

2003 DRAFTING REQUEST

Bill

Received: **01/26/2003**

Received By: **dkennedy**

Wanted: **As time permits**

Identical to LRB:

For: **Administration-Budget 7-7980**

By/Representing: **Blaine**

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

Drafter: **dkennedy**

May Contact:

Addl. Drafters:

Subject: **Health - medical assistance**
Health - miscellaneous

Extra Copies: **RLR, PJK**

Submit via email: **YES**

Requester's email:

Carbon copy (CC:) to:

Pre Topic:

DOA:.....Blaine - BB0427,

Topic:

Redirect hospital assessment to MA; eliminate Wisconcare and grad med education to MA providers

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?				_____			S&L
/1	dkennedy 01/26/2003	jdyer 01/27/2003	rschluet 01/28/2003	_____	sbasford 01/28/2003		S&L
/2	dkennedy 02/06/2003	kfollett 02/06/2003	chaskett 02/06/2003	_____	mbarman 02/07/2003		S&L

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/3	dkennedy 02/13/2003	jdye 02/14/2003	rschluet 02/14/2003	_____	mbarman 02/14/2003		

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<END>

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13 2/4 jld
[Signature]
2-14-3

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/?				<i>cph/s, f</i> 2/6			S&L
/1	dkennedy 01/26/2003	jdyer 01/27/2003	rschluet 01/28/2003	_____	sbasford 01/28/2003		

1/2 2/6 jld
1/2 2/6
cph

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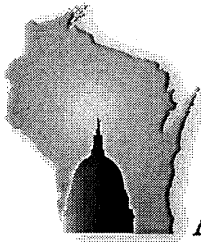
Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	dkennedy	1/27 jld	9	9 p6 1-26-3			

FE Sent For:

<END>

PJK ?



**WISCONSIN DEPARTMENT OF
ADMINISTRATION**

JIM DOYLE
GOVERNOR

MARC MAROTTA
SECRETARY

Division of Executive Budget and Finance
Post Office Box 7864
Madison, WI 53707-7864
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Date: January 24, 2003

To: Steve Miller, Chief
Legislative Reference Bureau

From: Robert Blaine, Executive Policy and Budget Analyst
Health and Public Safety Team, State Budget Office

Subject: Statutory Language Requests – Department of Health and Family Services

Attached is one statutory language requests for the 2003-05 biennial budget:

- Redirect hospital assessment to Medical Assistance benefits

Please contact either myself (267-7980) if you have any questions.

BB0427

Agency: Department of Health and Family Services

SBO Analyst: Robert Blaine (7-7980)

Title: Redirect hospital assessment to Medical Assistance benefits

Purpose of Draft: The department collects an assessment on hospitals per s. 146.99, the funds of which are budgeted under s. 20.435 (4)(gp). The use of the funds is detailed under s. 146.93. The funds are used in part for the WisconCare program which provides limited medical benefits to eligible individuals. The rest of the funds are used for medical education supplements.

This draft will redirect assessment revenue to the Medical Assistance program for program benefits, effective July 1, 2003. Statutory sections under s. 146.93 should be deleted. Appropriate language under s. 20.435 (4)(gp) should be altered to indicate the assessment revenue should be used for purposes of the MA program per s. 49.45.

Priority: High.

From Robert Blaine 1/26:

Eliminate Wisconcare under 146.93

Eliminate graduate medical education
payments



State of Wisconsin
2003 - 2004 LEGISLATURE

LRB-1760/1

DAK:.....

D-NOTE

jld

DOA:.....Blaine - BB0427, Redirect hospital assessment to MA; eliminate Wisconcare and grad med education to MA providers

FOR 2003-05 BUDGET - NOT READY FOR INTRODUCTION

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1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau
HEALTH AND HUMAN SERVICES
MEDICAL ASSISTANCE

Under current law, DHFS annually assesses hospitals \$1,500,000, in proportion to each hospital's gross private-pay patient revenues during the hospital's most recently concluded fiscal year. Fifty percent of moneys from the assessments is used to maintain a program, commonly known as "Wisconcare" to provide primary health care services to unemployed persons or persons employed less than 25 hours per week who have no health care coverage, are unable to obtain health care coverage, and have a family income that does not exceed 150% of the federal poverty line. The remaining 50% of assessment moneys is used to fund graduate medical education for the training of Medical Assistance (MA) program providers.

This bill eliminates the Wisconcare program and eliminates the funding of graduate medical education for the training of MA providers.

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:

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1 SECTION 1. 20.435 (4) (gp) of the statutes is amended to read:

2 20.435 (4) (gp) ~~Health care and graduate medical education; aid~~ Medical
3 assistance; hospital assessments. All moneys received under s. 146.99, 50% to be
4 used in each fiscal year for purchase of primary health care services under s. 146.93
5 and 50% to be used in each fiscal year for graduate medical education payments for
6 training of providers under the medical assistance program under ss. 49.45 to 49.49 ^(a)
7 provide the state share of medical assistance program benefits administered under ^{strike}
8 s. 49.45, to provide medical assistance program benefits administered under s. 49.45
9 that are not also provided under par. (o), to fund the pilot project under s. 46.27 (9)
10 and (10), to provide the facility payments under 1999 Wisconsin Act 9, section 9123
11 (9m), to fund services provided by resource centers under s. 46.283, and for services
12 under the family care benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the
13 department may transfer from this appropriation to the appropriation under sub. (7)
14 (kb) funds in the amount of and for the purposes specified in s. 46.485.
15 Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or
16 deposit into this appropriation and may transfer between fiscal years funds that it
17 transfers from the appropriation under sub. (7) (kb) for the purposes specified in s.
18 46.485 (3r). Notwithstanding s. 20.002 (1), the department may transfer from this
19 appropriation to the appropriation account under sub. (7) (bd) funds in the amount
20 and for the purposes specified in s. 49.45 (6v) plain

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 105.

***NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

21 SECTION 2. 46.27 (9) (a) of the statutes is amended to read:

1 46.27 (9) (a) The department may select up to 5 counties that volunteer to
2 participate in a pilot project under which they will receive certain funds allocated for
3 long-term care. The department shall allocate a level of funds to these counties
4 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), ~~(gp)~~[✓], or (w)
5 to nursing homes for providing care because of increased utilization of nursing home
6 services, as estimated by the department. In estimating these levels, the department
7 shall exclude any increased utilization of services provided by state centers for the
8 developmentally disabled. The department shall calculate these amounts on a
9 calendar year basis under sub. (10).

History: 1981 c. 20; 1983 a. 27; 1983 a. 189 s. 329 (5); 1983 a. 192, 239; 1985 a. 29 ss. 876s to 896am, 3200 (56); 1985 a. 120, 176; 1987 a. 27, 399; 1989 a. 31, 77, 336, 359; 1991 a. 32, 39, 235, 274; 1993 a. 16, 27, 437; 1995 a. 27; 1997 a. 13, 27, 39, 79, 237; 1999 a. 9, 63; 2001 a. 16, 103.

10 **SECTION 3.** 46.27 (10) (a) 1. of the statutes is amended to read:

11 46.27 (10) (a) 1. The department shall determine for each county participating
12 in the pilot project under sub. (9) a funding level of state medical assistance
13 expenditures to be received by the county. This level shall equal the amount that the
14 department determines would otherwise be paid under s. 20.435 (4) (b), ~~(gp)~~[✓], or (w)
15 because of increased utilization of nursing home services, as estimated by the
16 department.

History: 1981 c. 20; 1983 a. 27; 1983 a. 189 s. 329 (5); 1983 a. 192, 239; 1985 a. 29 ss. 876s to 896am, 3200 (56); 1985 a. 120, 176; 1987 a. 27, 399; 1989 a. 31, 77, 336, 359; 1991 a. 32, 39, 235, 274; 1993 a. 16, 27, 437; 1995 a. 27; 1997 a. 13, 27, 39, 79, 237; 1999 a. 9, 63; 2001 a. 16, 103.

17 **SECTION 4.** 46.275 (5) (a) of the statutes is amended to read:

18 46.275 (5) (a) Medical assistance reimbursement for services a county, or the
19 department under sub. (3r), provides under this program is available from the
20 ~~appropriations~~ appropriation accounts[✓] under s. 20.435 (4) (b), ~~(gp)~~[✓], (o), and (w). If
21 2 or more counties jointly contract to provide services under this program and the

1 department approves the contract, medical assistance reimbursement is also
2 available for services provided jointly by these counties.

History: 1983 a. 27; 1985 a. 29 ss. 896b to 896L, 3202 (23); 1985 a. 120, 176; 1987 a. 27; 1987 a. 161 s. 13m; 1987 a. 186; 1989 a. 31; 1993 a. 16; 1995 a. 27, 77; 1997 a. 27, 114; 1999 a. 9; 2001 a. 16.

3 **SECTION 5.** 46.275 (5) (c) of the statutes is amended to read:

4 46.275 (5) (c) The total allocation under s. 20.435 (4) (b), (gp), (o), and (w) to
5 counties and to the department under sub. (3r) for services provided under this
6 section may not exceed the amount approved by the federal department of health and
7 human services. A county may use funds received under this section only to provide
8 services to persons who meet the requirements under sub. (4) and may not use
9 unexpended funds received under this section to serve other developmentally
10 disabled persons residing in the county.

History: 1983 a. 27; 1985 a. 29 ss. 896b to 896L, 3202 (23); 1985 a. 120, 176; 1987 a. 27; 1987 a. 161 s. 13m; 1987 a. 186; 1989 a. 31; 1993 a. 16; 1995 a. 27, 77; 1997 a. 27, 114; 1999 a. 9; 2001 a. 16.

11 **SECTION 6.** 46.283 (5) of the statutes is amended to read:

12 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
13 (bm), (gp), (pa), and (w) and (7) (b), (bd), and (md), the department may contract with
14 organizations that meet standards under sub. (3) for performance of the duties under
15 sub. (4) and shall distribute funds for services provided by resource centers.

History: 1999 a. 9; 2001 a. 16, 103.

16 **SECTION 7.** 46.284 (5) (a) of the statutes is amended to read:

17 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
18 (im), (o), and (w) and (7) (b) and (bd), the department shall provide funding on a
19 capitated payment basis for the provision of services under this section.
20 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
21 under contract with the department may expend the funds, consistent with this

1 section, including providing payment, on a capitated basis, to providers of services
2 under the family care benefit.

3 History: 1999 a. 9; 2001 a. 16, 103.

3 SECTION 8. 46.485 (2g) (intro.)[✓] of the statutes is amended to read:

4 46.485 (2g) (intro.) From the appropriation accounts under s. 20.435 (4) (b)[✓] and
5 (gp), the department may in each fiscal year transfer funds to the appropriation
6 under s. 20.435 (7) (kb) for distribution under this section and from the appropriation
7 under s. 20.435 (7) (mb) the department may not distribute more than \$1,330,500 in
8 each fiscal year to applying counties in this state that meet all of the following
9 requirements, as determined by the department:

10 History: 1989 a. 336; 1991 a. 39, 269; 1993 a. 16, 437; 1995 a. 27; 1997 a. 27; 1999 a. 9.

10 SECTION 9. 49.45 (2) (a) 17.[✓] of the statutes is amended to read:

11 49.45 (2) (a) 17. Notify the governor, the joint committee on legislative
12 organization, the joint committee on finance and appropriate standing committees,
13 as determined by the presiding officer of each house, if the appropriation accounts[✓]
14 under s. 20.435 (4) (b) is and (gp)[✓] are insufficient to provide the state share of medical
15 assistance.

16 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, 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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

16 SECTION 10. 49.45 (5m) (am) of the statutes is amended to read:

17 49.45 (5m) (am) Notwithstanding sub. (3) (e), from the appropriations
18 appropriation accounts[✓] under s. 20.435 (4) (b), (gp)[✓], (o), and (w), the department shall
19 distribute not more than \$2,256,000 in each fiscal year, to provide supplemental
20 funds to rural hospitals that, as determined by the department, have high utilization
21 of inpatient services by patients whose care is provided from governmental sources,
22 and to provide supplemental funds to critical access hospitals, except that the

1 department may not distribute funds to a rural hospital or to a critical access hospital
 2 to the extent that the distribution would exceed any limitation under 42 USC 1396b
 3 (i) (3).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

4 **SECTION 11. 49.45 (6m) (ag) (intro.)** of the statutes is amended to read:

5 **49.45 (6m) (ag) (intro.)** Payment for care provided in a facility under this
 6 subsection made under s. 20.435 (4) (b), (gp), (pa), (o), (w), or (wm) shall, except as
 7 provided in pars. (bg), (bm), and (br), be determined according to a prospective
 8 payment system updated annually by the department. The payment system shall
 9 implement standards that are necessary and proper for providing patient care and
 10 that meet quality and safety standards established under subch. II of ch. 50 and ch.
 11 150. The payment 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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

12 **SECTION 12. 49.45 (6v) (b)** of the statutes is amended to read:

13 **49.45 (6v) (b)** The department shall, each year, submit to the joint committee
 14 on finance a report for the previous fiscal year, except for the 1997–98 fiscal year, that
 15 provides information on the utilization of beds by recipients of medical assistance in
 16 facilities and a discussion and detailed projection of the likely balances,
 17 expenditures, encumbrances and carry over of currently appropriated amounts in
 18 the appropriation accounts under s. 20.435 (4) (b), (gp), and (o).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

19 **SECTION 13. 49.45 (6x) (a)** of the statutes is amended to read:

1 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the appropriations
2 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
3 distribute not more than \$4,748,000 in each fiscal year, to provide funds to an
4 essential access city hospital, except that the department may not allocate funds to
5 an essential access city hospital to the extent that the allocation would exceed any
6 limitation under 42 USC 1396b (i) (3).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

7 **SECTION 14.** 49.45 (6y) (a) of the statutes is amended to read:

8 49.45 (6y) (a) Notwithstanding sub. (3) (e), from the appropriations
9 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
10 distribute funding in each fiscal year to provide supplemental payment to hospitals
11 that enter into a contract under s. 49.02 (2) to provide health care services funded
12 by a relief block grant, as determined by the department, for hospital services that
13 are not in excess of the hospitals' customary charges for the services, as limited under
14 42 USC 1396b (i) (3). If no relief block grant is awarded under this chapter or if the
15 allocation of funds to such hospitals would exceed any limitation under 42 USC
16 1396b (i) (3), the department may distribute funds to hospitals that have not entered
17 into a contract under s. 49.02 (2).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

18 **SECTION 15.** 49.45 (6y) (am) of the statutes is amended to read:

19 49.45 (6y) (am) Notwithstanding sub. (3) (e), from the appropriations
20 appropriation accounts under s. 20.435 (4) (b), (h), (gp), (o), and (w), the department
21 shall distribute funding in each fiscal year to provide supplemental payments to

1 hospitals that enter into contracts under s. 49.02 (2) with a county having a
 2 population of 500,000 or more to provide health care services funded by a relief block
 3 grant, as determined by the department, for hospital services that are not in excess
 4 of the hospitals' customary charges for the services, as limited under 42 USC 1396b
 5 (i) (3).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

6 **SECTION 16. 49.45 (6z) (a) (intro.)** of the statutes is amended to read:

7 **49.45 (6z) (a) (intro.)** Notwithstanding sub. (3) (e), from the appropriations
 8 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
 9 distribute funding in each fiscal year to supplement payment for services to hospitals
 10 that enter into a contract under s. 49.02 (2) to provide health care services funded
 11 by a relief block grant under this chapter, if the department determines that the
 12 hospitals serve a disproportionate number of low-income patients with special
 13 needs. If no medical relief block grant under this chapter is awarded or if the
 14 allocation of funds to such hospitals would exceed any limitation under 42 USC
 15 1396b (i) (3), the department may distribute funds to hospitals that have not entered
 16 into a contract under s. 49.02 (2). The department may not distribute funds under
 17 this subsection to the extent that the distribution would do any 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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

18 **SECTION 17. 49.45 (8) (b) of the statutes** is amended to read:

19 **49.45 (8) (b)** Reimbursement under s. 20.435 (4) (b), (gp), (o), and (w) for home
 20 health services provided by a certified home health agency or independent nurse
 21 shall be made at the home health agency's or nurse's usual and customary fee per

1 patient care visit, subject to a maximum allowable fee per patient care visit that is
2 established under par. (c).

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

3 **SECTION 18. 49.45 (24m) (intro.)** of the statutes is amended to read:

4 **49.45 (24m) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)**
5 From the appropriations appropriation accounts under s. 20.435 (4) (b), (gp), (o), and
6 (w), in order to test the feasibility of instituting a system of reimbursement for
7 providers of home health care and personal care services for medical assistance
8 recipients that is based on competitive bidding, the department shall:

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, 252, 293; 1999 a. 9, 63, 103, 180, 185; 2001 a. 13, 16, 35, 38, 57, 67, 104, 109.

9 **SECTION 19. 49.472 (6) (a)** of the statutes is amended to read:

10 **49.472 (6) (a)** Notwithstanding sub. (4) (a) 3., from the appropriation account
11 under s. 20.435 (4) (b), (gp), or (w), the department shall, on the part of an individual
12 who is eligible for medical assistance under sub. (3), pay premiums for or purchase
13 individual coverage offered by the individual's employer if the department
14 determines that paying the premiums for or purchasing the coverage will not be more
15 costly than providing medical assistance.

History: 1999 a. 9, 185; 2001 a. 16.

16 **SECTION 20. 49.472 (6) (b)** of the statutes is amended to read:

17 **49.472 (6) (b)** If federal financial participation is available, from the
18 appropriation account under s. 20.435 (4) (b), (gp), or (w), the department may pay
19 medicare Part A and Part B premiums for individuals who are eligible for medicare
20 and for medical assistance under sub. (3).

History: 1999 a. 9, 185; 2001 a. 16.

1 **SECTION 21.** 49.473 (5)[✓] of the statutes is amended to read:

2 49.473 (5) The department shall audit and pay, from the appropriation
3 accounts under s. 20.435 (4) (b),[✓] (gp), and (o), allowable charges to a provider who is
4 certified under s. 49.45 (2) (a) 11. for medical assistance on behalf of a woman who
5 meets the requirements under sub. (2) for all benefits and services specified under
6 s. 49.46 (2).

7 History: 2001 a. 16, 104.
8 **SECTION 22.** 146.93^{✓X} of the statutes is repealed.

(END)

D-NOTE

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-1760/1dn

DAK:.....

date

Jld

To Robert Blaine:

The language of s. 20.435 (4) (gp),[✓] stats., as modified in this bill, duplicates the language under s. 20.435 (4) (b), stats., to make expenditure under MA as broad as possible. Is that what you want? Should the transfer language of the last[✓] three sentences be included? Do you want a provision th^{at} requires th^{at} expenditures be made^② under this appropriation before they are made under s. 20.435 (4) (b),[✓] stats.?

Debora A. Kennedy
Managing Attorney
Phone: (608) 266-0137
E-mail: debora.kennedy@legis.state.wi.us

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

LRB-1760/1dn
DAK:jld:rs

January 28, 2003

To Robert Blaine:

The language of s. 20.435 (4) (gp), stats., as modified in this bill, duplicates the language under s. 20.435 (4) (b), stats., to make expenditure under MA as broad as possible. Is that what you want? Should the transfer language of the last three sentences be included? Do you want a provision that requires the expenditures be made under this appropriation before they are made under s. 20.435 (4) (b), stats.?

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State of Wisconsin
2003 - 2004 LEGISLATURE

LRB-1760/3

DAK:jld:rs

D-NOTE

2
↑
EKF

DOA:.....Blaine - BB0427, Redirect hospital assessment to MA; eliminate
Wisconcare and grad med education to MA providers

FOR 2003-05 BUDGET — NOT READY FOR INTRODUCTION

don't gen

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Under current law, DHFS annually assesses hospitals \$1,500,000, in proportion to each hospital's gross private-pay patient revenues during the hospital's most recently concluded fiscal year. Fifty percent of moneys from the assessments is used to maintain a program, commonly known as "Wisconcare" to provide primary health care services to unemployed persons or persons employed less than 25 hours per week who have no health care coverage, are unable to obtain health care coverage, and have a family income that does not exceed 150% of the federal poverty line. The remaining 50% of assessment moneys is used to fund graduate medical education for the training of Medical Assistance (MA) program providers.

This bill eliminates the Wisconcare program and eliminates the funding of graduate medical education for the training of MA providers.

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:

1 **SECTION 1.** 20.435 (4) (gp) of the statutes is amended to read:

2 20.435 (4) (gp) ~~Health care and graduate medical education; aid~~ Medical
3 assistance; hospital assessments. All moneys received under s. 146.99, 50% to be
4 used in each fiscal year for purchase of primary health care services under s. 146.93
5 and 50% to be used in each fiscal year for graduate medical education payments for
6 training of providers under the medical assistance program under ss. 49.45 to 49.499
7 provide the state share of Medical Assistance program benefits administered under
8 s. 49.45, to provide Medical Assistance program benefits administered under s. 49.45
9 that are not also provided under par. (o), to fund the pilot project under s. 46.27 (9)
10 and (10), to provide the facility payments under 1999 Wisconsin Act 9, section 9123
11 (9m), to fund services provided by resource centers under s. 46.283, and for services
12 under the family care benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the
13 department may transfer from this appropriation account to the appropriation
14 account under sub. (7) (kb) funds in the amount of and for the purposes specified in
15 s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may
16 credit or deposit into this appropriation account and may transfer between fiscal
17 years funds that it transfers from the appropriation account under sub. (7) (kb) for
18 the purposes specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the
19 department may transfer from this appropriation account to the appropriation
20 account under sub. (7) (bd) funds in the amount and for the purposes specified in s.
21 49.45 (6v).

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

22 **SECTION 2.** 46.27 (9) (a) of the statutes is amended to read:

(r) ✓

1 46.27 (9) (a) The department may select up to 5 counties that volunteer to
2 participate in a pilot project under which they will receive certain funds allocated for
3 long-term care. The department shall allocate a level of funds to these counties
4 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), (gp), or (w)
5 to nursing homes for providing care because of increased utilization of nursing home
6 services, as estimated by the department. In estimating these levels, the department
7 shall exclude any increased utilization of services provided by state centers for the
8 developmentally disabled. The department shall calculate these amounts on a
9 calendar year basis under sub. (10).

INSERT 3-9

(r) ✓ scored

10 SECTION 3. 46.27 (10) (a) 1. of the statutes is amended to read:

11 46.27 (10) (a) 1. The department shall determine for each county participating
12 in the pilot project under sub. (9) a funding level of state medical assistance
13 expenditures to be received by the county. This level shall equal the amount that the
14 department determines would otherwise be paid under s. 20.435 (4) (b), (gp), or (w)
15 because of increased utilization of nursing home services, as estimated by the
16 department.

INSERT 3-16

17 SECTION 4. 46.275 (5) (a) of the statutes is amended to read:

18 46.275 (5) (a) Medical assistance reimbursement for services a county, or the
19 department under sub. (3r), provides under this program is available from the
20 appropriations appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w). If
21 2 or more counties jointly contract to provide services under this program and the
22 department approves the contract, medical assistance reimbursement is also
23 available for services provided jointly by these counties.

24 SECTION 5. 46.275 (5) (c) of the statutes is amended to read:

1 46.275 (5) (c) The total allocation under s. 20.435 (4) (b), (gp), (o), and (w) to
 2 counties and to the department under sub. (3r) for services provided under this
 3 section may not exceed the amount approved by the federal department of health and
 4 human services. A county may use funds received under this section only to provide
 5 services to persons who meet the requirements under sub. (4) and may not use
 6 unexpended funds received under this section to serve other developmentally
 7 disabled persons residing in the county.

8 SECTION 6. 46.283 (5) of the statutes is amended to read:

9 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
 10 (bm), (gp), (pa), and (w) and (7) (b), (bd), and (md), the department may contract with
 11 organizations that meet standards under sub. (3) for performance of the duties under
 12 sub. (4) and shall distribute funds for services provided by resource centers.

INSERT 4-12

13 SECTION 7. 46.284 (5) (a) of the statutes is amended to read:

14 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
 15 (im), (o), and (w) and (7) (b) and (bd), the department shall provide funding on a
 16 capitated payment basis for the provision of services under this section.
 17 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
 18 under contract with the department may expend the funds, consistent with this
 19 section, including providing payment, on a capitated basis, to providers of services
 20 under the family care benefit.

INSERT 4-20

21 SECTION 8. 46.485 (2g) (intro.) of the statutes is amended to read:

22 46.485 (2g) (intro.) From the appropriation accounts under s. 20.435 (4) (b) and
 23 (gp), the department may in each fiscal year transfer funds to the appropriation
 24 under s. 20.435 (7) (kb) for distribution under this section and from the appropriation
 25 under s. 20.435 (7) (mb) the department may not distribute more than \$1,330,500 in

1 each fiscal year to applying counties in this state that meet all of the following
2 requirements, as determined by the department:

3 SECTION 9. 49.45 (2) (a) 17. of the statutes is amended to read:

4 49.45 (2) (a) 17. Notify the governor, the joint committee on legislative
5 organization, the joint committee on finance and appropriate standing committees,
6 as determined by the presiding officer of each house, if the appropriation accounts
7 under s. 20.435 (4) (b) is ~~and (gp)~~ ⁽²⁾ are insufficient to provide the state share of medical
8 assistance. and (r) ← scored

INSERT
5-8

9 SECTION 10. 49.45 (5m) (am) of the statutes is amended to read:

10 49.45 (5m) (am) Notwithstanding sub. (3) (e), from the appropriations
11 appropriation accounts under s. 20.435 (4) (b), ~~(gp)~~, (o), and (w), the department shall
12 distribute not more than \$2,256,000 in each fiscal year, to provide supplemental
13 funds to rural hospitals that, as determined by the department, have high utilization
14 of inpatient services by patients whose care is provided from governmental sources,
15 and to provide supplemental funds to critical access hospitals, except that the
16 department may not distribute funds to a rural hospital or to a critical access hospital
17 to the extent that the distribution would exceed any limitation under 42 USC 1396b
18 (i) (3).

19 SECTION 11. 49.45 (6m) (ag) (intro.) of the statutes is amended to read:

20 49.45 (6m) (ag) (intro.) Payment for care provided in a facility under this
21 subsection made under s. 20.435 (4) (b), ~~(gp)~~, (pa), (o), ~~(w)~~, or (wm) shall, except as
22 provided in pars. (bg), (bm), and (br), be determined according to a prospective
23 payment system updated annually by the department. The payment system shall
24 implement standards that are necessary and proper for providing patient care and

(r), ✓

1 that meet quality and safety standards established under subch. II of ch. 50 and ch.

2 150. The payment system shall reflect all of the following:

INSERT 6-2

3 SECTION 12. 49.45 (6v) (b) of the statutes is amended to read:

4 49.45 (6v) (b) The department shall, each year, submit to the joint committee
5 on finance a report for the previous fiscal year, except for the 1997-98 fiscal year, that
6 provides information on the utilization of beds by recipients of medical assistance in
7 facilities and a discussion and detailed projection of the likely balances,
8 expenditures, encumbrances and carry over of currently appropriated amounts in

9 the appropriation accounts under s. 20.435 (4) (b), (gp), and (o), and (r) ✓

INSERT 6-9

10 SECTION 13. 49.45 (6x) (a) of the statutes is amended to read:

11 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the appropriations
12 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
13 distribute not more than \$4,748,000 in each fiscal year, to provide funds to an
14 essential access city hospital, except that the department may not allocate funds to
15 an essential access city hospital to the extent that the allocation would exceed any
16 limitation under 42 USC 1396b (i) (3).

INSERT 6-16

17 SECTION 14. 49.45 (6y) (a) of the statutes is amended to read:

18 49.45 (6y) (a) Notwithstanding sub. (3) (e), from the appropriations
19 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
20 distribute funding in each fiscal year to provide supplemental payment to hospitals
21 that enter into a contract under s. 49.02 (2) to provide health care services funded
22 by a relief block grant, as determined by the department, for hospital services that
23 are not in excess of the hospitals' customary charges for the services, as limited under
24 42 USC 1396b (i) (3). If no relief block grant is awarded under this chapter or if the
25 allocation of funds to such hospitals would exceed any limitation under 42 USC

(r), ✓

1 1396b (i) (3), the department may distribute funds to hospitals that have not entered
2 into a contract under s. 49.02 (2).

INSERT 7-2

✓ (r),

3 SECTION 15. 49.45 (6y) (am) of the statutes is amended to read:

4 49.45 (6y) (am) Notwithstanding sub. (3) (e), from the appropriations
5 appropriation accounts under s. 20.435 (4) (b), (h), (gp), (o), and (w), the department
6 shall distribute funding in each fiscal year to provide supplemental payments to
7 hospitals that enter into contracts under s. 49.02 (2) with a county having a
8 population of 500,000 or more to provide health care services funded by a relief block
9 grant, as determined by the department, for hospital services that are not in excess
10 of the hospitals' customary charges for the services, as limited under 42 USC 1396b
11 (i) (3).

INSERT 7-11

12 SECTION 16. 49.45 (6z) (a) (intro.) of the statutes is amended to read:

13 49.45 (6z) (a) (intro.) Notwithstanding sub. (3) (e), from the appropriations
14 appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (w), the department shall
15 distribute funding in each fiscal year to supplement payment for services to hospitals
16 that enter into a contract under s. 49.02 (2) to provide health care services funded
17 by a relief block grant under this chapter, if the department determines that the
18 hospitals serve a disproportionate number of low-income patients with special
19 needs. If no medical relief block grant under this chapter is awarded or if the
20 allocation of funds to such hospitals would exceed any limitation under 42 USC
21 1396b (i) (3), the department may distribute funds to hospitals that have not entered
22 into a contract under s. 49.02 (2). The department may not distribute funds under

23 this subsection to the extent that the distribution would do any of the following:

INSERT 7-23

24 SECTION 17. 49.45 (8) (b) of the statutes is amended to read:

(r)

1 49.45 (8) (b) Reimbursement under s. 20.435 (4) (b), (gp), (o), and (w) for home
2 health services provided by a certified home health agency or independent nurse
3 shall be made at the home health agency's or nurse's usual and customary fee per
4 patient care visit, subject to a maximum allowable fee per patient care visit that is
5 established under par. (c).

INSERT 8-5

6 SECTION 18. 49.45 (24m) (intro.) of the statutes is amended to read:

7 49.45 (24m) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)

8 From the ~~appropriations~~ appropriation accounts under s. 20.435 (4) (b), (gp), (o), and
9 (w), in order to test the feasibility of instituting a system of reimbursement for
10 providers of home health care and personal care services for medical assistance
11 recipients that is based on competitive bidding, the department shall:

INSERT 8-11

12 SECTION 19. 49.472 (6) (a) of the statutes is amended to read:

13 49.472 (6) (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
14 under s. 20.435 (4) (b), (gp), or (w), the department shall, on the part of an individual
15 who is eligible for medical assistance under sub. (3), pay premiums for or purchase
16 individual coverage offered by the individual's employer if the department
17 determines that paying the premiums for or purchasing the coverage will not be more
18 costly than providing medical assistance.

INSERT 8-18

19 SECTION 20. 49.472 (6) (b) of the statutes is amended to read:

20 49.472 (6) (b) If federal financial participation is available, from the
21 appropriation account under s. 20.435 (4) (b), (gp), or (w), the department may pay
22 medicare Part A and Part B premiums for individuals who are eligible for medicare
23 and for medical assistance under sub. (3).

INSERT 8-23

24 SECTION 21. 49.473 (5) of the statutes is amended to read:

DAK:jld

D-NOTE

To Robert Blaine:

LRB-1253/7

This draft reconciles LRB-0194/8,

LRB-1253

LRB-1755/P2, and LRB-1760/1.

LRB-0194, LRB-1755, and

LRB-1760 should all

continue to appear in the compiled bill.

DAK

It adds the treatment of LRB-1755 to

ss. 46.27(9)(a) and (10)(a)1., 46.283(5), 46.284(5)(a),

49.45(2)(a) 17., (6m)(as)(intro.), (6v)(b), (6x)(a),

(6y)(a) and (am), (6z)(a)(intro.), (8)(b), and (24m)

(intro.), 49.472(b)(a) and (b), and 49.473(5).

It removes the treatment of s. 46.275(5)(a) and (c)

and adds it to LRB-0194 and removes

the treatment of s. 49.45(5m)(am) and adds it to

LRB-1253

INSERT 3-9

*** This is reconciled s. 46.27(9)(a).

This section has been affected by drafts

with the following LRB#s: LRB-1755/P2 and

LRB-1760/1.

INSERT 3-16

*** This is reconciled s. 46.27(10)(a)1. ✓

This section has been affected by drafts

with the following LRB #s: ^{LRB} s-1755/P2 and

LRB-1760/1.

INSERT 4-12

*** This is reconciled s. 46.283(5),

This section has been affected by drafts
LRB

with the following LRB#s: -1755/P2 and

LRB-1760/1.

INSERT 4-20

*** This is reconciled s. 46.284(5)(a).

This section has been affected by drafts
LRB

with the following LRB#s: -1755/P2 and

LRB-1760/1

INSERT 5-8

*** This is reconciled s. 49.45 (2)(a) 17th.

This section has been affected by drafts
LRB

with the following LRB#s: 1-1755/P2 and

LRB-1760/1.

INSERT 6-2

*** This is reconciled s. 49.45 (6m) (ag) (intro.) ✓

This section has been affected by drafts

with the following LRB #s: ^{LRB} 1-1755/P2 and

LRB-1760/1.

INSERT 6-9

✓
**** This is reconciled s. 49.45(6v)(b).

This section has been affected by drafts

with the following LRB#s: LRB 1755/P2 and

LRB-1760/1.

INSERT 6-16

*** This is reconciled s. 49.45(6x)(a).

This section has been affected by drafts

with the following LRB #s: ^{LRB} -1755/P2 and

LRB - 1760/1.

INSERT 7-2

*** This is reconciled s. 49.45[✓](6y)(a).

This section has been affected by drafts

with the following LRB#s: LRB 1-1755/P2 and

LRB-1760/1.

INSERT 7-11

*** This is reconciled s. 49.45 (6y) (am).

This section has been affected by drafts

with the following LRB #s: ^{LRB} 1755/P2 and

LRB-1760/1.

INSERT 7-23

*** This is reconciled s. 49.45 (6z)(a) (intro.)

This section has been affected by drafts

with the following LRB #s: ^{LRB} 1-1755/P2 and

LRB-1760/1.

INSERT 8-5

*** This is reconciled s. 49.45⁴ (8)(b).^v

This section has been affected by drafts

with the following LRB#s: ^{LRB} L-1755/P2 and

LRB-1760/1.

INSERT 8-11

(intro.)

*** This is reconciled s. 49.45 (24m).

This section has been affected by drafts

with the following LRB #s: ^{LRB} -1755/P2 and

LRB-1760/1.

INSERT 8-18

*** This is reconciled s. 49.472(6)(a). ✓

This section has been affected by drafts

with the following LRB#s: ^{LRB} -1755/P2 and

LRB-1760/1.

INSERT 8-23

*** This is reconciled s. 49.472 (b)(b)

This section has been affected by drafts
LRB

with the following LRB#s: -1755/P2 and

LRB -1760/1.

INSERT 9-5

*** This is reconciled s. 49.473(5).[✓]

This section has been affected by drafts

with the following LRB#s: ^{LRB} -1755/P2 and

LRB-1760/1.

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-1760/2dn
DAK:jld:cph

February 6, 2003

To Robert Blaine:

This draft reconciles LRB-0194/8, LRB-1253/7, LRB-1755/P2, and LRB-1760/1. It adds the treatment of LRB-1755 to ss. 46.27 (9) (a) and (10) (a) 1., 46.283 (5), 46.284 (5) (a), 49.45 (2) (a) 17., (6m) (ag) (intro.), (6v) (b), (6x) (a), (6y) (a) and (am), (6z) (a) (intro.), (8) (b), and (24m) (intro.), 49.472 (6) (a) and (b), and 49.473 (5). It removes the treatment of s. 46.275 (5) (a) and (c) and adds it to LRB-0194 and removes the treatment of s. 49.45 (5m) (am) and adds it to LRB-1253. LRB-0194, LRB-1253, LRB-1755, and LRB-1760 should all continue to appear in the compiled bill.

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(SOON - In edit 2/13)
State of Wisconsin
2003 - 2004 LEGISLATURE

LRB-1760/3

DAK:jld&kjf:oph

D-NOTE

DOA:.....Blaine – BB0427, Redirect hospital assessment to MA; eliminate Wisconcare and grad med education to MA providers

FOR 2003-05 BUDGET — NOT READY FOR INTRODUCTION

don't gen

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Under current law, DHFS annually assesses hospitals \$1,500,000, in proportion to each hospital's gross private-pay patient revenues during the hospital's most recently concluded fiscal year. Fifty percent of moneys from the assessments is used to maintain a program, commonly known as "Wisconcare" to provide primary health care services to unemployed persons or persons employed less than 25 hours per week who have no health care coverage, are unable to obtain health care coverage, and have a family income that does not exceed 150% of the federal poverty line. The remaining 50% of assessment moneys is used to fund graduate medical education for the training of Medical Assistance (MA) program providers.

This bill eliminates the Wisconcare program and eliminates the funding of graduate medical education for the training of MA providers.

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:

✓
a portion of

1 SECTION 1. 20.435 (4) (gp) of the statutes is amended to read:

2 20.435 (4) (gp) ~~Health care and graduate medical education; and Medical~~
3 ~~assistance; hospital assessments.~~ All moneys received under s. 146.99, 50% to be
4 used in each fiscal year for purchase of primary health care services under s. 146.93
5 and 50% to be used in each fiscal year for graduate medical education payments for
6 training of providers under the medical assistance program under ss. 49.45 to 49.499
7 provide the state share of Medical Assistance program benefits administered under
8 s. 49.45, to provide Medical Assistance program benefits administered under s. 49.45
9 that are not also provided under par. (o), to fund the pilot project under s. 46.27 (9)
10 and (10), to provide the facility payments under 1999 Wisconsin Act 9, section 9123
11 (9m), to fund services provided by resource centers under s. 46.283, and for services
12 under the family care benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the
13 department may transfer from this appropriation account to the appropriation
14 account under sub. (7) (kb) funds in the amount of and for the purposes specified in
15 s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may
16 credit or deposit into this appropriation account and may transfer between fiscal
17 years funds that it transfers from the appropriation account under sub. (7) (kb) for
18 the purposes specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the
19 department may transfer from this appropriation account to the appropriation
20 account under sub. (7) (bd) funds in the amount and for the purposes specified in s.
21 49.45 (6v).

****NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

22 SECTION 2. 46.27 (9) (a) of the statutes is amended to read:

1 46.27 (9) (a) The department may select up to 5 counties that volunteer to
2 participate in a pilot project under which they will receive certain funds allocated for
3 long-term care. The department shall allocate a level of funds to these counties
4 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), (gp), (r), or
5 (w) to nursing homes for providing care because of increased utilization of nursing
6 home services, as estimated by the department. In estimating these levels, the
7 department shall exclude any increased utilization of services provided by state
8 centers for the developmentally disabled. The department shall calculate these
9 amounts on a calendar year basis under sub. (10).

 ***NOTE: This is reconciled s. 46.27 (9) (a). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

10 **SECTION 3.** 46.27 (10) (a) 1. of the statutes is amended to read:

11 46.27 (10) (a) 1. The department shall determine for each county participating
12 in the pilot project under sub. (9) a funding level of state medical assistance
13 expenditures to be received by the county. This level shall equal the amount that the
14 department determines would otherwise be paid under s. 20.435 (4) (b), (gp), (r), or
15 (w) because of increased utilization of nursing home services, as estimated by the
16 department.

 ***NOTE: This is reconciled s. 46.27 (10) (a) 1. This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

17 **SECTION 4.** 46.283 (5) of the statutes is amended to read:

18 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
19 (bm), (gp), (pa), (r), and (w) and (7) (b), (bd), and (md), the department may contract
20 with organizations that meet standards under sub. (3) for performance of the duties
21 under sub. (4) and shall distribute funds for services provided by resource centers.

 ***NOTE: This is reconciled s. 46.283 (5). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

1 **SECTION 5.** 46.284 (5) (a) of the statutes is amended to read:

2 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
3 (im), (o), (r), and (w) and (7) (b) and (bd), the department shall provide funding on a
4 capitated payment basis for the provision of services under this section.
5 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
6 under contract with the department may expend the funds, consistent with this
7 section, including providing payment, on a capitated basis, to providers of services
8 under the family care benefit.

 ****NOTE: This is reconciled s. 46.284 (5) (a). This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

9 **SECTION 6.** 46.485 (2g) (intro.) of the statutes is amended to read:

10 46.485 (2g) (intro.) From the appropriation accounts under s. 20.435 (4) (b) and
11 (gp), the department may in each fiscal year transfer funds to the appropriation
12 under s. 20.435 (7) (kb) for distribution under this section and from the appropriation
13 under s. 20.435 (7) (mb) the department may not distribute more than \$1,330,500 in
14 each fiscal year to applying counties in this state that meet all of the following
15 requirements, as determined by the department:

16 **SECTION 7.** 49.45 (2) (a) 17. of the statutes is amended to read:

17 49.45 (2) (a) 17. Notify the governor, the joint committee on legislative
18 organization, the joint committee on finance and appropriate standing committees,
19 as determined by the presiding officer of each house, if the appropriation accounts
20 under s. 20.435 (4) (b) is , (gp), and (r) are insufficient to provide the state share of
21 medical assistance.

 ****NOTE: This is reconciled s. 49.45 (2) (a) 17. This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

22 **SECTION 8.** 49.45 (6m) (ag) (intro.) of the statutes is amended to read:

1 49.45 (6m) (ag) (intro.) Payment for care provided in a facility under this
2 subsection made under s. 20.435 (4) (b), (gp), (pa), (o), (r), (w), or (wm) shall, except
3 as provided in pars. (bg), (bm), and (br), be determined according to a prospective
4 payment system updated annually by the department. The payment system shall
5 implement standards that are necessary and proper for providing patient care and
6 that meet quality and safety standards established under subch. II of ch. 50 and ch.
7 150. The payment system shall reflect all of the following:

 ****NOTE: This is reconciled s. 49.45 (6m) (ag) (intro.). This SECTION has been
affected by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

8 **SECTION 9.** 49.45 (6v) (b) of the statutes is amended to read:

9 49.45 (6v) (b) The department shall, each year, submit to the joint committee
10 on finance a report for the previous fiscal year, except for the 1997–98 fiscal year, that
11 provides information on the utilization of beds by recipients of medical assistance in
12 facilities and a discussion and detailed projection of the likely balances,
13 expenditures, encumbrances and carry over of currently appropriated amounts in
14 the appropriation accounts under s. 20.435 (4) (b) and, (gp), (o), and (r).

 ****NOTE: This is reconciled s. 49.45 (6v) (b). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

15 **SECTION 10.** 49.45 (6x) (a) of the statutes is amended to read:

16 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the ~~appropriations~~
17 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), and (w), the department
18 shall distribute not more than \$4,748,000 in each fiscal year, to provide funds to an
19 essential access city hospital, except that the department may not allocate funds to
20 an essential access city hospital to the extent that the allocation would exceed any
21 limitation under 42 USC 1396b (i) (3).

 ****NOTE: This is reconciled s. 49.45 (6x) (a). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

1 **SECTION 11.** 49.45 (6y) (a) of the statutes is amended to read:

2 49.45 (6y) (a) Notwithstanding sub. (3) (e), from the ~~appropriations~~
3 appropriation accounts under s. 20.435 (4) (b), (~~gp~~), (o), (~~r~~), and (w), the department
4 shall distribute funding in each fiscal year to provide supplemental payment to
5 hospitals that enter into a contract under s. 49.02 (2) to provide health care services
6 funded by a relief block grant, as determined by the department, for hospital services
7 that are not in excess of the hospitals' customary charges for the services, as limited
8 under 42 USC 1396b (i) (3). If no relief block grant is awarded under this chapter
9 or if the allocation of funds to such hospitals would exceed any limitation under 42
10 USC 1396b (i) (3), the department may distribute funds to hospitals that have not
11 entered into a contract under s. 49.02 (2).

 ****NOTE: This is reconciled s. 49.45 (6y) (a). This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

12 **SECTION 12.** 49.45 (6y) (am) of the statutes is amended to read:

13 49.45 (6y) (am) Notwithstanding sub. (3) (e), from the ~~appropriations~~
14 appropriation accounts under s. 20.435 (4) (b), (h), (~~gp~~), (o), (~~r~~), and (w), the
15 department shall distribute funding in each fiscal year to provide supplemental
16 payments to hospitals that enter into contracts under s. 49.02 (2) with a county
17 having a population of 500,000 or more to provide health care services funded by a
18 relief block grant, as determined by the department, for hospital services that are not
19 in excess of the hospitals' customary charges for the services, as limited under 42
20 USC 1396b (i) (3).

 ****NOTE: This is reconciled s. 49.45 (6y) (am). This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

21 **SECTION 13.** 49.45 (6z) (a) (intro.) of the statutes is amended to read:

1 49.45 (6z) (a) (intro.) Notwithstanding sub. (3) (e), from the appropriations
2 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), and (w), the department
3 shall distribute funding in each fiscal year to supplement payment for services to
4 hospitals that enter into a contract under s. 49.02 (2) to provide health care services
5 funded by a relief block grant under this chapter, if the department determines that
6 the hospitals serve a disproportionate number of low-income patients with special
7 needs. If no medical relief block grant under this chapter is awarded or if the
8 allocation of funds to such hospitals would exceed any limitation under 42 USC
9 1396b (i) (3), the department may distribute funds to hospitals that have not entered
10 into a contract under s. 49.02 (2). The department may not distribute funds under
11 this subsection to the extent that the distribution would do any of the following:

 ****NOTE: This is reconciled s. 49.45 (6z) (a) (intro.). This SECTION has been affected
by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

12 **SECTION 14.** 49.45 (8) (b) of the statutes is amended to read:

13 49.45 (8) (b) Reimbursement under s. 20.435 (4) (b), (gp), (o), (r), and (w) for
14 home health services provided by a certified home health agency or independent
15 nurse shall be made at the home health agency's or nurse's usual and customary fee
16 per patient care visit, subject to a maximum allowable fee per patient care visit that
17 is established under par. (c).

 ****NOTE: This is reconciled s. 49.45 (8) (b). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

18 **SECTION 15.** 49.45 (24m) (intro.) of the statutes is amended to read:

19 49.45 (24m) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)
20 From the appropriations appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r),
21 and (w), in order to test the feasibility of instituting a system of reimbursement for

1 providers of home health care and personal care services for medical assistance
2 recipients that is based on competitive bidding, the department shall:

****NOTE: This is reconciled s. 49.45 (24m) (intro.). This SECTION has been affected
by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

3 **SECTION 16.** 49.472 (6) (a) of the statutes is amended to read:

4 49.472 (6) (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
5 under s. 20.435 (4) (b), (gp), (r), or (w), the department shall, on the part of an
6 individual who is eligible for medical assistance under sub. (3), pay premiums for or
7 purchase individual coverage offered by the individual's employer if the department
8 determines that paying the premiums for or purchasing the coverage will not be more
9 costly than providing medical assistance.

****NOTE: This is reconciled s. 49.472 (6) (a). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

10 **SECTION 17.** 49.472 (6) (b) of the statutes is amended to read:

11 49.472 (6) (b) If federal financial participation is available, from the
12 appropriation account under s. 20.435 (4) (b), (gp), (r), or (w), the department may
13 pay medicare Part A and Part B premiums for individuals who are eligible for
14 medicare and for medical assistance under sub. (3).

****NOTE: This is reconciled s. 49.472 (6) (b). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

15 **SECTION 18.** 49.473 (5) of the statutes is amended to read:

16 49.473 (5) The department shall audit and pay, from the appropriation
17 accounts under s. 20.435 (4) (b), (gp), and (o), and (r), allowable charges to a provider
18 who is certified under s. 49.45 (2) (a) 11. for medical assistance on behalf of a woman
19 who meets the requirements under sub. (2) for all benefits and services specified
20 under s. 49.46 (2).

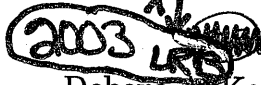
****NOTE: This is reconciled s. 49.473 (5). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

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

LRB-1760/3dn
DAK:jld&kjf:cph

To Robert Blaine:

✓
This redraft adds the words "a portion of" in three places in the language amending s. 20.435 (4) (gp), stats., to clarify that this appropriation does not provide *all* of the funding for the state share of MA program benefits administered under s. 49.45, stats., and does not provide all of the funding for facility payments. This same change was made to s. 20.435 (4) (b), stats., under ~~LRB~~ 1755 (drafted by Pam Kahler).


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DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-1760/3dn
DAK:jld&kjf:rs

To Robert Blaine:

This redraft adds the words "a portion of" in three places in the language amending s. 20.435 (4) (gp), stats., to clarify that this appropriation does not provide *all* of the funding for the state share of MA program benefits administered under s. 49.45, stats., and does not provide all of the funding for facility payments. This same change was made to s. 20.435 (4) (b), stats., under 2003 LRB-1755 (drafted by Pam Kahler).

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State of Wisconsin
2003 - 2004 LEGISLATURE

LRB-1760/3
DAK:jld&kjf:rs

DOA:.....Blaine – BB0427, Redirect hospital assessment to MA; eliminate
Wisconcare and grad med education to MA providers

FOR 2003-05 BUDGET — NOT READY FOR INTRODUCTION

1 AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Under current law, DHFS annually assesses hospitals \$1,500,000, in proportion to each hospital's gross private-pay patient revenues during the hospital's most recently concluded fiscal year. Fifty percent of moneys from the assessments is used to maintain a program, commonly known as "Wisconcare" to provide primary health care services to unemployed persons or persons employed less than 25 hours per week who have no health care coverage, are unable to obtain health care coverage, and have a family income that does not exceed 150% of the federal poverty line. The remaining 50% of assessment moneys is used to fund graduate medical education for the training of Medical Assistance (MA) program providers.

This bill eliminates the Wisconcare program and eliminates the funding of graduate medical education for the training of MA providers.

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:

1 **SECTION 1.** 20.435 (4) (gp) of the statutes is amended to read:

2 20.435 (4) (gp) ~~Health care and graduate medical education; aid~~ Medical
3 assistance; hospital assessments. All moneys received under s. 146.99, 50% to be
4 used in each fiscal year for purchase of primary health care services under s. 146.93
5 and 50% to be used in each fiscal year for graduate medical education payments for
6 training of providers under the medical assistance program under ss. 49.45 to 49.499
7 provide a portion of the state share of Medical Assistance program benefits
8 administered under s. 49.45, to provide a portion of Medical Assistance program
9 benefits administered under s. 49.45 that are not also provided under par. (o), to fund
10 the pilot project under s. 46.27 (9) and (10), to provide a portion of the facility
11 payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund services provided
12 by resource centers under s. 46.283, and for services under the family care benefit
13 under s. 46.284 (5). Notwithstanding s. 20.002 (1), the department may transfer
14 from this appropriation account to the appropriation account under sub. (7) (kb)
15 funds in the amount of and for the purposes specified in s. 46.485. Notwithstanding
16 ss. 20.001 (3) (b) and 20.002 (1), the department may credit or deposit into this
17 appropriation account and may transfer between fiscal years funds that it transfers
18 from the appropriation account under sub. (7) (kb) for the purposes specified in s.
19 46.485 (3r). Notwithstanding s. 20.002 (1), the department may transfer from this
20 appropriation account to the appropriation account under sub. (7) (bd) funds in the
21 amount and for the purposes specified in s. 49.45 (6v).

 ***NOTE: This SECTION involves a change in an appropriation that must be reflected in the revised schedule in s. 20.005, stats.

22 **SECTION 2.** 46.27 (9) (a) of the statutes is amended to read:

1 46.27 (9) (a) The department may select up to 5 counties that volunteer to
2 participate in a pilot project under which they will receive certain funds allocated for
3 long-term care. The department shall allocate a level of funds to these counties
4 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), (gp), (r), or
5 (w) to nursing homes for providing care because of increased utilization of nursing
6 home services, as estimated by the department. In estimating these levels, the
7 department shall exclude any increased utilization of services provided by state
8 centers for the developmentally disabled. The department shall calculate these
9 amounts on a calendar year basis under sub. (10).

 ****NOTE: This is reconciled s. 46.27 (9) (a). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

10 **SECTION 3.** 46.27 (10) (a) 1. of the statutes is amended to read:

11 46.27 (10) (a) 1. The department shall determine for each county participating
12 in the pilot project under sub. (9) a funding level of state medical assistance
13 expenditures to be received by the county. This level shall equal the amount that the
14 department determines would otherwise be paid under s. 20.435 (4) (b), (gp), (r), or
15 (w) because of increased utilization of nursing home services, as estimated by the
16 department.

 ****NOTE: This is reconciled s. 46.27 (10) (a) 1. This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

17 **SECTION 4.** 46.283 (5) of the statutes is amended to read:

18 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
19 (bm), (gp), (pa), (r), and (w) and (7) (b), (bd), and (md), the department may contract
20 with organizations that meet standards under sub. (3) for performance of the duties
21 under sub. (4) and shall distribute funds for services provided by resource centers.

 ****NOTE: This is reconciled s. 46.283 (5). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

1 **SECTION 5.** 46.284 (5) (a) of the statutes is amended to read:

2 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
3 (im), (o), (r), and (w) and (7) (b) and (bd), the department shall provide funding on a
4 capitated payment basis for the provision of services under this section.
5 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
6 under contract with the department may expend the funds, consistent with this
7 section, including providing payment, on a capitated basis, to providers of services
8 under the family care benefit.

 ****NOTE: This is reconciled s. 46.284 (5) (a). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

9 **SECTION 6.** 46.485 (2g) (intro.) of the statutes is amended to read:

10 46.485 (2g) (intro.) From the appropriation accounts under s. 20.435 (4) (b) and
11 (gp), the department may in each fiscal year transfer funds to the appropriation
12 under s. 20.435 (7) (kb) for distribution under this section and from the appropriation
13 under s. 20.435 (7) (mb) the department may not distribute more than \$1,330,500 in
14 each fiscal year to applying counties in this state that meet all of the following
15 requirements, as determined by the department:

16 **SECTION 7.** 49.45 (2) (a) 17. of the statutes is amended to read:

17 49.45 (2) (a) 17. Notify the governor, the joint committee on legislative
18 organization, the joint committee on finance and appropriate standing committees,
19 as determined by the presiding officer of each house, if the appropriation accounts
20 under s. 20.435 (4) (b) is , (gp), and (r) are insufficient to provide the state share of
21 medical assistance.

 ****NOTE: This is reconciled s. 49.45 (2) (a) 17. This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

22 **SECTION 8.** 49.45 (6m) (ag) (intro.) of the statutes is amended to read:

1 49.45 (6m) (ag) (intro.) Payment for care provided in a facility under this
2 subsection made under s. 20.435 (4) (b), (~~gp~~), (pa), (o), (~~r~~), (w), or (wm) shall, except
3 as provided in pars. (bg), (bm), and (br), be determined according to a prospective
4 payment system updated annually by the department. The payment system shall
5 implement standards that are necessary and proper for providing patient care and
6 that meet quality and safety standards established under subch. II of ch. 50 and ch.
7 150. The payment system shall reflect all of the following:

 ***NOTE: This is reconciled s. 49.45 (6m) (ag) (intro.). This SECTION has been
affected by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

8 **SECTION 9.** 49.45 (6v) (b) of the statutes is amended to read:

9 49.45 (6v) (b) The department shall, each year, submit to the joint committee
10 on finance a report for the previous fiscal year, except for the 1997–98 fiscal year, that
11 provides information on the utilization of beds by recipients of medical assistance in
12 facilities and a discussion and detailed projection of the likely balances,
13 expenditures, encumbrances and carry over of currently appropriated amounts in
14 the appropriation accounts under s. 20.435 (4) (b) ~~and~~, (~~gp~~), (o), ~~and~~ (~~r~~).

 ***NOTE: This is reconciled s. 49.45 (6v) (b). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

15 **SECTION 10.** 49.45 (6x) (a) of the statutes is amended to read:

16 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the ~~appropriations~~
17 appropriation accounts under s. 20.435 (4) (b), (~~gp~~), (o), (~~r~~), and (w), the department
18 shall distribute not more than \$4,748,000 in each fiscal year, to provide funds to an
19 essential access city hospital, except that the department may not allocate funds to
20 an essential access city hospital to the extent that the allocation would exceed any
21 limitation under 42 USC 1396b (i) (3).

 ***NOTE: This is reconciled s. 49.45 (6x) (a). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

1 **SECTION 11.** 49.45 (6y) (a) of the statutes is amended to read:

2 49.45 (6y) (a) Notwithstanding sub. (3) (e), from the appropriations
3 appropriation accounts under s. 20.435 (4) (b), (~~gp~~), (o), (~~r~~), and (w), the department
4 shall distribute funding in each fiscal year to provide supplemental payment to
5 hospitals that enter into a contract under s. 49.02 (2) to provide health care services
6 funded by a relief block grant, as determined by the department, for hospital services
7 that are not in excess of the hospitals' customary charges for the services, as limited
8 under 42 USC 1396b (i) (3). If no relief block grant is awarded under this chapter
9 or if the allocation of funds to such hospitals would exceed any limitation under 42
10 USC 1396b (i) (3), the department may distribute funds to hospitals that have not
11 entered into a contract under s. 49.02 (2).

 ****NOTE: This is reconciled s. 49.45 (6y) (a). This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

12 **SECTION 12.** 49.45 (6y) (am) of the statutes is amended to read:

13 49.45 (6y) (am) Notwithstanding sub. (3) (e), from the appropriations
14 appropriation accounts under s. 20.435 (4) (b), (h), (~~gp~~), (o), (~~r~~), and (w), the
15 department shall distribute funding in each fiscal year to provide supplemental
16 payments to hospitals that enter into contracts under s. 49.02 (2) with a county
17 having a population of 500,000 or more to provide health care services funded by a
18 relief block grant, as determined by the department, for hospital services that are not
19 in excess of the hospitals' customary charges for the services, as limited under 42
20 USC 1396b (i) (3).

 ****NOTE: This is reconciled s. 49.45 (6y) (am). This SECTION has been affected by
 drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

21 **SECTION 13.** 49.45 (6z) (a) (intro.) of the statutes is amended to read:

1 49.45 (6z) (a) (intro.) Notwithstanding sub. (3) (e), from the appropriations
2 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), and (w), the department
3 shall distribute funding in each fiscal year to supplement payment for services to
4 hospitals that enter into a contract under s. 49.02 (2) to provide health care services
5 funded by a relief block grant under this chapter, if the department determines that
6 the hospitals serve a disproportionate number of low-income patients with special
7 needs. If no medical relief block grant under this chapter is awarded or if the
8 allocation of funds to such hospitals would exceed any limitation under 42 USC
9 1396b (i) (3), the department may distribute funds to hospitals that have not entered
10 into a contract under s. 49.02 (2). The department may not distribute funds under
11 this subsection to the extent that the distribution would do any of the following:

 ****NOTE: This is reconciled s. 49.45 (6z) (a) (intro.). This SECTION has been affected
 by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

12 **SECTION 14.** 49.45 (8) (b) of the statutes is amended to read:

13 49.45 (8) (b) Reimbursement under s. 20.435 (4) (b), (gp), (o), (r), and (w) for
14 home health services provided by a certified home health agency or independent
15 nurse shall be made at the home health agency's or nurse's usual and customary fee
16 per patient care visit, subject to a maximum allowable fee per patient care visit that
17 is established under par. (c).

 ****NOTE: This is reconciled s. 49.45 (8) (b). This SECTION has been affected by drafts
 with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

18 **SECTION 15.** 49.45 (24m) (intro.) of the statutes is amended to read:

19 49.45 (24m) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)
20 From the appropriations appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r),
21 and (w), in order to test the feasibility of instituting a system of reimbursement for

1 providers of home health care and personal care services for medical assistance
2 recipients that is based on competitive bidding, the department shall:

****NOTE: This is reconciled s. 49.45 (24m) (intro.). This SECTION has been affected
by drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

3 **SECTION 16.** 49.472 (6) (a) of the statutes is amended to read:

4 49.472 (6) (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
5 under s. 20.435 (4) (b), (gp), (r), or (w), the department shall, on the part of an
6 individual who is eligible for medical assistance under sub. (3), pay premiums for or
7 purchase individual coverage offered by the individual's employer if the department
8 determines that paying the premiums for or purchasing the coverage will not be more
9 costly than providing medical assistance.

****NOTE: This is reconciled s. 49.472 (6) (a). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

10 **SECTION 17.** 49.472 (6) (b) of the statutes is amended to read:

11 49.472 (6) (b) If federal financial participation is available, from the
12 appropriation account under s. 20.435 (4) (b), (gp), (r), or (w), the department may
13 pay medicare Part A and Part B premiums for individuals who are eligible for
14 medicare and for medical assistance under sub. (3).

****NOTE: This is reconciled s. 49.472 (6) (b). This SECTION has been affected by
drafts with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

15 **SECTION 18.** 49.473 (5) of the statutes is amended to read:

16 49.473 (5) The department shall audit and pay, from the appropriation
17 accounts under s. 20.435 (4) (b), (gp), ~~and (o)~~, and (r), allowable charges to a provider
18 who is certified under s. 49.45 (2) (a) 11. for medical assistance on behalf of a woman
19 who meets the requirements under sub. (2) for all benefits and services specified
20 under s. 49.46 (2).

****NOTE: This is reconciled s. 49.473 (5). This SECTION has been affected by drafts
with the following LRB numbers: LRB-1755/P2 and LRB-1760/1.

