment to that which would be provided to an economically and efficiently operated facility. If DHFS reimburses hospitals retrospectively under these methods, total reimbursement for allowable services, care, or commodities may not exceed the lower of the hospital's charges or the actual and reasonable allowable costs to the hospital of providing the services, plus any federal disproportionate share funding that the hospital is qualified to receive.

This bill requires, rather than authorizes, DHFS to develop, implement, and update the methods for reimbursing or paying hospitals for MA services or commodities. The bill changes the methods standard that is related to an economically and efficiently operated facility to one under which the reimbursement or payment rate for each hospital must be reasonable and adequate to meet costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with state and federal law. The bill also

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specifies that hospitals may receive federally or state authorized supplemental payments in addition to the reimbursement or payment under the methods. The methods do not apply to hospitals that are reimbursed based on costs. If DHFS reimburses hospitals retrospectively under the methods, total reimbursement may not exceed the hospital's charges for the services, plus any federal disproportionate share funding.

Currently, DHFS pays nursing homes for services or commodities provided to MA recipients under an annually updated prospective payment system. The system must implement standards that are necessary and proper for providing patient care and that meet certain quality and safety standards. Further, the system must reflect, among other things, standards established by DHFS that are based upon allowable costs incurred by nursing homes, as available from information compiled by DHFS concerning the overall financial operations of the nursing homes.

This bill requires that the prospective payment system, under which DHFS makes MA payments to nursing homes, implement standards that, instead of being necessary and proper for providing patient care, are reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care in conformity with applicable state statutes and rules, federal statutes and regulations, and quality and safety standards. The bill also requires that the system reflect standards established by DHFS for costs of economically and efficiently operated nursing homes, based on the information DHFS compiles concerning the nursing homes' overall financial operations. Lastly, the bill specifies that nursing homes may receive payments that are supplemental to the prospective payment system, as provided by state statutes or rules or federal statutes or regulations.

For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 49.45 (3) (e) 1. of the statutes is amended to read:

49.45 (3) (e) 1. The department may shall develop, implement and periodically update methods for reimbursing or paying hospitals for allowable services or commodities provided a recipient. The methods may include standards and criteria for limiting any given hospital's total reimbursement or payment to that which would be provided to an economically and efficiently operated facility shall provide a reimbursement or payment rate for each hospital that is reasonable and adequate

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to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care and services in conformity with applicable state statutes and rules and federal statutes and regulations, and quality and safety standards, except that these methods do not apply to hospitals, including critical access hospitals, that are reimbursed based on costs. In addition to the reimbursement rate specified under this subdivision, hospitals may receive supplemental payments as provided by state statutes or rules or federal statutes or regulations.

Section 2. 49.45 (3) (e) 4. of the statutes is amended to read:

49.45 (3) (e) 4. If the department maintains a retrospective reimbursement system under subd. 1. for specific provided services or commodities, total reimbursement determined under subd. 1. for allowable services, care, or commodities provided recipients during the hospital's fiscal year may not exceed the lower of the hospital's charges for the services or the actual and reasonable allowable costs to the hospital of providing the services, plus any disproportionate share funding that the hospital is qualified to receive under 42 USC 1396r-4.

SECTION 3. 49.45 (6m) (ag) (intro.) of the statutes, as affected by 2003 Wisconsin Act 33, is amended to read:

49.45 (6m) (ag) (intro.) Payment for care provided in a facility under this subsection made under s. 20.435 (4) (b), (gp), (pa), (o), (w), or (wm) shall, except as provided in pars. (bg), (bm), and (br), be determined according to a prospective payment system updated annually by the department. The payment system shall implement standards that are necessary and proper for providing patient care and that meet reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated facilities in order to provide care in conformity

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with this subsection, with applicable state statutes and rules, and with federal
statutes and regulations, and with quality and safety standards established under
subch. II of ch. 50 and ch. 150. In addition to the prospective payment system
specified under this subsection, facilities may receive supplemental payments as
provided by state statutes or rules or federal statutes or regulations. The payment
system shall reflect all of the following:
SECTION 4. 49.45 (6m) (ag) 2. of the statutes is amended to read:
49.45 (6m) (ag) 2. Standards established by the department for costs of
economically and efficiently operated facilities that shall be based upon allowable
costs incurred by facilities in the state as available from information submitted
under par. (c) 3. and compiled by the department.
SECTION 5. 49.45 (6m) (ag) 2. of the statutes, as affected by 2003 Wisconsin Acts
33 and (this act), is repealed and recreated to read:
49.45 (6m) (ag) 2. Except as provided in subd. 3r., standards established by the
department for costs of economically and efficiently operated facilities that shall be
based upon allowable costs incurred by facilities in the state as available from

 SECTION 6. Effective dates. This act takes effect on the day after publication, except as follows:

(1) NURSING HOME PAYMENT STANDARD. The repeal and recreation of section 49.45 (6m) (ag) 2. of the statutes takes effect on July 1, 2004.

information submitted under par. (c) 3. and compiled by the department.