

1 *~~1252/3.1~~* SECTION 1351. 49.45 (6m) (ar) 1. a. of the statutes is amended to
2 read:

3 49.45 (6m) (ar) 1. a. The department shall establish standards for payment of
4 allowable direct care costs, for facilities that do not primarily serve the
5 developmentally disabled, that take into account direct care costs for a sample of all
6 of those facilities in this state and separate standards for payment of allowable direct
7 care costs, for facilities that primarily serve the developmentally disabled, that take
8 into account direct care costs for a sample of all of those facilities in this state. The
9 standards shall be adjusted by the department for regional labor cost variations. For
10 facilities in Douglas, Pierce, and St. Croix counties, the department shall perform the
11 adjustment by use of the wage index that is used by the federal department of health
12 and human services for hospital reimbursement under 42 USC 1395 to 1395ggg.

13 *~~0210/4.18~~* SECTION 1352. 49.45 (6m) (ar) 1. a. of the statutes, as affected by
14 2003 Wisconsin Act (this act), is amended to read:

15 49.45 (6m) (ar) 1. a. The department shall establish standards for payment of
16 allowable direct care costs under par. (am) 1. bm., for facilities that do not primarily
17 serve the developmentally disabled, that take into account direct care costs for a
18 sample of all of those facilities in this state and separate standards for payment of
19 allowable direct care costs, for facilities that primarily serve the developmentally
20 disabled, that take into account direct care costs for a sample of all of those facilities
21 in this state. The standards shall be adjusted by the department for regional labor
22 cost variations.

****NOTE: This is reconciled s. 49.45 (6m) (ar) 1. a. This SECTION has been affected
by drafts with the following LRB numbers: LRB-0210/3 and LRB-1252/2.

SECTION 1353

1 *~~0210/4.19~~* SECTION 1353. 49.45 (6m) (ar) 2. (intro.) and 2. a. of the statutes
2 are consolidated, renumbered 49.45 (6m) (ar) 2. and amended to read:

3 49.45 (6m) (ar) 2. For support service costs: ~~2. a.~~ The , the department shall
4 establish one or more standards for the payment of support service costs that take
5 into account support service costs for a sample of all facilities within the state.

6 *~~0210/4.20~~* SECTION 1354. 49.45 (6m) (ar) 2. b. of the statutes is repealed.

7 *~~0210/4.21~~* SECTION 1355. 49.45 (6m) (ar) 2. d. of the statutes is repealed.

8 *~~0210/4.22~~* SECTION 1356. 49.45 (6m) (ar) 3. of the statutes is repealed.

9 *~~0210/4.23~~* SECTION 1357. 49.45 (6m) (ar) 5. of the statutes is repealed.

10 *~~0210/4.24~~* SECTION 1358. 49.45 (6m) (av) 1. of the statutes is renumbered
11 49.45 (6m) (av) and amended to read:

12 49.45 (6m) (av) The department shall calculate a payment rate for a facility by
13 applying the criteria set forth under pars. (ag) 1. to 5. and 7., (am) 1. to ~~5.~~ bm., 4., 5m.
14 and 6., and (ar) 1. to ~~5., 4., and 6.~~ to information from cost reports submitted by the
15 facility, as affected by any adjustment for ancillary services and materials under par.
16 (b).

17 *~~0210/4.25~~* SECTION 1359. 49.45 (6m) (av) 2. of the statutes is repealed.

18 *~~0210/4.26~~* SECTION 1360. 49.45 (6m) (av) 3. of the statutes is repealed.

19 *~~0210/4.27~~* SECTION 1361. 49.45 (6m) (av) 4. of the statutes is repealed.

20 *~~0210/4.28~~* SECTION 1362. 49.45 (6m) (av) 5. of the statutes is repealed.

21 *~~0210/4.29~~* SECTION 1363. 49.45 (6m) (av) 5m. of the statutes is repealed.

22 *~~0210/4.30~~* SECTION 1364. 49.45 (6m) (av) 6. of the statutes is repealed.

23 *~~0210/4.31~~* SECTION 1365. 49.45 (6m) (bc) of the statutes is repealed.

1 ***-1611/4.1*** SECTION 1366. 49.45 (6t) of the statutes, as affected by 2001
2 Wisconsin Act 16, is renumbered 49.45 (6t) (a), and 49.45 (6t) (a) (intro.), 1., 2. (intro.),
3 3. and 4., as renumbered, are amended to read:

4 49.45 (6t) (a) (intro.) From the appropriation under s. 20.435 (4) (o), for
5 reduction of operating deficits, as defined under criteria developed by the
6 department, incurred by a county department under s. 46.215, 46.22, 46.23, or 51.42
7 or by a local health department, as defined in s. 250.01 (4), for services provided
8 under s. 49.46 (2) (a) 4. d. and (b) 6. f., fm., j., k., and L., ~~and Lm.~~, 9., and 15., for case
9 management services under s. 49.46 (2) (b) 12. and for mental health day treatment
10 services for minors provided under the authorization under 42 USC 1396d (r) (5), the
11 department shall allocate moneys in each fiscal year to these county departments,
12 or local health departments as determined by the department, and shall perform all
13 of the following:

14 1. For the reduction of operating deficits incurred by the county departments
15 or local health departments, estimate the availability of federal medicaid funds that
16 may be matched to county, city, town, or village funds that are expended for costs in
17 excess of reimbursement for services provided under s. 49.46 (2) (a) 4. d. and (b) 6.
18 f., fm., j., k., and L., ~~and Lm.~~, 9., and 15., for case management services under s. 49.46
19 (2) (b) 12. and for mental health day treatment services for minors provided under
20 the authorization under 42 USC 1396d (r) (5).

21 2. (intro.) Based on the amount estimated to be available under ~~par. (a)~~ subd.
22 1., develop a method, which need not be promulgated as rules under ch. 227, to
23 distribute this allocation to the individual county departments under s. 46.215,
24 46.22, 46.23 or 51.42 or to local health departments that have incurred operating
25 deficits that shall include all of the following:

1 3. Except as provided in ~~par. (d)~~ subd. 4., distribute the allocation under the
2 distribution method that is developed.

3 4. If the federal department of health and human services approves for state
4 expenditure in a fiscal year amounts under s. 20.435 (4) (o) that result in a lesser
5 allocation amount than that allocated under this subsection or disallows use of the
6 allocation of federal medicaid funds under ~~par. (e)~~ subd. 3., reduce allocations under
7 this subsection and distribute on a prorated basis, as determined by the department.

 ***NOTE: This is reconciled s. 49.45 (6t) (intro.). It was removed and its treatment
added to LRB-1611. This section is affected by LRB-0030 and LRB-1611.

 ***NOTE: This is reconciled s. 49.45 (6t). This SECTION has been affected by drafts
with the following LRB numbers: LRB-0030/P1 and LRB-1611/3.

 ***NOTE: This is reconciled s. 49.45 (6t) (a). It was removed and its treatment
added to LRB-1611. This section is affected by LRB-0030 and LRB-1611.

8 ***-1611/4.2*** SECTION 1367. 49.45 (6t) (b) of the statutes is created to read:

9 49.45 (6t) (b) If 2003 Wisconsin Act (this act), section 9124 (8) (a) applies,
10 this subsection does not apply.

11 ***-0194/9.10*** SECTION 1368. 49.45 (6tt) of the statutes is created to read:

12 49.45 (6tt) DISTRIBUTIONS TO COUNTY DEPARTMENTS AND LOCAL HEALTH
13 DEPARTMENTS. From the appropriation under s. 20.435 (4) (w), the department may
14 in each fiscal year distribute moneys to county departments under s. 46.215, 46.22,
15 46.23, or 51.42 or to local health departments, as defined in s. 250.01 (4), in amounts
16 that are equal to the moneys received by these county departments or local health
17 departments in calendar year 2002 under s. 49.45 (6t), 2001 stats.

18 ***-1252/3.2*** SECTION 1369. 49.45 (6u) (am) (intro.) of the statutes is amended
19 to read:

20 49.45 (6u) (am) (intro.) Notwithstanding sub. (6m), ~~in state fiscal years in~~
21 ~~which less than \$1 in federal financial participation relating to facilities is received~~

1 ~~under 42 CFR 433.51~~, from the appropriations under s. 20.435 (4) (o), (w), and (wm),
2 for reduction of operating deficits, as defined under the methodology used by the
3 department in December, 2000, incurred by a facility that is established under s.
4 49.70 (1) or that is owned and operated by a city, village, or town, and as payment
5 to care management organizations, the department may not distribute to these
6 facilities and to care management organizations more than \$37,100,000 in each
7 fiscal year, as determined by the department. The total amount that a county
8 certifies under this subsection may not exceed 100% of otherwise-unreimbursed
9 care. In distributing funds under this subsection, the department shall perform all
10 of the following:

11 ***-1252/3.3* SECTION 1370.** 49.45 (6u) (bm) of the statutes is repealed.

12 ***-1760/2.9* SECTION 1371.** 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) ~~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.

19 ***-1760/2.10* SECTION 1372.** 49.45 (6x) (a) of the statutes is amended to read:

20 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the appropriations
21 appropriation accounts under s. 20.435 (4) (b), ~~(gp), (o), (r)~~, and (w), the department
22 shall distribute not more than \$4,748,000 in each fiscal year, to provide funds to an
23 essential access city hospital, except that the department may not allocate funds to

1 an essential access city hospital to the extent that the allocation would exceed any
2 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.

3 ***-1760/2.11* SECTION 1373.** 49.45 (6y) (a) of the statutes is amended to read:

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

14 ***-1760/2.12* SECTION 1374.** 49.45 (6y) (am) of the statutes is amended to read:

15 49.45 (6y) (am) Notwithstanding sub. (3) (e), from the ~~appropriations~~
16 appropriation accounts under s. 20.435 (4) (b), (h), (~~gp~~), (o), (~~r~~), and (w), the
17 department shall distribute funding in each fiscal year to provide supplemental
18 payments to hospitals that enter into contracts under s. 49.02 (2) with a county
19 having a population of 500,000 or more to provide health care services funded by a
20 relief block grant, as determined by the department, for hospital services that are not
21 in excess of the hospitals' customary charges for the services, as limited under 42
22 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.

1 ***-1760/2.13* SECTION 1375.** 49.45 (6z) (a) (intro.) of the statutes is amended
2 to read:

3 49.45 (6z) (a) (intro.) Notwithstanding sub. (3) (e), from the ~~appropriations~~
4 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), and (w), the department
5 shall distribute funding in each fiscal year to supplement payment for services to
6 hospitals that enter into a contract under s. 49.02 (2) to provide health care services
7 funded by a relief block grant under this chapter, if the department determines that
8 the hospitals serve a disproportionate number of low-income patients with special
9 needs. If no medical relief block grant under this chapter is awarded or if the
10 allocation of funds to such hospitals would exceed any limitation under 42 USC
11 1396b (i) (3), the department may distribute funds to hospitals that have not entered
12 into a contract under s. 49.02 (2). The department may not distribute funds under
13 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.

14 ***-1486/2.4* SECTION 1376.** 49.45 (6zb) of the statutes is created to read:
15 49.45 (6zb) SUPPLEMENTAL PAYMENTS TO HEALTH MAINTENANCE ORGANIZATIONS.
16 From the appropriation under s. 20.435 (4) (wr), the department shall distribute
17 funding in each fiscal year to a health maintenance organization, as defined under
18 s. 609.01 (2), to supplement payment to the health maintenance organization under
19 this section. The funding shall be to assist in meeting increasing costs, more intense
20 use of services by Medical Assistance recipients, and other reimbursement needs
21 that the department identifies.

22 ***-1613/P1.1* SECTION 1377.** 49.45 (7) (a) of the statutes is amended to read:

SECTION 1377

1 49.45 (7) (a) A recipient who is a patient in a public medical institution or an
2 accommodated person and has a monthly income exceeding the payment rates
3 established under 42 USC 1382 (e) may retain ~~\$45~~ \$30 unearned income or the
4 amount of any pension paid under ~~38 USC 3203 (f)~~ 38 USC 5503 (d), whichever is
5 greater, per month for personal needs. Except as provided in s. 49.455 (4) (a), the
6 recipient shall apply income in excess of ~~\$45~~ \$30 or the amount of any pension paid
7 under ~~38 USC 3203 (f)~~ 38 USC 5503 (d), whichever is greater, less any amount
8 deducted under rules promulgated by the department, toward the cost of care in the
9 facility.

10 *~~1760/2.14~~* SECTION 1378. 49.45 (8) (b) of the statutes is amended to read:

11 49.45 (8) (b) Reimbursement under s. 20.435 (4) (b), (~~gp~~), (o), (~~r~~), and (w) for
12 home health services provided by a certified home health agency or independent
13 nurse shall be made at the home health agency's or nurse's usual and customary fee
14 per patient care visit, subject to a maximum allowable fee per patient care visit that
15 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.

16 *~~1489/P2.2~~* SECTION 1379. 49.45 (18) (intro.) of the statutes is renumbered
17 49.45 (18) (ac) and amended to read:

18 49.45 (18) (ac) Except as provided in pars. (~~a~~) (am) to (d), and subject to par.
19 (ag), any person eligible for medical assistance under s. 49.46, 49.468, or 49.47 shall
20 pay up to the maximum amounts allowable under 42 CFR 447.53 to 447.58 for
21 purchases of services provided under s. 49.46 (2). The service provider shall collect
22 the specified or allowable copayment, coinsurance, or deductible, unless the service
23 provider determines that the cost of collecting the copayment, coinsurance, or

1 deductible exceeds the amount to be collected. The department shall reduce
2 payments to each provider by the amount of the specified or allowable copayment,
3 coinsurance, or deductible. No provider may deny care or services because the
4 recipient is unable to share costs, but an inability to share costs specified in this
5 subsection does not relieve the recipient of liability for these costs. ~~Liability under~~
6 ~~this subsection is limited by the following provisions:~~

7 *~~1489/P2.3~~* SECTION 1380. 49.45 (18) (a) of the statutes is renumbered 49.45
8 (18) (am).

9 *~~1489/P2.4~~* SECTION 1381. 49.45 (18) (ag) of the statutes is created to read:
10 49.45 (18) (ag) Except as provided in pars. (am), (b), and (c), and subject to par.
11 (d), a recipient specified in par. (ac) shall pay all of the following:

12 1. A copayment of \$1 for each prescription of a drug that bears only a generic
13 name, as defined in s. 450.12 (1) (b).

14 2. A copayment of \$3 for each prescription of a drug that bears a brand name,
15 as defined in s. 450.12 (1) (a).

16 *~~1489/P2.5~~* SECTION 1382. 49.45 (18) (d) of the statutes is amended to read:
17 49.45 (18) (d) No person who designates a pharmacy or pharmacist as his or
18 her sole provider of prescription drugs and who so uses that pharmacy or pharmacist
19 is liable under this subsection for more than \$5 ~~\$12~~ per month for prescription drugs
20 received.

21 *~~0190/7.17~~* SECTION 1383. 49.45 (19) (bm) of the statutes is amended to read:
22 49.45 (19) (bm) The department or the county department under s. 46.215 or
23 46.22 shall notify applicants of the requirements of this subsection at the time of
24 application.

1 ***-1760/2.15* SECTION 1384.** 49.45 (24m) (intro.) of the statutes is amended to
2 read:

3 **49.45 (24m)** HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)
4 From the appropriations appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r),
5 and (w), in order to test the feasibility of instituting a system of reimbursement for
6 providers of home health care and personal care services for medical assistance
7 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.

8 ***-0360/2.1* SECTION 1385.** 49.45 (25) (am) (intro.) of the statutes is amended
9 to read:

10 **49.45 (25) (am) (intro.)** Except as provided under pars. (be) ~~and~~, (bg), and (bj)
11 and sub. (24), case management services under s. 49.46 (2) (b) 9. and (bm) are
12 reimbursable under ~~medical assistance~~ Medical Assistance only if provided to a
13 ~~medical assistance~~ Medical Assistance beneficiary who receives case management
14 services from or through a certified case management provider in a county, city,
15 village, or town that elects, under par. (b), to make the services available and who
16 meets at least one of the following conditions:

17 ***-0360/2.2* SECTION 1386.** 49.45 (25) (bj) of the statutes is created to read:

18 **49.45 (25) (bj)** The department of corrections may elect to provide case
19 management services under this subsection to persons who are under the
20 supervision of that department under s. 938.183, 938.34 (4h), (4m), or (4n), or
21 938.357 (4), who are Medical Assistance beneficiaries, and who meet one or more of
22 the conditions specified in par. (am). The amount of the allowable charges for those
23 services under the Medical Assistance program that is not provided by the federal

1 government shall be paid from the appropriation account under s. 20.410 (3) (hm),
2 (ho), or (hr).

3 ***-0360/2.3* SECTION 1387.** 49.45 (25) (c) of the statutes is amended to read:

4 49.45 (25) (c) Except as provided in pars. (b), (be) ~~and~~, (bg), and (bj), the
5 department shall reimburse a provider of case management services under this
6 subsection only for the amount of the allowable charges for those services under the
7 ~~medical assistance~~ Medical Assistance program that is provided by the federal
8 government.

9 ***-0030/1.1* SECTION 1388.** 49.45 (30e) of the statutes is repealed.

10 ***-0209/2.8* SECTION 1389.** 49.45 (30m) of the statutes is renumbered 49.45
11 (30m) (a) (intro.) and amended to read:

12 49.45 (30m) (a) (intro.) A county shall provide the portion of the payment that
13 is not provided by the federal government for all of the following services under s.
14 51.06 (1m) (d) to individuals with developmental disability who are eligible for
15 medical assistance ~~that is not provided by the federal government.~~

16 ***-0209/2.9* SECTION 1390.** 49.45 (30m) (a) 1. of the statutes is created to read:

17 49.45 (30m) (a) 1. Services under s. 51.06 (1m) (d).

18 ***-0209/2.10* SECTION 1391.** 49.45 (30m) (a) 2. of the statutes is created to read:

19 49.45 (30m) (a) 2. Services in an intermediate care facility for the mentally
20 retarded, as defined in s. 46.278 (1m) (am), other than a state center for the
21 developmentally disabled.

22 ***-0209/2.11* SECTION 1392.** 49.45 (30m) (a) 3. of the statutes is created to read:

23 49.45 (30m) (a) 3. Services for which payment is permitted under sub. (6c) (d)
24 2. that are provided in a nursing facility, as defined in s. 46.279 (1) (c).

25 ***-0209/2.12* SECTION 1393.** 49.45 (30m) (b) of the statutes is created to read:

SECTION 1393

1 49.45 (30m) (b) No payment under this section may be made for services
2 specified under par. (a) unless the individual who receives the services is protectively
3 placed under s. 55.06 (9) (a) or is placed under an emergency placement under s.
4 55.06 (11) (a) or a temporary placement under s. 55.06 (11) (c).

5 *-0209/2.13* SECTION 1394. 49.45 (30m) (c) of the statutes is created to read:

6 49.45 (30m) (c) No payment under this section may be made for services
7 specified under par. (a) 2. or 3. that are provided to an individual who was placed in
8 or admitted to an intermediate facility, as defined in s. 46.279 (1) (b), or nursing
9 facility, as defined in s. 46.279 (1) (c), unless one of the following applies:

10 1. Any placement or admission that is made after March 31, 2004, complied
11 with the requirements of s. 46.279.

12 2. For an individual who was protectively placed under ch. 55 at any time, any
13 annual review that is conducted under s. 55.06 (10) (a) 1. after March 31, 2004,
14 complies with the requirements of s. 55.06 (10) (a) 2.

15 *-0190/7.18* SECTION 1395. 49.45 (36) of the statutes is amended to read:

16 49.45 (36) HOMELESS BENEFICIARIES. ~~A~~ The department or a county department
17 under s. 46.215, 46.22, or 46.23 may not place the word “homeless” on the medical
18 assistance identification card of any person who is determined to be eligible for
19 medical assistance benefits and who is homeless.

20 *-0194/9.11* SECTION 1396. 49.45 (39) (b) 1. of the statutes is amended to read:

21 49.45 (39) (b) 1. ‘Payment for school medical services.’ If a school district or a
22 cooperative educational service agency elects to provide school medical services and
23 meets all requirements under par. (c), the department shall reimburse the school
24 district or the cooperative educational service agency for 60% of the federal share of
25 allowable charges for the school medical services that it provides and, as specified

1 in subd. 2., for allowable administrative costs. If the Wisconsin Center for the Blind
2 and Visually Impaired or the Wisconsin Educational Services Program for the Deaf
3 and Hard of Hearing elects to provide school medical services and meets all
4 requirements under par. (c), the department shall reimburse the department of
5 public instruction for 60% of the federal share of allowable charges for the school
6 medical services that the Wisconsin Center for the Blind and Visually Impaired or
7 the Wisconsin Educational Services Program for the Deaf and Hard of Hearing
8 provides and, as specified in subd. 2., for allowable administrative costs. A school
9 district, cooperative educational service agency, the Wisconsin Center for the Blind
10 and Visually Impaired or the Wisconsin Educational Services Program for the Deaf
11 and Hard of Hearing may submit, and the department shall allow, claims for common
12 carrier transportation costs as a school medical service unless the department
13 receives notice from the federal health care financing administration that, under a
14 change in federal policy, the claims are not allowed. If the department receives the
15 notice, a school district, cooperative educational service agency, the Wisconsin
16 Center for the Blind and Visually Impaired, or the Wisconsin Educational Services
17 Program for the Deaf and Hard of Hearing may submit, and the department shall
18 allow, unreimbursed claims for common carrier transportation costs incurred before
19 the date of the change in federal policy. The department shall promulgate rules
20 establishing a methodology for making reimbursements under this paragraph. All
21 Except as provided in subd. 1m., all other expenses for the school medical services
22 provided by a school district or a cooperative educational service agency shall be paid
23 for by the school district or the cooperative educational service agency with funds
24 received from state or local taxes. The school district, the Wisconsin Center for the
25 Blind and Visually Impaired, the Wisconsin Educational Services Program for the

SECTION 1396

1 Deaf and Hard of Hearing, or the cooperative educational service agency shall
2 comply with all requirements of the federal department of health and human
3 services for receiving federal financial participation.

4 *–0194/9.12* SECTION 1397. 49.45 (39) (b) 1m. of the statutes is created to read:

5 49.45 (39) (b) 1m. ‘Supplementary payment for school medical services.’ In
6 addition to the reimbursement the department provides under subd. 1. to a school
7 district or cooperative educational service agency for school medical services, the
8 department may make supplementary payments from the appropriation accounts
9 under s. 20.435 (4) (b) and (o). The total of the supplementary payments and
10 allowable charges paid under subd. 1. may not exceed applicable limitations on
11 payments under 42 USC 1396a (a) (30) (A).

12 *–0194/9.13* SECTION 1398. 49.45 (39) (b) 2. of the statutes is amended to read:

13 49.45 (39) (b) 2. ‘Payment for school medical services administrative costs.’ The
14 department shall reimburse a school district or a cooperative educational service
15 agency specified under ~~subd. 1.~~ subds. 1. and 1m. and shall reimburse the
16 department of public instruction on behalf of the Wisconsin Center for the Blind and
17 Visually Impaired or the Wisconsin Educational Services Program for the Deaf and
18 Hard of Hearing for 90% of the federal share of allowable administrative costs, using
19 time studies, beginning in fiscal year 1999–2000. A school district or a cooperative
20 educational service agency may submit, and the department of health and family
21 services shall allow, claims for administrative costs incurred during the period that
22 is up to 24 months before the date of the claim, if allowable under federal law.

23 *–1762/P2.1* SECTION 1399. 49.45 (49m) of the statutes is created to read:

24 49.45 (49m) PRESCRIPTION DRUG COST CONTROLS; PURCHASING AGREEMENTS. (a)

25 In this section:

- 1 1. “Brand name” has the meaning given in s. 450.12 (1) (a).
2 2. “Generic name” has the meaning given in s. 450.12 (1) (b).
3 3. “Prescription drug” has the meaning given in s. 450.01 (20).

4 (b) The department may enter into a multi-state purchasing agreement with
5 another state or a purchasing agreement with a purchaser of prescription drugs if
6 the other state or purchaser agrees to participate in one or more of the activities
7 specified in par. (c) 1. to 5.

8 (c) The department may design and implement a program to reduce the cost
9 of prescription drugs and to maintain high quality in prescription drug therapies,
10 which shall include all of the following:

11 1. A list of the prescription drugs that are included as a benefit under s. 49.46
12 (2) (b) 6. h. that identifies preferred choices within therapeutic classes and includes
13 prescription drugs that bear only generic names.

14 2. Establishing supplemental rebates under agreements with prescription
15 drug manufacturers for prescription drugs provided to recipients under Medical
16 Assistance and Badger Care and to eligible persons under s. 49.688 and, if it is
17 possible to implement the program without adversely affecting supplemental
18 rebates for Medical Assistance, Badger Care, and prescription drug assistance under
19 s. 49.688, to beneficiaries of participants under par. (b).

20 3. Utilization management and fraud and abuse controls.

21 4. Any other activity to reduce the cost of or expenditures for prescription drugs
22 and maintain high quality in prescription drug therapies.

23 (d) The department may enter into a contract with an entity to perform any of
24 the duties and exercise any of the powers of the department under this subsection.

25 *-0781/P3.1* SECTION 1400. 49.453 (1) (ak) of the statutes is created to read:

1 49.453 (1) (ak) “Consumer price index” has the meaning given in s. 49.455 (1)

2 (b).

3 ***-0781/P3.2* SECTION 1401.** 49.453 (5) of the statutes is amended to read:

4 49.453 (5) CARE OR PERSONAL SERVICES. For the purposes of sub. (2), whenever
5 a covered individual or his or her spouse, or another person acting on behalf of the
6 covered individual or his or her spouse, transfers assets to a relative as payment for
7 care or personal services that the relative provides to the covered individual, the
8 covered individual or his or her spouse transfers assets for less than fair market
9 value unless the care or services directly benefit the covered individual, the amount
10 of the payment does not exceed reasonable compensation for the care or services that
11 the relative performs and, if the amount of the payment in any year exceeds 10% of
12 ~~the community spouse resource allowance limit specified in s. 49.455 (6) (b) 1.~~
13 \$12,000 increased by the same percentage increase as the percentage increase in the
14 consumer price index between September 1988 and September of the year before the
15 calendar year in which the care or services for which the payment was made were
16 performed, the agreement to pay the relative is specified in a notarized written
17 agreement that exists at the time that the relative performs the care or services.

18 ***-0781/P3.3* SECTION 1402.** 49.455 (5) (b) of the statutes is amended to read:

19 49.455 (5) (b) Notwithstanding ch. 766, in determining the resources of an
20 institutionalized spouse at the time of application for medical assistance, the amount
21 of resources considered to be available to the institutionalized spouse equals the
22 value of all of the resources held by either or both spouses minus the greatest of the
23 amounts determined under sub. (6) (b) 1. 1m. to 4.

24 ***-0781/P3.4* SECTION 1403.** 49.455 (6) (a) of the statutes is amended to read:

1 49.455 (6) (a) Notwithstanding s. 49.453 (2), an institutionalized spouse may
2 transfer an amount of resources ~~equal to~~ not exceeding the community spouse
3 resource allowance determined under par. (b) to, or for the sole benefit of, the
4 community spouse without becoming ineligible for medical assistance for the period
5 of ineligibility under s. 49.453 (3) as a result of the transfer. The institutionalized
6 spouse shall make the transfer as soon as practicable after the initial determination
7 of eligibility for medical assistance, taking into account the amount of time that is
8 necessary to obtain a court order under par. (c).

9 *~~0781/P3.5~~* SECTION 1404. 49.455 (6) (b) (intro.) of the statutes is amended
10 to read:

11 49.455 (6) (b) (intro.) The community spouse resource allowance equals the
12 ~~amount by which the amount of resources otherwise available to the community~~
13 ~~spouse is exceeded by~~ the greatest of the following:

14 *~~0781/P3.6~~* SECTION 1405. 49.455 (6) (b) 1. of the statutes is repealed.

15 *~~0781/P3.7~~* SECTION 1406. 49.455 (6) (b) 2. of the statutes is repealed.

16 *~~0209/2.14~~* SECTION 1407. 49.46 (2) (a) 4. c. of the statutes is amended to
17 read:

18 49.46 (2) (a) 4. c. Skilled nursing home services other than in an institution for
19 mental diseases, except as limited under s. 49.45 (6c) and (30m) (b) and (c).

20 *~~0209/2.15~~* SECTION 1408. 49.46 (2) (b) 6. a. of the statutes is amended to
21 read:

22 49.46 (2) (b) 6. a. Intermediate care facility services other than in an institution
23 for mental diseases, except as limited under s. 49.45 (30m) (b) and (c).

24 *~~0030/1.2~~* SECTION 1409. 49.46 (2) (b) 6. Lm. of the statutes is repealed.

25 *~~1760/2.16~~* SECTION 1410. 49.472 (6) (a) of the statutes is amended to read:

SECTION 1410

1 49.472 (6) (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
2 under s. 20.435 (4) (b), (gp), (r), or (w), the department shall, on the part of an
3 individual who is eligible for medical assistance under sub. (3), pay premiums for or
4 purchase individual coverage offered by the individual's employer if the department
5 determines that paying the premiums for or purchasing the coverage will not be more
6 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.

7 ***-1760/2.17* SECTION 1411.** 49.472 (6) (b) of the statutes is amended to read:

8 49.472 (6) (b) If federal financial participation is available, from the
9 appropriation account under s. 20.435 (4) (b), (gp), (r), or (w), the department may
10 pay medicare Part A and Part B premiums for individuals who are eligible for
11 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.

12 ***-0033/P2.1* SECTION 1412.** 49.473 (title) of the statutes is amended to read:

13 **49.473 (title) Medical assistance; women diagnosed with breast or**
14 **cervical cancer or precancerous conditions.**

15 ***-0033/P2.2* SECTION 1413.** 49.473 (2) (c) of the statutes is amended to read:

16 49.473 (2) (c) The woman is not eligible for health care coverage that qualifies
17 as creditable coverage in 42 USC 300gg (c), excluding the coverage specified in 42
18 USC 300gg (c) (1) (F).

19 ***-0033/P2.3* SECTION 1414.** 49.473 (2) (e) of the statutes is amended to read:

20 49.473 (2) (e) The woman requires treatment for breast or cervical cancer or
21 for a precancerous condition of the breast or cervix.

22 ***-1760/2.18* SECTION 1415.** 49.473 (5) of the statutes is amended to read:

1 49.473 (5) The department shall audit and pay, from the appropriation
2 accounts under s. 20.435 (4) (b), (gp), and (o), and (r), allowable charges to a provider
3 who is certified under s. 49.45 (2) (a) 11. for medical assistance on behalf of a woman
4 who meets the requirements under sub. (2) for all benefits and services specified
5 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.

6 ***-0033/P2.4*** SECTION 1416. 49.473 (6) (b) of the statutes is amended to read:

7 49.473 (6) (b) Inform the woman at the ~~of~~ time of the determination that she
8 is required to apply to the department or a county department for medical assistance
9 no later than the last day of the month following the month in which the qualified
10 entity determines that the woman is eligible for medical assistance.

11 ***-1824/6.15*** SECTION 1417. 49.496 (3) (f) of the statutes is amended to read:

12 49.496 (3) (f) The department, with the advice and consent of the attorney
13 general, ~~may contract with or employ~~ retain an attorney to probate estates to recover
14 under this subsection the costs of care.

15 ***-0190/7.19*** SECTION 1418. 49.496 (4) of the statutes is amended to read:

16 49.496 (4) ADMINISTRATION. The department may require a county department
17 under s. 46.215, 46.22, or 46.23 or the governing body of a federally recognized
18 American Indian tribe administering medical assistance to gather and provide the
19 department with information needed to recover medical assistance under this
20 section. The department shall pay to a county department or tribal governing body
21 an amount equal to 5% of the recovery collected by the department relating to a
22 beneficiary for whom the county department or tribal governing body made the last
23 determination of medical assistance eligibility. A county department or tribal

1 governing body may use funds received under this subsection only to pay costs
2 incurred under this subsection and, if any amount remains, to pay for improvements
3 to functions required under s. 49.33 49.78 (2). The department may withhold
4 payments under this subsection for failure to comply with the department's
5 requirements under this subsection. The department shall treat payments made
6 under this subsection as costs of administration of the ~~medical assistance~~ Medical
7 Assistance program.

8 *~~0529/4.101~~* SECTION 1419. 49.498 (16) (g) of the statutes is amended to read:

9 49.498 (16) (g) All forfeitures, penalty assessments, and interest, if any, shall
10 be paid to the department within 10 days of receipt of notice of assessment or, if the
11 forfeiture, penalty assessment, and interest, if any, are contested under par. (f),
12 within 10 days of receipt of the final decision after exhaustion of administrative
13 review, unless the final decision is appealed and the order is stayed by court order
14 under sub. (19) (b). The department shall remit all forfeitures paid to the state
15 ~~treasurer~~ secretary of administration for deposit in the school fund. The department
16 shall deposit all penalty assessments and interest in the appropriation under s.
17 20.435 (6) (g).

18 *~~0029/2.1~~* SECTION 1420. 49.665 (2) (title) of the statutes is amended to read:

19 49.665 (2) (title) ~~WAIVER~~ WAIVERS.

20 *~~0029/2.2~~* SECTION 1421. 49.665 (2) of the statutes is renumbered 49.665 (2)
21 (a) and amended to read:

22 49.665 (2) (a) The department of health and family services shall request a
23 waiver from the secretary of the federal department of health and human services
24 to permit the department of health and family services to implement, beginning not
25 later than July 1, 1998, or the effective date of the waiver, whichever is later, a health

1 care program under this section. If a waiver that is consistent with all of the
2 provisions of this section, excluding sub. (4) (a) 3m., is granted and in effect, the
3 department of health and family services shall implement the program under this
4 section. The department of health and family services may not implement the
5 program under this section unless a waiver that is consistent with all of the
6 provisions of this section, excluding sub. (4) (a) 3m., is granted and in effect.

7 ***-0029/2.3* SECTION 1422.** 49.665 (2) (b) of the statutes is created to read:

8 49.665 (2) (b) If the department of health and family services determines that
9 it needs a waiver to require the verification specified in sub. (4) (a) 3m., the
10 department shall request a waiver from the secretary of the federal department of
11 health and human services and may not implement the verification requirement
12 under sub. (4) (a) 3m. unless the waiver is granted. If a waiver is required and is
13 granted, the department of health and family services may implement the
14 verification requirement under sub. (4) (a) 3m. as appropriate. If a waiver is not
15 required, the department of health and family services may require the verification
16 specified in sub. (4) (a) 3m. for eligibility determinations and annual review
17 eligibility determinations made by the department, beginning on January 1, 2004.

18 ***-0029/2.4* SECTION 1423.** 49.665 (4) (am) 3m. of the statutes is created to
19 read:

20 49.665 (4) (am) 3m. Each member of the child's household who is employed
21 provides verification from his or her employer, in the manner specified by the
22 department, of his or her earnings, of whether the employer provides health care
23 coverage for which the child is eligible, and of the amount that the employer pays,
24 if any, towards the cost of the health care coverage, excluding any deductibles or
25 copayments required under the coverage.

1 *-1486/2.5* SECTION 1424. 49.665 (4m) of the statutes is created to read:

2 49.665 (4m) SUPPLEMENTAL PAYMENTS TO HEALTH MAINTENANCE ORGANIZATIONS.

3 From the appropriation under s. 20.435 (4) (wr), the department shall distribute
4 funding in each fiscal year to a health maintenance organization, as defined under
5 s. 609.01 (2), to supplement payment to the health maintenance organization under
6 this section. The funding shall be to assist in meeting increasing costs, more intense
7 use of services by Badger Care recipients, and other reimbursement needs that the
8 department identifies.

9 *-1489/P2.6* SECTION 1425. 49.665 (5) (a) of the statutes is renumbered
10 49.665 (5) (ag) and amended to read:

11 49.665 (5) (ag) Except as provided in pars. (am), (b), and (bm), a family, or child
12 who does not reside with his or her parent, who receives health care coverage under
13 this section shall pay a percentage of the cost of that coverage in accordance with a
14 schedule established by the department by rule. If the schedule established by the
15 department requires a family, or child who does not reside with his or her parent, to
16 contribute more than 3% of the family's or child's income towards the cost of the
17 health care coverage provided under this section, the department shall submit the
18 schedule to the joint committee on finance for review and approval of the schedule.
19 If the cochairpersons of the joint committee on finance do not notify the department
20 within 14 working days after the date of the department's submittal of the schedule
21 that the committee has scheduled a meeting to review the schedule, the department
22 may implement the schedule. If, within 14 days after the date of the department's
23 submittal of the schedule, the cochairpersons of the committee notify the department
24 that the committee has scheduled a meeting to review the schedule, the department
25 may not require a family, or child who does not reside with his or her parent, to

1 contribute more than 3% of the family's or child's income unless the joint committee
2 on finance approves the schedule. The joint committee on finance may not approve
3 and the department may not implement a schedule that requires a family or child
4 to contribute, including the amounts required under par. (am), more than 3.5% of the
5 family's or child's income towards the cost of the health care coverage provided under
6 this section.

7 ***-1489/P2.7* SECTION 1426.** 49.665 (5) (ac) of the statutes is created to read:

8 49.665 (5) (ac) In this subsection, "cost" means total cost-sharing charges,
9 including premiums, copayments, coinsurance, deductibles, enrollment fees, and
10 any other cost-sharing charges.

11 ***-1489/P2.8* SECTION 1427.** 49.665 (5) (ag) of the statutes, as affected by 2003
12 Wisconsin Act (this act), is amended to read:

13 49.665 (5) (ag) Except as provided in pars. (am), (b), and (bm), a family, or child
14 who does not reside with his or her parent, who receives health care coverage under
15 this section shall pay a percentage of the cost of that coverage in accordance with a
16 schedule established by the department by rule. ~~If the schedule established by the~~
17 ~~department requires a family, or child who does not reside with his or her parent, to~~
18 ~~contribute more than 3% of the family's or child's income towards the cost of the~~
19 ~~health care coverage provided under this section, the department shall submit the~~
20 ~~schedule to the joint committee on finance for review and approval of the schedule.~~
21 ~~If the cochairpersons of the joint committee on finance do not notify the department~~
22 ~~within 14 working days after the date of the department's submittal of the schedule~~
23 ~~that the committee has scheduled a meeting to review the schedule, the department~~
24 ~~may implement the schedule. If, within 14 days after the date of the department's~~
25 ~~submittal of the schedule, the cochairpersons of the committee notify the department~~

1 that the committee has scheduled a meeting to review the schedule, the department
2 may not require a family, or child who does not reside with his or her parent, to
3 contribute more than 3% of the family's or child's income unless the joint committee
4 on finance approves the schedule. The joint committee on finance may not approve
5 and the The department may not establish or implement a schedule that requires a
6 family or child to contribute, including the amounts required under par. (am), more
7 than 3.5% 5% of the family's or child's income towards the cost of the health care
8 coverage provided under this section.

9 *~~1489/P2.9~~* SECTION 1428. 49.665 (5) (am) of the statutes is created to read:

10 49.665 (5) (am) Except as provided in pars. (b) and (bm), a child or family
11 member who receives health care coverage under this section shall pay the following
12 cost-sharing amounts:

13 1. A copayment of \$1 for each prescription of a drug that bears only a generic
14 name, as defined in s. 450.12 (1) (b).

15 2. A copayment of \$3 for each prescription of a drug that bears a brand name,
16 as defined in s. 450.12 (1) (a).

17 *~~0032/P2.1~~* SECTION 1429. 49.68 (3) (a) of the statutes is amended to read:

18 49.68 (3) (a) ~~Any~~ Subject to s. 49.687 (1m), any permanent resident of this state
19 who suffers from chronic renal disease may be accepted into the dialysis treatment
20 phase of the renal disease control program if the resident meets standards set by rule
21 under sub. (2) and s. 49.687.

22 *~~0032/P2.2~~* SECTION 1430. 49.68 (3) (d) 1. of the statutes is amended to read:

23 49.68 (3) (d) 1. No aid may be granted under this subsection unless the recipient
24 has no other form of aid available from the federal medicare program ~~or~~, from private
25 health, accident, sickness, medical, and hospital insurance coverage, or from other

1 health care coverage specified by rule under s. 49.687 (1m) (b). If insufficient aid is
2 available from other sources and if the recipient has paid an amount equal to the
3 annual medicare deductible amount specified in subd. 2., the state shall pay the
4 difference in cost to a qualified recipient. If at any time sufficient federal or private
5 insurance aid or other health care coverage becomes available during the treatment
6 period, state aid under this subsection shall be terminated or appropriately reduced.
7 Any patient who is eligible for the federal medicare program shall register and pay
8 the premium for medicare medical insurance coverage where permitted, and shall
9 pay an amount equal to the annual medicare deductible amounts required under 42
10 USC 1395e and 1395L (b), prior to becoming eligible for state aid under this
11 subsection.

12 ***-0032/P2.3* SECTION 1431.** 49.68 (3) (d) 3. of the statutes is created to read:

13 49.68 (3) (d) 3. No payment shall be made under this subsection for any portion
14 of medical treatment costs or other expenses that are payable under any state,
15 federal, or other health care coverage program, including a health care coverage
16 program specified by rule under s. 49.687 (1m) (b), or under any grant, contract, or
17 other contractual arrangement.

18 ***-0032/P2.4* SECTION 1432.** 49.68 (3) (e) of the statutes is amended to read:

19 49.68 (3) (e) State aids for services provided under this section ~~shall be equal~~
20 ~~to~~ may not exceed the allowable charges under the federal medicare program. In no
21 case shall state rates for individual service elements exceed the federally defined
22 allowable costs. The rate of charges for services not covered by public and private
23 insurance shall not exceed the reasonable charges as established by medicare fee
24 determination procedures. A person that provides to a patient a service for which
25 aid is provided under this section shall accept the amount paid under this section for

1 the service as payment in full and may not bill the patient for any amount by which
2 the charge for the service exceeds the amount paid for the service under this section.

3 The state may not pay for the cost of travel, lodging, or meals for persons who must
4 travel to receive inpatient and outpatient dialysis treatment for kidney disease. This
5 paragraph shall not apply to donor related costs as defined in par. (b).

6 ***-1824/6.16* SECTION 1433.** 49.682 (6) of the statutes is amended to read:

7 49.682 (6) The department, with the advice and consent of the attorney
8 general, may ~~contract with or employ~~ retain an attorney to probate estates to recover
9 under this section the costs of care.

10 ***-0032/P2.5* SECTION 1434.** 49.683 (1) of the statutes is amended to read:

11 49.683 (1) The Subject to s. 49.687 (1m), the department may provide financial
12 assistance for costs of medical care of persons over the age of 18 years with the
13 diagnosis of cystic fibrosis who meet financial requirements established by the
14 department by rule under s. 49.687 (1).

15 ***-0032/P2.6* SECTION 1435.** 49.683 (3) of the statutes is created to read:

16 49.683 (3) No payment shall be made under this section for any portion of
17 medical care costs that are payable under any state, federal, or other health care
18 coverage program, including a health care coverage program specified by rule under
19 s. 49.687 (1m) (b), or under any grant, contract, or other contractual arrangement.

20 ***-0032/P2.7* SECTION 1436.** 49.685 (6) (b) of the statutes is amended to read:

21 49.685 (6) (b) Reimbursement shall not be made under this section for any
22 blood products or supplies ~~which~~ that are not purchased from or provided by a
23 comprehensive hemophilia treatment center, or a source approved by the treatment
24 center. Reimbursement shall not be made under this section for any portion of the
25 costs of blood products or supplies ~~which~~ that are payable under any other state or,

1 federal ~~program, or other health care coverage program, including a health care~~
2 ~~coverage program specified by rule under s. 49.687 (1m) (b), or under any grant,~~
3 ~~contract and any, or other contractual arrangement.~~

4 ***-0032/P2.8*** SECTION 1437. 49.687 (title) of the statutes is amended to read:

5 **49.687 (title) Disease aids; patient requirements; rebate agreements;**
6 **cost containment.**

7 ***-1303/P1.1*** SECTION 1438. 49.687 (1) of the statutes is amended to read:

8 49.687 (1) The department shall promulgate rules that require a person who
9 is eligible for benefits under s. 49.68, 49.683, or 49.685 and whose current estimated
10 total family income exceeds specified limits for the current year is at or above 200%
11 of the poverty line to obligate or expend specified portions of the income for medical
12 care for treatment of kidney disease, cystic fibrosis, or hemophilia before receiving
13 benefits under s. 49.68, 49.683, or 49.685. The rules shall require a person to pay 1%
14 of his or her total family income for the cost of medical treatment covered under s.
15 49.68, 49.683, or 49.685 if that income is from 300% to 325% of the federal poverty
16 line, 1.75% if that income is more than 325% but not more than 350% of the federal
17 poverty line, 2.5% if that income is more than 350% but not more than 375% of the
18 federal poverty line, 3.25% if that income is more than 375% but not more than 400%
19 of the federal poverty line, and 4.25% if that income is more than 400% of the federal
20 poverty line.

21 ***-0032/P2.9*** SECTION 1439. 49.687 (1m) of the statutes is created to read:

22 49.687 (1m) (a) A person is not eligible to receive benefits under s. 49.68,
23 49.683, or 49.685 unless, before the person applies for benefits under s. 49.68, 49.683,
24 or 49.685, the person first applies for benefits under all other health care coverage

1 programs specified by the department by rule under par. (b) for which the person
2 reasonably may be eligible.

3 (b) The department shall promulgate rules that specify other health care
4 coverage programs for which a person must apply before applying for benefits under
5 s. 49.68, 49.683, or 49.685. The programs specified by rule must include the Medical
6 Assistance program under subch. IV, the Badger Care health care program under s.
7 49.665, and the prescription drug assistance for elderly persons program under s.
8 49.688.

9 (c) Using the procedure under s. 227.24, the department may promulgate rules
10 under par. (b) for the period before the effective date of any permanent rules
11 promulgated under par. (b), but not to exceed the period authorized under s. 227.24
12 (1) (c) and (2). Notwithstanding s. 227.24 (1) (a), (2) (b), and (3), the department is
13 not required to provide evidence that promulgating a rule under par. (b) as an
14 emergency rule is necessary for the preservation of the public peace, health, safety,
15 or welfare and is not required to make a finding of emergency for promulgating a rule
16 under par. (b) as an emergency rule.

17 ***-1303/P1.2* SECTION 1440.** 49.687 (2) of the statutes is amended to read:

18 49.687 (2) The department shall develop and implement a sliding scale of
19 patient liability for kidney disease aid under s. 49.68, cystic fibrosis aid under s.
20 49.683, and hemophilia treatment under s. 49.685, based on the patient's ability to
21 pay for treatment. ~~To~~ The department shall continuously review the sliding scale for
22 patient liability and revise it as needed to ensure that the needs for treatment of
23 patients with lower incomes receive priority within the availability of funds amounts
24 budgeted under s. 20.435 (4) (e) and (je), ~~the department shall revise the sliding scale~~
25 ~~for patient liability by January 1, 1994, and shall, every 3 years thereafter by~~

1 ~~January 1, review and, if necessary, revise the sliding scale~~ are sufficient to cover
2 treatment costs.

3 ***-1303/P1.3* SECTION 1441.** 49.687 (2m) of the statutes is created to read:

4 **49.687 (2m)** If a pharmacy directly bills the department or an entity with
5 which the department contracts for a drug supplied to a person receiving benefits
6 under s. 49.68, 49.683, or 49.685 and prescribed for treatment covered under s. 49.68,
7 49.683, or 49.685, the person shall pay a \$5 copayment amount for each such generic
8 drug and a \$15 copayment amount for each such brand name drug.

9 ***-0529/4.102* SECTION 1442.** 49.687 (3) (a) of the statutes is amended to read:

10 **49.687 (3) (a)** That, as a condition of coverage for prescription drugs of a
11 manufacturer under s. 49.68, 49.683, or 49.685, the manufacturer shall make rebate
12 payments for each prescription drug of the manufacturer that is prescribed for and
13 purchased by persons who meet eligibility criteria under s. 49.68, 49.683, or 49.685,
14 to the ~~state treasurer~~ secretary of administration to be credited to the appropriation
15 under s. 20.435 (4) (je), each calendar quarter or according to a schedule established
16 by the department.

17 ***-0032/P2.10* SECTION 1443.** 49.687 (4) of the statutes is created to read:

18 **49.687 (4)** The department may adopt managed care methods of cost
19 containment for the programs under ss. 49.68, 49.683, and 49.685.

20 ***-1485/5.1* SECTION 1444.** 49.688 (1) (e) of the statutes is amended to read:

21 **49.688 (1) (e)** "Program payment rate" means the rate of payment made for the
22 identical drug specified under s. 49.46 (2) (b) 6. h., ~~plus 5%~~, plus a dispensing fee that
23 is equal to the dispensing fee permitted to be charged for prescription drugs for which
24 coverage is provided under s. 49.46 (2) (b) 6. h.

1 ***-1485/5.2* SECTION 1445.** 49.688 (3) (a) of the statutes is renumbered 49.688
2 (3) (a) (intro.) and amended to read:

3 49.688 (3) (a) (intro.) For each 12-month benefit period, a program enrollment
4 fee of \$20. that is based on the percentage that a person's annual household income,
5 as determined by the department, is of the federal poverty line for a family the size
6 of the person's eligible family, as follows:

7 ***-1485/5.3* SECTION 1446.** 49.688 (3) (a) 1. of the statutes is created to read:
8 49.688 (3) (a) 1. Two hundred percent or less, \$25.

9 ***-1485/5.4* SECTION 1447.** 49.688 (3) (a) 2. of the statutes is created to read:
10 49.688 (3) (a) 2. More than 200%, \$30.

11 ***-1485/5.5* SECTION 1448.** 49.688 (3) (b) 1. of the statutes is renumbered
12 49.688 (3) (b) 1. (intro.) and amended to read:

13 49.688 (3) (b) 1. (intro.) For each 12-month benefit period, for a person specified
14 in sub. (2) (a), a deductible for prescription drugs of \$500, ~~except that a person whose~~
15 that is based on the percentage that a person's annual household income, as
16 determined by the department, is 160% or less of the federal poverty line for a family
17 the size of the person's eligible family pays no deductible., as follows:

18 ***-1485/5.6* SECTION 1449.** 49.688 (3) (b) 1. a. of the statutes is created to read:
19 49.688 (3) (b) 1. a. One hundred sixty percent or less, no deductible.

20 ***-1485/5.7* SECTION 1450.** 49.688 (3) (b) 1. b. of the statutes is created to read:
21 49.688 (3) (b) 1. b. More than 160%, but not more than 200%, \$500.

22 ***-1485/5.8* SECTION 1451.** 49.688 (3) (b) 1. c. of the statutes is created to read:
23 49.688 (3) (b) 1. c. More than 200%, but not more than 240%, \$750.

24 ***-1485/5.9* SECTION 1452.** 49.688 (3) (b) 2. b. of the statutes is amended to
25 read:

1 49.688 (3) (b) 2. b. ~~Five~~ Eight hundred fifty dollars.

2 *-0529/4.103* SECTION 1453. 49.688 (6) (a) of the statutes is amended to read:

3 49.688 (6) (a) That, except as provided in sub. (7) (b), the manufacturer shall
4 make rebate payments for each prescription drug of the manufacturer that is
5 prescribed for and purchased by persons who meet criteria under sub. (2) (a) and
6 persons who meet criteria under sub. (2) (b) and have paid the deductible under sub.
7 (3) (b) 2. a., to the ~~state treasurer~~ secretary of administration to be credited to the
8 appropriation account under s. 20.435 (4) (j), each calendar quarter or according to
9 a schedule established by the department.

10 *-0576/8.63* SECTION 1454. 49.78 (5) of the statutes, as affected by 2003
11 Wisconsin Act (this act), is amended to read:

12 49.78 (5) PERSONNEL EXAMINATIONS. Statewide examinations to ascertain
13 qualifications of applicants in any county department administering aid to families
14 with dependent children shall be given by the administrator of the division of merit
15 recruitment and selection in the department of ~~employment relations~~
16 administration. The department of ~~employment relations~~ administration shall be
17 reimbursed for actual expenditures incurred in the performance of its functions
18 under this section from the appropriations available to the department of health and
19 family services for administrative expenditures.

***NOTE: This is reconciled s. 49.78 (5). It is affected by LRB-0576 and LRB-0190.

20 *-1256/5.67* SECTION 1455. 49.785 (1) (intro.) of the statutes, as affected by
21 2003 Wisconsin Act (this act), is amended to read:

22 49.785 (1) (intro.) Except as provided in sub. (1m), if any recipient of a stipend
23 under s. 49.147 (3m) (g) or of benefits or wages under s. 49.148, 49.46, or 49.77, or
24 under 42 USC 1381 to 1385 in effect on May 8, 1980, dies and the estate of the

SECTION 1455

1 deceased recipient is insufficient to pay the funeral, burial, and cemetery expenses
2 of the deceased recipient, the county or applicable tribal governing body or
3 organization responsible for burial of the recipient shall pay, to the person
4 designated by the county department under s. 46.215, 46.22, or 46.23 or applicable
5 tribal governing body or organization responsible for the burial of the recipient, all
6 of the following:

****NOTE: This is reconciled s. 49.785 (1) (intro.). This SECTION has been affected
by drafts with the following LRB numbers: LRB-0190 and LRB-1256.

7 ***-0190/7.20* SECTION 1456.** 49.79 (4) of the statutes is amended to read:

8 49.79 (4) DEDUCTIONS FROM COUNTY INCOME MAINTENANCE PAYMENTS. The
9 department shall withhold the value of food stamp losses for which a county or
10 federally recognized American Indian tribe is liable under sub. (3) from the payment
11 to the county or tribe under income maintenance contracts under s. 49.33 49.78 and
12 reimburse the federal government from the funds withheld.

13 ***-0229/2.3* SECTION 1457.** 49.85 (title) of the statutes is amended to read:

14 **49.85 (title) Certification of certain public assistance overpayments**
15 **and delinquent loan repayments.**

16 ***-0229/2.4* SECTION 1458.** 49.85 (1) of the statutes is amended to read:

17 49.85 (1) DEPARTMENT NOTIFICATION REQUIREMENT. If a county department under
18 s. 46.215, 46.22, or 46.23 or a governing body of a federally recognized American
19 Indian tribe or band determines that the department of health and family services
20 may recover an amount under s. 49.497 or that the department of workforce
21 development may recover an amount under s. 49.161, 49.195 (3), or 49.793, or collect
22 an amount under s. 49.147 (6) (cm), the county department or governing body shall
23 notify the affected department of the determination. If a Wisconsin works agency

1 determines that the department of workforce development may recover an amount
2 under s. 49.161 or 49.195 (3), or collect an amount under s. 49.147 (6) (cm), the
3 Wisconsin works agency shall notify the department of workforce development of the
4 determination.

5 ***-1256/5.68* SECTION 1459.** 49.85 (1) of the statutes, as affected by 2003
6 Wisconsin Act (this act), is amended to read:

7 49.85 (1) DEPARTMENT NOTIFICATION REQUIREMENT. If a county department under
8 s. 46.215, 46.22, or 46.23 or a governing body of a federally recognized American
9 Indian tribe or band determines that the department of health and family services
10 may recover an amount under s. 49.497 or that the department of workforce
11 development may recover an amount under s. 49.161, 49.195 (3), or 49.793, or collect
12 an amount under s. ~~49.147 (6) (cm)~~ 49.1471 (3m), the county department or
13 governing body shall notify the affected department of the determination. If a
14 Wisconsin works agency determines that the department of workforce development
15 may recover an amount under s. 49.161 or 49.195 (3), or collect an amount under s.
16 ~~49.147 (6) (cm)~~ 49.1471 (3m), the Wisconsin works agency shall notify the
17 department of workforce development of the determination.

****NOTE: This is reconciled s. 49.85 (1). This SECTION has been affected by drafts
with the following LRB numbers: LRB-0229 and LRB-1256.

18 ***-0229/2.5* SECTION 1460.** 49.85 (2) (b) of the statutes is amended to read:
19 49.85 (2) (b) At least annually, the department of workforce development shall
20 certify to the department of revenue the amounts that, based on the notifications
21 received under sub. (1) and on other information received by the department of
22 workforce development, the department of workforce development has determined
23 that it may recover under ss. 49.161, 49.195 (3), and 49.793, and collect under s.

SECTION 1460

1 49.147 (6) (cm), except that the department of workforce development may not certify
2 an amount under this subsection unless it has met the notice requirements under
3 sub. (3) and unless its determination has either not been appealed or is no longer
4 under appeal.

5 *~~1256/5.69~~* SECTION 1461. 49.85 (2) (b) of the statutes, as affected by 2003
6 Wisconsin Act ... (this act), is amended to read:

7 49.85 (2) (b) At least annually, the department of workforce development shall
8 certify to the department of revenue the amounts that, based on the notifications
9 received under sub. (1) and on other information received by the department of
10 workforce development, the department of workforce development has determined
11 that it may recover under ss. 49.161, 49.195 (3), and 49.793, and collect under s.

12 ~~49.147 (6) (cm)~~ 49.1471 (3m), except that the department of workforce development
13 may not certify an amount under this subsection unless it has met the notice
14 requirements under sub. (3) and unless its determination has either not been
15 appealed or is no longer under appeal.

****NOTE: This is reconciled s. 49.85 (2) (b). This SECTION has been affected by drafts
with the following LRB numbers: LRB-0229 and LRB-1256.

16 *~~0229/2.6~~* SECTION 1462. 49.85 (3) (b) (intro.) of the statutes is amended to
17 read:

18 49.85 (3) (b) (intro.) At least 30 days before certification of an amount, the
19 department of workforce development shall send a notice to the last-known address
20 of the person from whom that department intends to recover or collect the amount.

21 The notice shall do all of the following:

22 *~~0229/2.7~~* SECTION 1463. 49.85 (3) (b) 1. of the statutes is amended to read:

1 49.85 (3) (b) 1. Inform the person that the department of workforce
2 development intends to certify to the department of revenue an amount that the
3 department of workforce development has determined to be due under s. 49.161,
4 49.195 (3), or 49.793, or to be delinquent under a repayment agreement for a loan
5 under s. 49.147 (6), for setoff from any state tax refund that may be due the person.

6 ***-1256/5.70*** SECTION 1464. 49.85 (3) (b) 1. of the statutes, as affected by 2003
7 Wisconsin Act (this act), is amended to read:

8 49.85 (3) (b) 1. Inform the person that the department of workforce
9 development intends to certify to the department of revenue an amount that the
10 department of workforce development has determined to be due under s. 49.161,
11 49.195 (3), or 49.793, or to be delinquent under a repayment agreement for a loan
12 under s. ~~49.147 (6)~~ 49.1471, for setoff from any state tax refund that may be due the
13 person.

****NOTE: This is reconciled s. 49.85 (3) (b) 1. This SECTION has been affected by
drafts with the following LRB numbers: LRB-0229 and LRB-1256.

14 ***-0229/2.8*** SECTION 1465. 49.85 (5) of the statutes is amended to read:

15 49.85 (5) EFFECT OF CERTIFICATION. Receipt of a certification by the department
16 of revenue shall constitute a lien, equal to the amount certified, on any state tax
17 refunds or credits owed to the obligor. The lien shall be foreclosed by the department
18 of revenue as a setoff under s. 71.93. Certification of an amount under this section
19 does not prohibit the department of health and family services or the department of
20 workforce development from attempting to recover or collect the amount through
21 other legal means. The department of health and family services or the department
22 of workforce development shall promptly notify the department of revenue upon
23 recovery or collection of any amount previously certified under this section.

SECTION 1466

1 *~~1243/1.31~~* SECTION 1466. 49.854 (11) (b) of the statutes is amended to read:

2 49.854 (11) (b) *The department.* The department may assess a collection fee
3 to recover the department's costs incurred in levying against property under this
4 section. The department shall determine its costs to be paid in all cases of levy. The
5 obligor is liable to the department for the amount of the collection fee authorized
6 under this paragraph. Fees collected under this paragraph shall be credited to the
7 appropriation account under s. 20.445 ~~(1)(L)~~ (3)(ja).

8 *~~1256/5.71~~* SECTION 1467. 49.95 (4m) (a) of the statutes is amended to read:

9 49.95 ~~(4m)~~ (a) Without legal authority, sends or brings a person to a county,
10 tribal governing body, or municipality or advises a person to go to a county, tribal
11 governing body, or municipality for the purpose of obtaining relief funded by a relief
12 block grant, wages, a stipend, or benefits under the Wisconsin works Works program
13 under ss. 49.141 to 49.161, aid to families with dependent children under s. 49.19,
14 medical assistance under subch. IV, or food stamps under 7 USC 2011 to 2029.

15 *~~1256/5.72~~* SECTION 1468. 49.95 (11) of the statutes is amended to read:

16 49.95 (11) "Public assistance" as used in this section includes relief funded by
17 a relief block grant and wages, a stipend, or benefits under ss. 49.141 to 49.161.

18 *~~1256/5.73~~* SECTION 1469. 49.96 of the statutes is amended to read:

19 **49.96 Assistance grants exempt from levy.** All grants of aid to families with
20 dependent children, stipends paid under s. 49.147 (3m) (g), payments made under
21 ss. s. 48.57 (3m) or (3n), 49.148 (1) (b) 1. or (c) or (1m) or 49.149 to 49.159, 49.155, or
22 49.157, payments made for social services, cash benefits paid by counties under s.
23 59.53 (21), and benefits under s. 49.77 or federal Title XVI, are exempt from every
24 tax, and from execution, garnishment, attachment, and every other process and shall
25 be inalienable.

1 *~~1634/7.46~~* SECTION 1470. 50.01 (1g) (c) of the statutes is amended to read:
2 50.01 (1g) (c) A shelter facility as defined under s. ~~16.352~~ 560.9808 (1) (d).

3 *~~0203/3.1~~* SECTION 1471. 50.03 (5g) (c) 1. (intro.) of the statutes is amended
4 to read:

5 50.03 (5g) (c) 1. (intro.) A daily forfeiture amount per violation of not less than
6 \$10 nor more than ~~\$1,000~~ \$10,000 for each violation, with each day of violation
7 constituting a separate offense. All of the following apply to a forfeiture under this
8 subdivision:

9 *~~0529/4.104~~* SECTION 1472. 50.03 (5g) (c) 1. c. of the statutes is amended to
10 read:

11 50.03 (5g) (c) 1. c. All forfeitures shall be paid to the department within 10 days
12 after receipt of notice of assessment or, if the forfeiture is contested under par. (f),
13 within 10 days after receipt of the final decision after exhaustion of administrative
14 review, unless the final decision is appealed and the order is stayed by court order
15 under s. 50.03 (11). The department shall remit all forfeitures paid under this
16 subdivision to the ~~state treasurer~~ secretary of administration for deposit in the
17 school fund.

18 *~~0529/4.105~~* SECTION 1473. 50.034 (8) (d) of the statutes is amended to read:

19 50.034 (8) (d) All forfeitures shall be paid to the department within 10 days
20 after receipt of notice of assessment or, if the forfeiture is contested under par. (c),
21 within 10 days after receipt of the final decision after exhaustion of administrative
22 review, unless the final decision is appealed and the order is stayed by court order.
23 The department shall remit all forfeitures paid to the ~~state treasurer~~ secretary of
24 administration for deposit in the school fund.

25 *~~0529/4.106~~* SECTION 1474. 50.035 (11) (d) of the statutes is amended to read:

1 50.035 (11) (d) All forfeitures shall be paid to the department within 10 days
2 after receipt of notice of assessment or, if the forfeiture is contested under par. (c),
3 within 10 days after receipt of the final decision after exhaustion of administrative
4 review, unless the final decision is appealed and the order is stayed by court order.
5 The department shall remit all forfeitures paid to the state treasurer secretary of
6 administration for deposit in the school fund.

7 *~~0203/3.2~~* SECTION 1475. 50.04 (5) (bm) of the statutes is created to read:

8 50.04 (5) (bm) *Forfeiture surcharge.* Whenever the department imposes a
9 forfeiture under par. (a) for a violation of this subchapter or a rule promulgated under
10 this subchapter, the department shall in addition levy a forfeiture surcharge in an
11 amount of 6% of the forfeiture imposed. If multiple violations are involved, the
12 forfeiture surcharge under this paragraph shall be based on the total forfeitures for
13 all violations.

14 *~~0203/3.3~~* SECTION 1476. 50.04 (5) (c) of the statutes is amended to read:

15 50.04 (5) (c) *Assessment of forfeitures; ~~powers and duties of department and~~*
16 *forfeiture surcharges.* The department may directly assess forfeitures provided for
17 under par. (a) and forfeiture surcharges provided for under par. (bm). If the
18 department determines that a forfeiture and forfeiture surcharge should be assessed
19 for a particular violation or for failure to correct it, it shall send a notice of assessment
20 to the nursing home. The notice shall specify the amount of the forfeiture and
21 forfeiture surcharge assessed, the violation, the statute or rule alleged to have been
22 violated, and shall inform the licensee of the right to hearing under par. (e).

23 *~~0203/3.4~~* SECTION 1477. 50.04 (5) (f) of the statutes is amended to read:

24 50.04 (5) (f) *Forfeitures and forfeiture surcharges paid within 10 days.* All
25 forfeitures and forfeiture surcharges shall be paid to the department within 10 days

1 of receipt of notice of assessment or, if the forfeiture is contested under par. (e), within
2 10 days of receipt of the final decision after exhaustion of administrative review,
3 unless the final decision is appealed and the order is stayed by court order under s.
4 50.03 (11). The department shall remit all forfeitures paid to the state treasurer for
5 deposit in the school fund and shall credit all forfeiture surcharges to the
6 appropriation account under s. 20.435 (6) (jm).

7 ***-0529/4.107* SECTION 1478.** 50.04 (5) (f) of the statutes, as affected by 2003
8 Wisconsin Act (this act), is amended to read:

9 50.04 (5) (f) *Forfeitures and forfeiture surcharges paid within 10 days.* All
10 forfeitures and forfeiture surcharges shall be paid to the department within 10 days
11 of receipt of notice of assessment or, if the forfeiture is contested under par. (c), within
12 10 days of receipt of the final decision after exhaustion of administrative review,
13 unless the final decision is appealed and the order is stayed by court order under s.
14 50.03 (11). The department shall remit all forfeitures paid to the state treasurer
15 secretary of administration for deposit in the school fund and shall credit all
16 forfeiture surcharges to the appropriation account under s. 20.435 (6) (jm).

****NOTE: This is reconciled s. 50.04 (5) (f). This SECTION has been affected by drafts
with the following LRB numbers: LRB-0529 and LRB-0203.

17 ***-1295/2.18* SECTION 1479.** 50.07 (3) (a) of the statutes is repealed.

18 ***-1295/2.19* SECTION 1480.** 50.07 (3) (b) of the statutes is amended to read:

19 50.07 (3) (b) Any employee ~~of an employer not described in par. (a)~~ who is
20 discharged or otherwise retaliated or discriminated against in violation of sub. (1)
21 (e) or (em) may file a complaint with the department of workforce development under
22 s. 106.54 (5).

23 ***-1295/2.20* SECTION 1481.** 50.07 (3) (c) of the statutes is amended to read:

SECTION 1481

1 50.07 (3) (c) Any person not described in par. (a) ~~or~~ (b) who is retaliated or
2 discriminated against in violation of sub. (1) (e) or (em) may commence an action in
3 circuit court for damages incurred as a result of the violation.

4 *~~0207/6.2~~* SECTION 1482. 50.14 (title) of the statutes is amended to read:

5 **50.14 (title) Assessments on ~~occupied~~, licensed beds.**

6 *~~0207/6.3~~* SECTION 1483. 50.14 (1) (a) of the statutes is amended to read:

7 50.14 (1) (a) Notwithstanding s. 50.01 (1m), “facility” means a nursing home
8 or an intermediate care facility for the mentally retarded, ~~which is not state-owned~~
9 ~~or state-operated, federally owned or federally operated or~~ that is not located outside
10 the state.

11 *~~0207/6.4~~* SECTION 1484. 50.14 (2) of the statutes is renumbered 50.14 (2)
12 (intro.) and amended to read:

13 50.14 (2) (intro.) For the privilege of doing business in this state, there is
14 imposed on all ~~occupied~~, licensed beds of a facility, ~~except occupied, licensed beds for~~
15 ~~which payment is made under 42 USC 1395 to 1395ccc~~, an assessment that shall be
16 deposited in the general fund and that is ~~\$100~~ per calendar month per ~~occupied~~,
17 licensed bed of an intermediate care facility for the mentally retarded may not exceed
18 \$435 in fiscal year 2003–04 and may not exceed \$445 in fiscal year 2004–05 and is
19 \$32 an assessment that may not exceed \$116 per calendar month per ~~occupied~~,
20 licensed bed of a nursing home. The assessment shall be ~~on the average number of~~
21 ~~occupied, licensed beds of a facility for the calendar month previous to the month of~~
22 ~~assessment, based on an average daily midnight census computed and reported by~~
23 ~~the facility and verified by the department. Charged bed hold days for any resident~~
24 ~~of a facility shall be included as one full day in the average daily midnight census~~
25 deposited in the general fund, except that in fiscal year 2003–04, amounts in excess

1 of \$14,300,000, in fiscal year 2004–05, amounts in excess of \$13,800,000, and,
2 beginning July 1, 2005, in each fiscal year, amounts in excess of 45% of the money
3 received from the assessment shall be deposited in the Medical Assistance trust
4 fund. In determining the number of occupied, licensed beds, if all of the following
5 apply:

6 (a) If the amount of the beds is other than a whole number, the fractional part
7 of the amount shall be disregarded unless it equals 50% or more of a whole number,
8 in which case the amount shall be increased to the next whole number.

9 ***-0207/6.5* SECTION 1485.** 50.14 (2) (b) of the statutes is created to read:

10 50.14 (2) (b) The number of licensed beds of a nursing home includes any
11 number of beds that have been delicensed under s. 49.45 (6m) (ap) 1. but not deducted
12 from the nursing home's licensed bed capacity under s. 49.45 (6m) (ap) 4. a.

13 ***-0207/6.6* SECTION 1486.** 50.14 (3) of the statutes is amended to read:

14 50.14 (3) By the end of each month, each facility shall submit to the department
15 ~~the facility's occupied licensed bed count and the amount due under sub. (2) for each~~
16 ~~occupied licensed bed of the facility for the month preceding the month during which~~
17 ~~the bed count and payment are~~ is being submitted. The department shall verify the
18 ~~bed count~~ number of beds licensed and, if necessary, make adjustments to the
19 payment, notify the facility of changes in the ~~bed count or payment owing~~ and send
20 the facility an invoice for the additional amount due or send the facility a refund.

21 ***-0207/6.7* SECTION 1487.** 50.14 (4) of the statutes is amended to read:

22 50.14 (4) Sections 77.59 (1) to (5), (6) (intro.), (a) and (c) and (7) to (10), 77.60
23 (1) to (7), (9) and (10), 77.61 (9) and (12) to (14) and 77.62, as they apply to the taxes
24 under subch. III of ch. 77, apply to the assessment under this section, except that the
25 amount of any assessment collected under s. 77.59 (7) in excess of \$14,300,000 in

1 fiscal year 2003–04, in excess of \$13,800,000 in fiscal year 2004–05, and, beginning
2 July 1, 2005, in excess of 45% in each fiscal year shall be deposited in the Medical
3 Assistance trust fund.

4 ***-0529/4.108* SECTION 1488.** 50.38 (4) of the statutes is amended to read:

5 50.38 (4) All forfeitures shall be paid to the department within 10 days after
6 receipt of notice of assessment or, if the forfeiture is contested under sub. (3), within
7 10 days after receipt of the final decision after exhaustion of administrative review,
8 unless the final decision is appealed and the order is stayed by court order. The
9 department shall remit all forfeitures paid to the ~~state treasurer~~ secretary of
10 administration for deposit in the school fund.

11 ***-0529/4.109* SECTION 1489.** 50.55 (1) (e) of the statutes is amended to read:

12 50.55 (1) (e) All forfeitures shall be paid to the department within 10 days after
13 receipt of notice of assessment or, if the forfeiture is contested under par. (d), within
14 10 days after receipt of the final decision, unless the final decision is appealed and
15 the decision is in favor of the appellant. The department shall remit all forfeitures
16 paid to the ~~state treasurer~~ secretary of administration for deposit in the school fund.

17 ***-1607/P3.8* SECTION 1490.** 50.90 (2) of the statutes is amended to read:

18 50.90 (2) “Organization” means a public agency, as defined in s. ~~46.93(1m)~~ (e)
19 ~~46.856(1)(b)~~, a nonprofit corporation, a for-profit stock corporation, a cooperative,
20 a partnership, a limited liability company or a sole proprietorship.

21 ***-0529/4.110* SECTION 1491.** 50.98 (5) of the statutes is amended to read:

22 50.98 (5) All forfeitures shall be paid to the department within 10 days after
23 receipt of notice of assessment or, if the forfeiture is contested under sub. (4), within
24 10 days after receipt of the final decision after exhaustion of administrative review,
25 unless the final decision is appealed and the order is stayed by court order under the

1 same terms and conditions as found in s. 50.03 (11). The department shall remit all
2 forfeitures paid to the ~~state treasurer~~ secretary of administration for deposit in the
3 school fund.

4 ***-0211/5.3* SECTION 1492.** 51.06 (1m) (d) of the statutes is amended to read:

5 51.06 (1m) (d) Services for up to 50 individuals with developmental disability
6 who are also diagnosed as mentally ill or who exhibit extremely aggressive and
7 challenging behaviors.

8 ***-0211/5.4* SECTION 1493.** 51.06 (3) of the statutes is renumbered 51.06 (3) (a)
9 and amended to read:

10 51.06 (3) (a) ~~Individuals~~ Subject to par. (b), individuals under the age of 22
11 years shall be placed only at the central center for the developmentally disabled
12 unless the department authorizes the placement of the individual at the northern or
13 southern center for the developmentally disabled.

14 ***-0211/5.5* SECTION 1494.** 51.06 (3) (b) of the statutes is created to read:

15 51.06 (3) (b) An individual may be placed at a center for the developmentally
16 disabled for services under sub. (1m) (d) only after all of the following conditions are
17 met:

- 18 1. The department determines that a licensed bed and other necessary
19 resources are available to provide services to the individual.
- 20 2. The department and the county of residence of the individual agree on a
21 maximum discharge date for the individual.

22 ***-0211/5.6* SECTION 1495.** 51.06 (5) of the statutes is created to read:

23 51.06 (5) **SURCHARGE FOR EXTENDED INTENSIVE TREATMENT.** The department may
24 impose on a county a progressive surcharge for services under sub. (1m) (d) that an
25 individual receives after the maximum discharge date for the individual that was

1 agreed upon under sub. (3) (b) 2. The surcharge is 10% of the amount paid for the
2 individual's services under s. 49.45 during any part of the first 6-month period
3 following the maximum discharge date, and increases by 10% of the amount paid for
4 the individual's services under s. 49.45 during any part of each 6-month period
5 thereafter. Any revenues received under this subsection shall be credited to the
6 appropriation account under s. 20.435 (2) (gL).

7 ***-1746/4.5* SECTION 1496.** 51.06 (6) of the statutes is created to read:

8 **51.06 (6) SALE OF ASSETS OR REAL PROPERTY AT NORTHERN CENTER FOR THE**
9 **DEVELOPMENTALLY DISABLED.** The department may maintain the Northern Center for
10 the Developmentally Disabled for the purpose specified in sub. (1), but may sell
11 assets or real property of the Northern Center for the Developmentally Disabled. If
12 there is any outstanding public debt used to finance the acquisition, construction, or
13 improvement of any property that is sold under this subsection, the department shall
14 deposit a sufficient amount of the net proceeds from the sale of the property in the
15 bond security and redemption fund under s. 18.09 to repay the principal and pay the
16 interest on the debt, and any premium due upon refunding any of the debt. If the
17 property was purchased with federal financial assistance, the department shall pay
18 to the federal government any of the net proceeds required by federal law. If there
19 is no such debt outstanding and there are no moncys payable to the federal
20 government, or if the net proceeds exceed the amount required to be deposited or paid
21 under this subsection, the department shall deposit the net proceeds or remaining
22 net proceeds in the budget stabilization fund.

****NOTE: This is reconciled s. 51.06 (6). This SECTION has been affected by drafts
with the following LRB numbers: -0196/2 and -1746/3.

1 *~~0211/5.7~~* SECTION 1497. 51.20 (13) (c) (intro.) of the statutes is amended to
2 read:

3 51.20 (13) (c) (intro.) If disposition is made under par. (a) 3., all of the following
4 apply:

5 *~~0211/5.8~~* SECTION 1498. 51.20 (13) (c) 1. of the statutes is amended to read:

6 51.20 (13) (c) 1. The court shall designate the facility or service ~~which~~ that is
7 to receive the subject individual into the mental health system, ~~except that, if the~~
8 ~~subject individual is under the age of 22 years and the facility is a center for the~~
9 ~~developmentally disabled, the court shall designate only the central center for the~~
10 ~~developmentally disabled unless the department authorizes designation of the~~
11 ~~northern or southern center for the developmentally disabled; subject to s. 51.06 (3).~~

12 *~~0211/5.9~~* SECTION 1499. 51.20 (13) (c) 2. of the statutes is amended to read:

13 51.20 (13) (c) 2. The county department under s. 51.42 or 51.437 shall arrange
14 for treatment in the least restrictive manner consistent with the requirements of the
15 subject individual in accordance with a court order designating the maximum level
16 of inpatient facility, if any, ~~which~~ that may be used for treatment, ~~except that, if the~~
17 ~~subject individual is under the age of 22 years and the facility is a center for the~~
18 ~~developmentally disabled, designation shall be only to the central center for the~~
19 ~~developmentally disabled unless the department authorizes the placement of the~~
20 ~~individual at the northern or southern center for the developmentally disabled; and~~
21 subject to s. 51.06 (3).

22 *~~0211/5.10~~* SECTION 1500. 51.20 (13) (f) of the statutes is amended to read:

23 51.20 (13) (f) The county department under s. 51.42 or 51.437 ~~which~~ that
24 receives an individual who is committed by a court under par. (a) 3. is authorized to
25 place ~~such~~ the individual in an approved treatment facility, subject to any limitations

1 which are specified by the court under par. (c) 2. The county department shall place
 2 the subject individual in the treatment program and treatment facility ~~which~~ that
 3 is least restrictive of the individual's personal liberty, consistent with the treatment
 4 requirements of the individual. The county department ~~shall have~~ has ongoing
 5 responsibility to review the individual's needs, in accordance with sub. (17), and to
 6 transfer the person to the least restrictive program consistent with the individual's
 7 needs. ~~If the subject individual is under the age of 22 years and if the facility~~
 8 ~~appropriate for placement or transfer is a center for the developmentally disabled,~~
 9 ~~placement or transfer of the individual shall be made only to the central center for~~
 10 ~~the developmentally disabled unless the department authorizes the placement or~~
 11 ~~transfer to the northern or southern center for the developmentally disabled~~
 12 Placement or transfer under this paragraph is subject to s. 51.06 (3).

13 ***-0196/3.1* SECTION 1501.** 51.35 (1) (a) of the statutes is amended to read:

14 51.35 (1) (a) The Subject to pars. (b) and (d), the department or the county
 15 department under s. 51.42 or 51.437 may transfer any patient or resident who is
 16 committed to it, or who is admitted to a treatment facility under its supervision or
 17 operating under an agreement with it, between treatment facilities or from a
 18 treatment facility into the community if ~~such~~ the transfer is consistent with
 19 reasonable medical and clinical judgment ~~and,~~ consistent with s. 51.22 (5). ~~The~~
 20 ~~transfer shall be made, and, if the transfer results in a greater restriction of personal~~
 21 freedom for the patient or resident, in accordance with par. (e). Terms and conditions
 22 ~~which~~ that will benefit the patient or resident may be imposed as part of a transfer
 23 to a less restrictive treatment alternative. A patient or resident who is committed
 24 to the department or a county department under s. 51.42 or 51.437 may be required
 25 to take medications and receive treatment, subject to the right of the patient or

1 resident to refuse medication and treatment under s. 51.61 (1) (g) and (h), through
2 a community support program as a term or condition of a transfer. The patient or
3 resident shall be informed at the time of transfer of the consequences of violating
4 such the terms and conditions of the transfer, including possible transfer back to a
5 facility which treatment facility that imposes a greater restriction on personal
6 freedom of the patient or resident.

7 ***-0196/3.2* SECTION 1502.** 51.35 (1) (b) of the statutes is amended to read:

8 51.35 (1) (b) ~~In addition to the requirements in par. (a), a~~ Except as provided
9 in pars. (c) and (d), a transfer of a patient in a mental health institute or center for
10 the developmentally disabled by the department is subject to the approval of the
11 appropriate county department under ss. 51.42 and 51.437 to which the patient was
12 committed or through which the patient was admitted to the facility, if any mental
13 health institute.

14 ***-0211/5.11* SECTION 1503.** 51.35 (1) (bm) of the statutes is amended to read:

15 51.35 (1) (bm) ~~Notwithstanding par. (b), transfer~~ Transfer of a patient ~~under~~
16 the age of 22 years resident by a county department to a center for the
17 developmentally disabled ~~may be made only to the central center for the~~
18 ~~developmentally disabled unless the department authorizes the transfer of the~~
19 ~~patient to the northern or southern center for the developmentally disabled is subject~~
20 to s. 51.06 (3).

***NOTE: This is reconciled s. 51.35 (1) (bm). This SECTION has been affected by
drafts with the following LRB numbers: LRB-0211/4 and LRB-0196/2.

21 ***-0196/3.3* SECTION 1504.** 51.35 (1) (c) of the statutes is amended to read:

22 51.35 (1) (c) The department may, without approval of and without first
23 notifying the county department under s. 51.42 or 51.437 ~~and notwithstanding par.~~

SECTION 1504

1 (d) ~~3.~~, transfer any patient from a treatment facility to another treatment facility
2 when the condition of the patient requires such transfer without delay. The
3 department shall notify the appropriate county department under s. 51.42 or 51.437
4 that the transfer has been made. Any patient so transferred may be returned to the
5 treatment facility from which the transfer was made, upon orders from the
6 department or the county department under s. 51.42 or 51.437, when ~~such~~ the return
7 would be in the best interests of the patient.

8 *~~0196/3.4~~* SECTION 1505. 51.35 (1) (d) of the statutes is amended to read:

9 51.35 (1) (d) 1. The Subject to subs. 2. and 3., the department may, without
10 approval of the appropriate county department under s. 51.42 or 51.437, transfer any
11 patient from a state treatment facility or other inpatient facility to an approved
12 treatment facility which is less restrictive of the patient's personal freedom.

13 2. Transfer under this ~~subsection~~ paragraph may be made only if the transfer
14 is consistent with the requirements of par. (a), and the department finds that the
15 appropriate county department under s. 51.42 or 51.437 is unable to locate an
16 approved treatment facility in the community, or that ~~such~~ the county department
17 has acted in an arbitrary or capricious manner to prevent the transfer of the patient
18 out of the state treatment facility or other inpatient facility contrary to medical and
19 clinical judgment.

20 3. A transfer of a patient, made under authority of this ~~subsection~~ paragraph,
21 may be made only after the department has notified the county department under
22 s. 51.42 or 51.437 of its intent to transfer a patient in accordance with this subsection.
23 The patient's guardian, if any, or if a minor his or her parent or person in the place
24 of a parent shall be notified.

25 *~~1634/7.47~~* SECTION 1506. 51.35 (5) of the statutes is amended to read:

1 **51.35 (5) RESIDENTIAL LIVING ARRANGEMENTS; TRANSITIONARY SERVICES.** The
2 department and any person, director or board authorized to discharge or transfer
3 patients under this section shall ensure that a proper residential living arrangement
4 and the necessary transitional services are available and provided for the patient
5 being discharged or transferred. Under this subsection, a proper residential living
6 arrangement may not include a shelter facility, as defined under s. ~~16.352~~ 560.9808
7 (1) (d), unless the discharge or transfer to the shelter facility is made on an
8 emergency basis for a period not to exceed 10 days.

9 *~~0194/9.14~~* **SECTION 1507.** 51.421 (3) (e) of the statutes is amended to read:
10 51.421 (3) (e) ~~Distribute, from~~ From the appropriation appropriation accounts
11 under s. 20.435 (4) (w) and (o) and (7) (bL), distribute moneys in each fiscal year for
12 community support program services.

13 *~~0211/5.12~~* **SECTION 1508.** 51.437 (4rm) (c) 2m. of the statutes is amended
14 to read:

15 51.437 (4rm) (c) 2m. Bill the county department of developmental disabilities
16 services for services that are not provided by the federal government and that are
17 provided under s. 51.06 (1m) (d) to individuals who are eligible for medical assistance
18 ~~that are not provided by the federal government, plus any applicable surcharge~~
19 under s. 51.06 (5), using the procedure established under subd. 1.

20 *~~0211/5.13~~* **SECTION 1509.** 51.67 (intro.) of the statutes is amended to read:
21 **51.67 Alternate procedure; protective services.** (intro.) If, after a hearing
22 under s. 51.13 (4) or 51.20, the court finds that commitment under this chapter is not
23 warranted and that the subject individual is a fit subject for guardianship and
24 protective placement or services, the court may, without further notice, appoint a
25 temporary guardian for the subject individual and order temporary protective

SECTION 1509

1 placement or services under ch. 55 for a period not to exceed 30 days. If the court
2 orders ~~temporary~~ Temporary protective placement for an individual under the age
3 of 22 years in a center for the developmentally disabled, ~~this placement may be made~~
4 ~~only at the central center for the developmentally disabled unless the department~~
5 ~~authorizes the placement or transfer to the northern or southern center for the~~
6 ~~developmentally disabled is subject to s. 51.06 (3).~~ Any interested party may then
7 file a petition for permanent guardianship or protective placement or services,
8 including medication, under ch. 55. If the individual is in a treatment facility, the
9 individual may remain in the facility during the period of temporary protective
10 placement if no other appropriate facility is available. The court may order
11 psychotropic medication as a temporary protective service under this section if it
12 finds that there is probable cause to believe the individual is not competent to refuse
13 psychotropic medication and that the medication ordered will have therapeutic
14 value and will not unreasonably impair the ability of the individual to prepare for
15 and participate in subsequent legal proceedings. An individual is not competent to
16 refuse psychotropic medication if, because of chronic mental illness, and after the
17 advantages and disadvantages of and alternatives to accepting the particular
18 psychotropic medication have been explained to the individual, one of the following
19 is true:

20 *~~0209/2.16~~* SECTION 1510. 55.001 of the statutes is amended to read:

21 **55.001 Declaration of policy.** The legislature recognizes that many citizens
22 of the state, because of the infirmities of aging, chronic mental illness, mental
23 retardation, other developmental disabilities or like incapacities incurred at any age,
24 are in need of protective services. ~~These~~ Except as provided in s. 49.45 (30m) (a),
25 these services should, to the maximum degree of feasibility under programs, services