Received By: dkennedy

2005 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-SB653)

Received: 03/28/2006

Wanted: As time permits				Identical to LRB:			
For: Legislative Fiscal Bureau 6-3847		7		By/Representing	Rebecca Hoty	nski	
This file r	nay be shown	to any legislato	r: NO		Drafter: dkenned	ly	
May Cont	tact:				Addl. Drafters:		
Subject:	Health	- long-term car	e		Extra Copies:		
Submit vi	a email: YES						
Requester	's email:	rebecca.hot	ynski@legi	s.state.wi.us			
Carbon co	opy (CC:) to:	robin.ryan(@legis.state	.wi.us			
Pre Topi	c:				**************************************		
No specif	ic pre topic gi	ven					
Topic:						***************************************	
Requirem	ents for subm	ission of propos	ed contract	to Jt. Finance	; expansion cap; ε	evaluations	
Instructi	ons:				***************************************		
Same as A	ASA 1 to AB	1110					
Drafting	History:						The state of the s
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required
?	dkennedy 03/28/2006	lkunkel 03/28/2006					
1			chaugen 03/29/200	6	mbarman 03/29/2006	mbarman 03/29/2006	
2	dkennedy 03/29/2006	lkunkel 03/29/2006	jfrantze 03/30/2000	6	sbasford 03/30/2006	sbasford 03/30/2006	

LRBs0665 03/30/2006 08:15:49 AM Page 2

FE Sent For:

<END>

2005 DRAFTING REQUEST

Senate Substitute Amendment (\$SA-SB653) Received: 03/28/2006 Received By: dkennedy Wanted: As time permits Identical to LRB: For: Legislative Fiscal Bureau 6-3847 By/Representing: Rebecca Hotynski This file may be shown to any legislator: NO Drafter: dkennedy May Contact: Addl. Drafters: Subject: Health - long-term care Extra Copies: Submit via email: YES Requester's email: rebecca.hotynski@legis.state.wi.us Carbon copy (CC:) to: robin.ryan@legis.state.wi.us Pre Topic: No specific pre topic given Topic: Requirements for submission of proposed contract to Jt. Finance; expansion cap; evaluations **Instructions:** Same as ASA 1 to AB 1110 **Drafting History:** Vers. Drafted Reviewed Proofed Typed Submitted Jacketed Required /? dkennedy lkunkel 03/28/2006 03/28/2006 /1 chaugen mbarman mbarman 12/mk 3/29 03/29/2006 03/29/2006 03/29/2006

FE Sent For:

2005 DRAFTING REQUEST

Senate Substitute Amendment (SSA-SB653)

Received: 03/28/2006 Received By: dkennedy

Identical to LRB: Wanted: As time permits

For: Legislative Fiscal Bureau 6-3847 By/Representing: Rebecca Hotynski

This file may be shown to any legislator: NO Drafter: dkennedy

May Contact: Addl. Drafters:

Subject: Health - long-term care Extra Copies:

Submit via email: YES

Requester's email: rebecca.hotynski@legis.state.wi.us

Carbon copy (CC:) to: robin.ryan@legis.state.wi.us

Pre Topic:

No specific pre topic given

Topic:

Requirements for submission of proposed contract to Jt. Finance; expansion cap; evaluations $\sqrt{}$

Instructions:

Same as ASA 1 to AB 1110

Drafting History:

Drafted Vers. Reviewed **Typed** Submitted Jacketed Required Proofed

dkennedy

FE Sent For:

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<END>

WEDNESDAY 9:00 a.m.)

2005 - 2006 LEGISLATURE

LRBs0657/1 DAK:lmk;rs

ASSEMBLY SUBSTITUTE AMENDMENT, TO 2005 ASSEMBLY BILL 1110



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AN ACT to repeal 46.281 (1) (d) (intro.), 46.281 (1) (d) 1. and 46.281 (1) (e) (intro.);

to renumber and amend 46.281(1)(d) 2.; and to amend 46.27(4)(c) 8., 46.27(d) (c) 8.

(5) (am), 46.27 (6) (a) 3., 46.27 (6g) (intro.), 46.27 (9) (c), 46.281 (1) (e) 1., 46.281

(1) (e) 2., 46.281 (1) (g) 3., 46.282 (2) (a) (intro.), 46.283 (2) (b) (intro.), 46.285 (1)

(a) and 49.45 (3) (ag) of the statutes; **relating to:** contracts with entities to operate resource centers and care management organizations under the

Family Care Program and evaluation of the Family Care Program.

Analysis by the Legislative Reference Bureau

Currently, the Department of Health and Family Services (DHFS) administers Family Care, a program that provides in certain areas a flexible long-term care benefit called the Family Care benefit. A person must be at least 18 years of age, meet functional and financial eligibility requirements, and have a physical disability, a developmental disability, or infirmities of aging to qualify for the Family Care benefit.

Under current law, before July 1, 2001, DHFS was required to establish in certain geographical areas pilot projects under which DHFS contracted with counties, Family Care districts, federally recognized American Indian tribes or

Substitute amendure

bands, or the Great Lakes Inter-Tribal Council, Inc., to operate resource centers (organizations that provide information and referral services and determine financial and functional eligibility of prospective enrollees) or care management organizations (organizations that assess enrollees' service needs, develop comprehensive care plans for each enrollee, and provide or contract for provision of necessary services), or both. After June 30, 2001, if the local long-term care council for an applicable area had developed a required initial plan, and if authorized and funded by the legislature, DHFS was required to contract with one or more entities in addition to those under pilot projects, for services of a resource center or care management organization; however, as affected by 2005 Wisconsin Act 25 (the biennial budget act), any prospective additional contract with an entity to operate a resource center requires advance approval by the Joint Committee on Finance (JCF), on a passive review basis. Currently, DHFS must conduct on-going evaluations of Family Care.

This the eliminates the requirements for establishing Family Care pilot projects before July 1, 2001, and integrates requirements for those pilot projects with current requirements for contracts with resource centers and care management organizations. The bill specifies that DHFS may contract with a county, a Family Care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or two or more of these entities to administer the Family Care benefit as care management organizations or resource centers. The bill authorizes DHFS to contract with these entities to administer care management organizations in geographic areas in which, in the aggregate, more than 29 percent but less than 51 percent of the state population that is eligible for the family care benefit reside, if such a proposed contract receives advance approval from JCF, under a passive review process. Notification by DHFS to the JCF concerning such a proposed contract must include the contract proposal and an estimate of the fiscal impact of the proposed addition that demonstrates cost neutrality. However, for contracts with the entities to administer care management organizations in geographic areas in which, in the aggregate, more than 50 percent of the state population that is eligible for the Family Care benefit resides, the legislature must provide specific authorization and necessary funding.

The bilitalso requires that the evaluations that DHFS must make concerning Family Care include client access to services, the availability of client choice of living and service options (including the opportunity for the client to have self-directed services), quality of care, and cost effectiveness.

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

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

46.27 (4) (c) 8. If a pilot project contract with an entity under s. 46.281 (1) (d) (e) 1. is established in the county, a description of how the activities of the pilot project entity relate to and are coordinated with the county's proposed program.

Section 2. 46.27 (5) (am) of the statutes is amended to read:

46.27 (5) (am) Organize assessment activities specified in sub. (6). The county department or aging unit shall utilize persons for each assessment who can determine the needs of the person being assessed and who know the availability within the county of services alternative to placement in a nursing home. If any hospital patient is referred to a nursing home for admission, these persons shall work with the hospital discharge planner in performing the activities specified in sub. (6). The county department or aging unit shall coordinate the involvement of representatives from the county departments under ss. 46.215, 46.22, 51.42 and 51.437, health service providers and the county commission on aging in the assessment activities specified in sub. (6), as well as the person being assessed and members of the person's family or the person's guardian. This paragraph does not apply to a county department or aging unit in a county where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established (e) 1.

SECTION 3. 46.27 (6) (a) 3. of the statutes is amended to read:

46.27 (6) (a) 3. In each participating county, except in counties where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established (e) 1., assessments shall be conducted for those persons and in accordance with the procedures described in the county's community options plan. The county may elect to establish assessment priorities for persons in target groups identified by the county in its plan regarding gradual implementation. If a person

who is already admitted to a nursing home requests an assessment and if funds allocated for assessments under sub. (7) (am) are available, the county shall conduct the assessment.

SECTION 4. 46.27 (6g) (intro.) of the statutes is amended to read:

46.27 (**6g**) FISCAL RESPONSIBILITY. (intro.) Except as provided in s. 51.40, and within the limitations under sub. (7) (b), the fiscal responsibility of a county for an assessment, unless the assessment is performed by an entity <u>under a contract as specified</u> under s. 46.281 (1) (d) (e) 1., case plan, or services provided to a person under this section is as follows:

SECTION 5. 46.27 (9) (c) of the statutes is amended to read:

46.27 (9) (c) All long-term community support services provided under this pilot project in lieu of nursing home care shall be consistent with those services described in the participating county's community options plan under sub. (4) (c) 1. and provided under sub. (5) (b). Unless the department has contracted under s. 46.281 (1) (d) (e) 1. with an entity other than the county department, each county participating in the pilot project shall assess persons under sub. (6).

SECTION 6. 46.281 (1) (d) (intro.) of the statutes is repealed.

Section 7. 46.281 (1) (d) 1. of the statutes is repealed.

SECTION 8. 46.281 (1) (d) 2. of the statutes is renumbered 46.281 (1) (d) and amended to read:

46.281 (1) (d) In geographic areas in which, in the aggregate, resides no more than 29% 29 percent of the state population that is eligible for the family care benefit, contract with counties or tribes or bands under a pilot project to demonstrate the ability of counties or tribes or bands a county, a family care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or with 2 or more of these entities to

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manage all long-term care programs and administer the family care benefit as care management organizations. If the department proposes to contract with these entities to administer care management organizations in geographic areas in which, in the aggregate, resides more than 29 percent but less than 51 percent of the state population that is eligible for the family care benefit, the department shall first notify the joint committee on finance in writing of the proposed contract. The notification shall include the contract proposal; and an estimate of the fiscal impact of the proposed addition that demonstrates that the addition will be cost neutral, including startup, transitional, and ongoing operational costs and any proposed county contribution. If the cochairpersons of the committee do not notify the department within 14 working days after the date of the department's notification that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract. If within 14 days after the date of the department's notification the cochairpersons of the committee notify the department that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract only upon approval of the committee. The department may contract with these entities to administer care management organizations in geographic areas in which, in the aggregate, resides more than 50 percent of the state population that is eligible for the family care benefit only if specifically authorized by the legislature and if the legislature appropriates necessary funding.

SECTION 9. 46.281 (1) (e) (intro.) of the statutes, as affected by 2005 Wisconsin Act 25, is repealed.

SECTION 10. 46.281 (1) (e) 1. of the statutes, as affected by 2005 Wisconsin Act 25, is amended to read:

46.281 (1) (e) 1. If Subject to the requirements of par. (d), if the local long-term care council for the applicable area has developed the initial plan under s. 46.282 (3) (a) 1., contract with entities specified under par. (d) and may, only if specifically authorized by the legislature and if the legislature appropriates necessary funding, contract as so authorized with one or more entities in addition to those specified in par. (d) certified as meeting requirements under s. 46.284 (3) for services of the entity as a care management organization.

SECTION 11. 46.281 (1) (e) 2. of the statutes, as created by 2005 Wisconsin Act 25, is amended to read:

46.281 (1) (e) 2. Contract with entities specified under par. (d) and <u>may contract</u> with other entities for the provision of services under s. 46.283 (3) and (4), except that after July 27, 2005, the department shall notify the joint committee on finance in writing of any proposed contract with an entity that did not have a contract to provide services under s. 46.283 (3) and (4) before July 27, 2005. If the cochairpersons of the committee do not notify the department within 14 working days after the date of the department's notification that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract. If within 14 working days after the date of the department's notification the cochairpersons of the committee notify the department that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract, the department may enter into the proposed contract only upon approval of the committee.

SECTION 12. 46.281 (1) (g) 3. of the statutes is amended to read:

46.281 (1) (g) 3. Conduct ongoing evaluations of the long-term care system specified in ss. 46.2805 to 46.2895 as to client access to services, the availability of

client choice of living and service options, quality of care, and cost-effectiveness. In evaluating the availability of client choice, the department shall evaluate the opportunity for a client to arrange for, manage, and monitor his or her family care benefit directly or with assistance, as specified in s. 46.284 (4) (e).

SECTION 13. 46.282 (2) (a) (intro.) of the statutes is amended to read:

46.282 (2) (a) Appointment by a county. (intro.) In a county that participates in a pilot project in which the department has a contract under s. 46.281 (1) (d) (e) and before a county participates in the program under ss. 46.2805 to 46.2895, the following shall be done:

SECTION 14. 46.283 (2) (b) (intro.) of the statutes, as affected by 2005 Wisconsin Act 25, is amended to read:

46.283 (2) (b) (intro.) After June 30, 2001, the department shall contract with the entities specified under s. 46.281 (1) (d) 1. and may, if the applicable review conditions under s. 48.281 (1) (e) 2. s. 46.281 (1) (e) 2. are satisfied, in addition to contracting with these entities, contract to operate a resource center with counties, family care districts, or the governing body of a tribe or band or the Great Lakes Inter-Tribal Council, Inc., under a joint application of any of these, or with a private nonprofit organization if the department determines that the organization has no significant connection to an entity that operates a care management organization and if any of the following applies:

SECTION 15. 46.285 (1) (a) of the statutes is amended to read:

46.285 (1) (a) For a pilot project established an entity with which the department has contracted under s. 46.281 (1) (d) 2. (e) 1., provision of the services specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the provision of services of the care management organization by January 1, 2001.

1	SECTION 16. 49.45 (3) (ag) of the statutes is amended to read:
2	49.45 (3) (ag) Reimbursement shall be made to each entity contracted with
3	under s. $46.281(1)(d)(e)$ for functional screens performed under s. $46.281(1)(d)$ by
4	the entity.
5	(END)

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU

LRB

Research (608-266-0341)

Library (608-266-7040)

Legal (608-266-3561)

LRB

SOGS7 - LFB (Kaugest)
D Family care expansion 29% - 50% - JFC approval (passure review) (1)(8) +50% - legislature approves + provides pends
29% - 50% - JFC aproval (passure review) (1)(d)
+50% - legislature approves + provides puds
2 Favier care evaluations 46.281 (D(g)3.
Contract to state and the state of the state
- Chief charce of lung + sewer optimes
Augusty) care
Cost-effectives
Client access to services Client charce of living + service options Quality of care Cost effectiveness Airectod genuce option under 46.284(4)(e)
Die stad excession (de la file cas majores)
(3) DHFS to include estimates of his cal mipact of proposed expansion (demonstrate cost-neutrality)
30658 - Rhoade
O Family Can expansion
O family Car expansion +29% - active JFC review + approval 46.281(1)(4) Also-resource centers "" "
Also-resource centers "
(46.281(1)(e)z.
3 Same as (2) LFB (except apply to all I-t)
Can programs
3) checkoff regult to self-directed services 46.24
(4) JFC active review of Pace + Partnership expansion
(4) JFC active review of Pace + Partnership expansion Checkoff for Pace + Partnership
Wisconsin Legislative Reference Bureau

Kennedy, Debora

From:

Morgan, Charlie

Sent:

Wednesday, March 29, 2006 12:58 PM

To: Subject: Kennedy, Debora FW: Family Care Sub

Importance:

High

Hi, Debora - Here's an email I just received from Jennifer.

Charles Morgan, Program Supervisor Wisconsin Legislative Fiscal Bureau 1 East Main Street, Suite 301 Madison, WI 53703

FAX:

Telephone: (608) 266-3847 (608) 267-6873

Email:

Charlie.Morgan@legis.state.wi.us

From: Western, Jennifer

Sent: Wednesday, March 29, 2006 12:32 PM

To: Morgan, Charlie Subject: Family Care Sub

Importance: High

Charlie.

One more question/comment:

Just as we discussed making the active JFC approval apply to both Family Care and any other program (ie: Pace, Partnership) that the department is trying to expand....

Kitty wants to make sure the same goes for the SDS form "on which the enrollee must indicate whether he or she has been offered the option of arranging for, managing and monitoring his or her own Family Care benefit directly or with assistance... and whether he or she accepted or declined..."

I don't think this is the case under the current sub. Can you tell me if it is and whether it would be possible? If so, could you describe how to accomplish this?

Thanks so much!

Jennifer Western Office of Kitty Rhoades State Representative 30th Assembly District

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU

LRB

Research (608-266-0341)

Library (608-266-7040)

Legal (608-266-3561)

LRB

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	Ovey	50%	- Ha	+ will be	e setain	<u> </u>
		LFB			and two recommendations and an arrangement of the state o	
					Wisconsin	RB Legislative

RESEARCH APPENDIX - Draft Transfer/Copy Request Form

- Atty's please complete this form and give to Mike Barman

(Request Made By:) (Date: _3_ / _9 / _0 6_)
O Please <u>transfer</u> the drafting file for
2003 LRB to the drafting file
for 2005 LRB The final version of the 2003 draft and the final Request Sheet will copied on yellow paper, and
returned to the original 2003 drafting file. A new cover sheet will be created/included listing the new location of the drafting file's "guts"
For research purposes, because the 2003 draft was incorporated into a 2005 draft, the complete drafting file will be transferred, as a separate appendix, to the new 2005 drafting file. This request form will be inserted into the "guts" of the 2005 draft. If introduced, the appendix will be scanned/added to the electronic drafting file folder.
O Please copy the drafting file for
2005 LRB SOGS8/ 2 (include the version) and place it in the
drafting file for 2005 LRB _ So 6 6 5

- For research purposes, because the original 2005 draft was incorporated into another 2005 draft, the original drafting file will be copied on yellow paper (darkened/auto centered/reduced to 90%) and added, as a separate appendix, to the new 2005 drafting file. This request form will be inserted into the "guts" of the new 2005 draft. If introduced the appendix will be scanned/added to the electronic drafting file folder.
- The original drafting file will then returned, intact, to its folder and filed. For future reference, a copy of the transfer/copy request form will also be added to the "guts" of the original draft.

8:30 THURS.

2005 - 2006 LEGISLATURE

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DAK:lmk:j

653

ASSEMBLY SUBSTITUTE AMENDMENT,

TO 2005 ASSEMBLY BILL 1110



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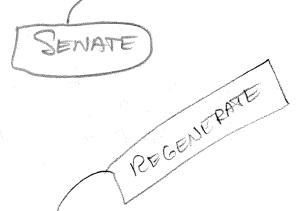
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AN ACT to repeal 46.281 (1) (d) (intro.), 46.281 (1) (d) 1. and 46.281 (1) (e) (intro.);

to renumber and amend 46.281(1)(d) 2.; and to amend 46.27(4)(c) 8., 46.27

(5) (am), 46.27 (6) (a) 3., 46.27 (6g) (intro.), 46.27 (9) (c), 46.281 (1) (e) 1., 46.281

 $(1)\ (e)\ 2.,\ 46.281\ (1)\ (g)\ 3.,\ 46.282\ (2)\ (a)\ (intro.),\ 46.283\ (2)\ (b)\ (intro.),\ 46.285\ (1)$

(a) and 49.45 (3) (ag) of the statutes; relating to: contracts with entities to

operate resource centers and care management organizations under the

Family Care Program and evaluation of the Family Care Program.

Analysis by the Legislative Reference Bureau

Currently, the Department of Health and Family Services (DHFS) administers Family Care, a program that provides in certain areas a flexible long-term care benefit called the Family Care benefit. A person must be at least 18 years of age, meet functional and financial eligibility requirements, and have a physical disability, a developmental disability, or infirmities of aging to qualify for the Family Care benefit.

Under current law, before July 1, 2001, DHFS was required to establish in certain geographical areas pilot projects under which DHFS contracted with counties, Family Care districts, federally recognized American Indian tribes or

bands, or the Great Lakes Inter-Tribal Council, Inc., to operate resource centers (organizations that provide information and referral services and determine financial and functional eligibility of prospective enrollees) or care management organizations (organizations that assess enrollees' service needs, develop comprehensive care plans for each enrollee, and provide or contract for provision of necessary services), or both. After June 30, 2001, if the local long-term care council for an applicable area had developed a required initial plan, and if authorized and funded by the legislature, DHFS was required to contract with one or more entities in addition to those under pilot projects, for services of a resource center or care management organization; however, as affected by 2005 Wisconsin Act 25 (the biennial budget act), any prospective additional contract with an entity to operate a resource center requires advance approval by the Joint Committee on Finance (JCF), on a passive review basis. Currently, DHFS must conduct on-going evaluations of Family Care.

This substitute amendment eliminates the requirements for establishing Family Care pilot projects before July 1, 2001, and integrates requirements for those pilot projects with current requirements for contracts with resource centers and care management organizations. The substitute amendment specifies that DHFS may contract with a county, a Family Care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or two or more of these entities to administer the Family Care benefit as care management organizations or resource centers. The substitute amendment authorizes DHFS to contract with these entities to administer care management organizations in geographic areas in which, in the aggregate, more than 29 percent but less than 29 percent of the state population that is eligible for the family care benefit reside, if such a proposed contract receives advance approval from JCF, under a passive review process. Notification by DHFS to the JCF concerning such a proposed contract must include the contract proposal and an estimate of the fiscal impact of the proposed addition that demonstrates cost neutrality. However, for contracts with the entities to administer care management organizations in geographic areas in which, in the aggregate, more than 50 percent of the state population that is eligible for the Family Care benefit resides, the legislature must provide specific authorization and necessary funding.

The substitute amendment also requires that the evaluations that DHFS most make concerning Family Care include client access to services, the availability of client choice of living and service options (including the opportunity for the client to

have self-directed services), quality of care, and cost effectiveness.

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

46.27 (4) (c) 8. If a pilot project contract with an entity under s. 46.281 (1) (d) (e) 1. is established in the county, a description of how the activities of the pilot project entity relate to and are coordinated with the county's proposed program.

SECTION 2. 46.27 (5) (am) of the statutes is amended to read:

46.27 (5) (am) Organize assessment activities specified in sub. (6). The county department or aging unit shall utilize persons for each assessment who can determine the needs of the person being assessed and who know the availability within the county of services alternative to placement in a nursing home. If any hospital patient is referred to a nursing home for admission, these persons shall work with the hospital discharge planner in performing the activities specified in sub. (6). The county department or aging unit shall coordinate the involvement of representatives from the county departments under ss. 46.215, 46.22, 51.42 and 51.437, health service providers and the county commission on aging in the assessment activities specified in sub. (6), as well as the person being assessed and members of the person's family or the person's guardian. This paragraph does not apply to a county department or aging unit in a county where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established (e) 1.

SECTION 3. 46.27 (6) (a) 3. of the statutes is amended to read:

46.27 (6) (a) 3. In each participating county, except in counties where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established (e) 1., assessments shall be conducted for those persons and in accordance with the procedures described in the county's community options plan. The county may elect to establish assessment priorities for persons in target groups identified by the county in its plan regarding gradual implementation. If a person

who is already admitted to a nursing home requests an assessment and if funds
allocated for assessments under sub. (7) (am) are available, the county shall conduct
the assessment.

SECTION 4. 46.27 (6g) (intro.) of the statutes is amended to read:

46.27 (6g) FISCAL RESPONSIBILITY. (intro.) Except as provided in s. 51.40, and within the limitations under sub. (7) (b), the fiscal responsibility of a county for an assessment, unless the assessment is performed by an entity <u>under a contract as specified</u> under s. 46.281 (1) (d) (e) 1., case plan, or services provided to a person under this section is as follows:

SECTION 5. 46.27 (9) (c) of the statutes is amended to read:

46.27 (9) (c) All long-term community support services provided under this pilot project in lieu of nursing home care shall be consistent with those services described in the participating county's community options plan under sub. (4) (c) 1. and provided under sub. (5) (b). Unless the department has contracted under s. 46.281 (1) (d) (e) 1. with an entity other than the county department, each county participating in the pilot project shall assess persons under sub. (6).

INSERT 4-1LA SECTION 6. 46.281 (1) (d) (intro.) of the statutes is repealed.

SECTION 7. 46.281 (1) (d) 1. of the statutes is repealed.

SECTION 8. 46.281 (1) (d) 2. of the statutes is renumbered 46.281 (1) (d) and amended to read:

46.281 (1) (d) In geographic areas in which, in the aggregate, resides no more than 29% 29 percent of the state population that is eligible for the family care benefit, contract with counties or tribes or bands under a pilot project to demonstrate the ability of counties or tribes or bands a county, a family care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or with 2 or more of these entities to

manage all long-term care programs and administer the family care benefit as care
management organizations. If the department proposes to contract with these
entities to administer care management organizations in geographic areas in which,
in the aggregate, resides more than 29 percent but less than percent of the state
population that is eligible for the family care benefit, the department shall first
notify the joint committee on finance in writing of the proposed contract. The
notification shall include the contract proposal; and an estimate of the fiscal impact
of the proposed addition that demonstrates that the addition will be cost neutral,
including startup, transitional, and ongoing operational costs and any proposed
county contribution. If the cochairpersons of the committee do not notify the
department within 14 working days after the date of the department's notification
that the committee has scheduled a meeting for the purpose of reviewing the
proposed contract, the department may enter into the proposed contract. If within
14 days after the date of the department's notification the cochairpersons of the
committee notify the department that the committee has scheduled a meeting for the
purpose of reviewing the proposed contract, the department may enter into the
proposed contract only upon approval of the committee. The department may
contract with these entities to administer care management organizations in
geographic areas in which, in the aggregate, resides more than 50 percent of the state
population that is eligible for the family care benefit only if specifically authorized
by the legislature and if the legislature appropriates necessary funding.
Section 9. 46.281 (1) (e) (intro.) of the statutes, as affected by 2005 Wisconsin
Act 25, is repealed.
Section 10. 46.281 (1) (e) 1. of the statutes, as affected by 2005 Wisconsin Act
25 is amended to read:

(25)

46.281 (1) (e) 1. If Subject to the requirements of par. (d), if the local long-term care council for the applicable area has developed the initial plan under s. 46.282 (3) (a) 1., contract with entities specified under par. (d) and may, only if specifically authorized by the legislature and if the legislature appropriates necessary funding, contract as so authorized with one or more entities in addition to those specified in par. (d) certified as meeting requirements under s. 46.284 (3) for services of the entity as a care management organization.

SECTION 11. 46.281 (1) (e) 2. of the statutes, as created by 2005 Wisconsin Act 25, is amended to read:

with other entities for the provision of services under s. 46.283 (3) and (4), except that after July 27, 2005, the department shall notify the joint committee on finance in writing of any proposed contract with an entity that did not have a contract to provide services under s. 46.283 (3) and (4) before July 27, 2005. If the cochairpersons of the committee do not notify the department within 14 working days after the date of the department's notification that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract. If within 14 working days after the date of the department that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department that the committee has scheduled a meeting for the purpose of reviewing the proposed contract, the department may enter into the proposed contract, the department may enter into the proposed contract, the department may enter into the proposed contract only upon approval of the committee.

SECTION 12. 46.281 (1) (g) 3. of the statutes is amended to read:

46.281 (1) (g) 3. Conduct ongoing evaluations of the long-term care system specified in ss. 46.2805 to 46.2895 as to client access to services, the availability of

	client choice of living and service options, quality of care, and cost-effectiveness. In
	evaluating the availability of client choice, the department shall evaluate the
	opportunity for a client to arrange for, manage, and monitor his or her family care
	benefit directly or with assistance, as specified in s. 46.284 (4) (e).
	SECTION 13. 46.282 (2) (a) (intro.) of the statutes is amended to read:
	46.282 (2) (a) Appointment by a county. (intro.) In a county that participates
	in a pilot project in which the department has a contract under s. 46.281 (1) (d) (e)
	and before a county participates in the program under ss. 46.2805 to 46.2895, the
	following shall be done:
	SECTION 14. 46.283 (2) (b) (intro.) of the statutes, as affected by 2005 Wisconsin
	Act 25, is amended to read:
	46.283 (2) (b) (intro.) After June 30, 2001, the department shall contract with
	the entities specified under s. 46.281 (1) (d) 1. and may, if the applicable review
	conditions under s. 48.281 (1) (e) 2. s. 46.281 (1) (e) 2. are satisfied, in addition to
	contracting with these entities, contract to operate a resource center with counties
	family care districts, or the governing body of a tribe or band or the Great Lakes
	Inter-Tribal Council, Inc., under a joint application of any of these, or with a private
	nonprofit organization if the department determines that the organization has no
	significant connection to an entity that operates a care management organization
	and if any of the following applies:
- 6	SECTION 15. 46.285 (1) (a) of the statutes is amended to read:
	46.285 (1) (a) For a pilot project established an entity with which the
	department has contracted under s. 46.281 (1) (d) 2. (e) 1., provision of the services
	specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
	provision of services of the care management organization by January 1, 2001.

1	SECTION 16. 49.45 (3) (ag) of the statutes is amended to read:
2	49.45 (3) (ag) Reimbursement shall be made to each entity contracted with
3	under s. $46.281(1)(d)(e)$ for functional screens performed under s. $46.281(1)(d)$ by
4	the entity.
5	(END)

ASSEMBLY SUBSTITUTE AMENDMENT, TO 2005 ASSEMBLY BILL 1110

1	AN ACT to repeal 46.281 (1) (d) (intro.), 46.281 (1) (d) 1. and 46.281 (1) (e) (intro.);
2	to renumber and amend 46.281 (1) (d) 2.; to amend 46.27 (4) (c) 8., 46.27 (5)
3	(am), 46.27 (6) (a) 3., 46.27 (6g) (intro.), 46.27 (9) (c), 46.281 (1) (e) 1., 46.281 (1)
4	(e) 2., 46.281 (1) (g) 3., 46.282 (2) (a) (intro.), 46.283 (2) (b) (intro.), 46.284 (4) (e),
5	46.285 (1) (a) and 49.45 (3) (ag); and to create 46,2804 of the statutes; relating
6	to: contracts with entities to operate resource centers and care management
7	organizations under the Family Care Program, the option of self-directed
8	services, review of expansions of capitation of payments under managed care
9	programs for provision of long-term care services and long-term care
10	evaluations.

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Analysis by the Legislative Reference Bureau

Currently, the Department of Health and Family Services (DHFS) administers Family Care, a program that provides in certain areas a flexible long-term care benefit called the Family Care benefit. A person must be at least 18 years of age,

meet functional and financial eligibility requirements, and have a physical disability, a developmental disability, or infirmities of aging to qualify for the Family Care benefit.

Under current law, before July 1, 2001, DHFS was required to establish in certain geographical areas pilot projects under which DHFS contracted with counties, Family Care districts, federally recognized American Indian tribes or bands, or the Great Lakes Inter-Tribal Council, Inc., to operate resource centers (organizations that provide information and referral services and determine financial and functional eligibility of prospective enrollees) or care management organizations (organizations that assess enrollees' service needs, develop comprehensive care plans for each enrollee, and provide or contract for provision of necessary services), or both. After June 30, 2001, if the local long-term care council for an applicable area had developed a required initial plan, and if authorized and funded by the legislature, DHFS was required to contract with one or more entities in addition to those under pilot projects, for services of a resource center or care management organization; however, as affected by 2005 Wisconsin Act 25 (the biennial budget act), any prospective additional contract with an entity to operate a resource center requires advance approval by the Joint Committee on Finance (JCF), on a passive review basis. Currently, DHFS must conduct on-going evaluations of Family Care.

This substitute amendment eliminates the requirements for establishing Family Care pilot projects before July 1, 2001, and integrates requirements for those pilot projects with current requirements for contracts with resource centers and care management organizations. The substitute amendment specifies that DHFS may contract with a county, a family care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or two or more of these entities to administer the family care benefit as care management organizations or resource centers. The substitute amendment authorizes DHFS to contract with these entities to administer care management organizations in geographic areas in which, in the aggregate, more than 29 percent of the state population that is eligible for the Family Care benefit resides only if such a proposed contract receives advance approval from JCF. Further, the substitute amendment modifies requirements for contracts between DHFS and entities for operation of resource centers to require active approval of each proposed contract by JCF, rather than approval on a passive review basis.

The substitute amendment requires that, if DHFS intends to expand its use of capitation payments under managed care programs for provision of long-term care services over the number of capitated payments made on behalf of individuals enrolled in these managed care programs under 2005 Wisconsin Act 25, the department must first notify JCF of that intention, and JCF must approve the expansion.

The substitute amendment requires that a care management organization provide each Family Care enrollee with a form on which the enrollee must indicate whether he or she has been offered the option of arranging for, managing, and monitoring his or her own Family Care benefit directly or with assistance. The enrollee also must indicate whether he or she accepted or declined the option.

same resurrement applies to the care manager of a managed care program for provision of long-term

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(e) 1.

The substitute amendment also requires that the evaluations that DHFS must make concerning Family Care include client access to services, the availability of client choice of living and service options (including the opportunity for the client to have self-directed services), quality of care, and cost effectiveness. Lastly, the substitute amendment expands these evaluations to include the entire long-term care system.

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

SECTION 1. 46.27 (4) (c) 8. of the statutes is amended to read:

46.27 (4) (c) 8. If a pilot project contract with an entity under s. 46.281 (1) (d) (e) 1. is established in the county, a description of how the activities of the pilot project entity relate to and are coordinated with the county's proposed program.

SECTION 2. 46.27 (5) (am) of the statutes is amended to read:

department or aging unit shall utilize persons for each assessment who can determine the needs of the person being assessed and who know the availability within the county of services alternative to placement in a nursing home. If any hospital patient is referred to a nursing home for admission, these persons shall work with the hospital discharge planner in performing the activities specified in sub. (6). The county department or aging unit shall coordinate the involvement of representatives from the county departments under ss. 46.215, 46.22, 51.42 and 51.437, health service providers and the county commission on aging in the assessment activities specified in sub. (6), as well as the person being assessed and members of the person's family or the person's guardian. This paragraph does not apply to a county department or aging unit in a county where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established

SECTION 3. 46.27 (6) (a) 3. of the statutes is amended to read:

46.27 (6) (a) 3. In each participating county, except in counties where a pilot project in which the department has contracted with an entity under s. 46.281 (1) (d) is established (e) 1., assessments shall be conducted for those persons and in accordance with the procedures described in the county's community options plan. The county may elect to establish assessment priorities for persons in target groups identified by the county in its plan regarding gradual implementation. If a person who is already admitted to a nursing home requests an assessment and if funds allocated for assessments under sub. (7) (am) are available, the county shall conduct the assessment.

SECTION 4. 46.27 (6g) (intro.) of the statutes is amended to read:

46.27 (6g) FISCAL RESPONSIBILITY. (intro.) Except as provided in s. 51.40, and within the limitations under sub. (7) (b), the fiscal responsibility of a county for an assessment, unless the assessment is performed by an entity under a contract as specified under s. 46.281 (1) (d) (e) 1., case plan, or services provided to a person under this section is as follows:

SECTION 5. 46.27 (9) (c) of the statutes is amended to read:

46.27 (9) (c) All long-term community support services provided under this pilot project in lieu of nursing home care shall be consistent with those services described in the participating county's community options plan under sub. (4) (c) 1. and provided under sub. (5) (b). Unless the department has contracted under s. 46.281 (1) (d) (e) 1. with an entity other than the county department, each county participating in the pilot project shall assess persons under sub. (6).

SECTION 6. 46.2804 of the statutes is created to read:

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46.2804 Expansion of managed care programs for long-term care services. If the department intends to expand its use of capitation payments under managed care programs for provision of long-term care services over the number of capitated payments made on behalf of individuals enrolled in these managed care programs under 2005 Wisconsin Act 25, the department shall first notify the joint committee on finance in writing of the proposed expansion. Unless the proposed expansion is a part of a biennial budget bill, the joint committee on finance shall, within 14 working days after the date of the department's notification, schedule a meeting under s. 13.10 to approve, modify, or disapprove the proposed expansion. The department may make the expansion only as approved or modified by the joint committee on finance.

SECTION 7. 46.281 (1) (d) (intro.) of the statutes is repealed.

SECTION 8. 46.281 (1) (d) 1. of the statutes is repeated.

SECTION 9. 46.281 (1) (d) 2. of the statutes is renumbered 46.281 (1) (d) and amended to read:

46.281 (1) (d) In geographic areas in which resides, in the aggregate, no more than 29% 29 percent of the state population that is eligible for the family care benefit, contract with counties or tribes or bands under a pilot project to demonstrate the ability of counties or tribes or bands a county, a family care district, a tribe or band, the Great Lakes Inter-Tribal Council, Inc., or with 2 or more of these entities to manage all long-term care programs and administer the family care benefit as care management organizations. If the department proposes to contract with these entities to administer care management organizations in geographic areas in which resides, in the aggregate, more than 29 percent of the state population that is eligible for the family care benefit, the department shall first notify the joint committee on

1	finance in writing of the proposed contract. Within 14 working days after the date
2	of the department's notification, the joint committee on finance shall schedule a
3	meeting under s. 13.10 to approve, modify, or disapprove the proposed contract. The
4	department may enter into the proposed contract only as approved or modified by the
5	joint committee on finance.
6	SECTION 10. 46.281 (1) (e) (intro.) of the statutes, as affected by 2005 Wisconsin
77	Aot 25, is repealed
/8	SECTION 11. 46.281 (1) (e) 1. of the statutes, as affected by 2005 Wisconsin Act
9	25, is amended to read:
10	46.281 (1) (e) 1. If Subject to the requirements of par. (d), if the local long-term
11	care council for the applicable area has developed the initial plan under s. 46.282 (3)
12	(a) 1., contract with entities specified under par. (d) and may, only if specifically
13	authorized by the legislature and if the legislature appropriates necessary funding,
14	contract as so authorized with one or more entities in addition to those specified in
15	par. (d) certified as meeting requirements under s. 46.284 (3) for services of the entity
16	as a care management organization.
17	SECTION 12. 46.281 (1) (e) 2. of the statutes, as created by 2005 Wisconsin Act
18	25, is amended to read:
19	46.281 (1) (e) 2. Contract with entities specified under par. (d) and may contract
20	with other entities for the provision of services under s. 46.283 (3) and (4), except that
21	after July 27, 2005, the department shall notify the joint committee on finance in
22	writing of any proposed contract with an entity that did not have a contract to provide
23	services under s. 46.283 (3) and (4) before July 27, 2005. If the cochairpersons of the
24	committee do not notify the department within 14 working days after the date of the
25	department's notification that the committee has scheduled a meeting for the

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1	purpose of reviewing the proposed contract, the department may enter into the
2	proposed contract. If within 14 working days after the date of the department's
3	notification the cochairpersons of the committee notify the department that the
4	committee has scheduled a meeting for the purpose of reviewing the proposed
5	contract, the department may enter into the proposed contract only upon approval
6	of the committee. Within 14 working days after the date of the department's
7	notification, the joint committee on finance shall schedule a meeting under s. 13.10
8	to approve, modify, or disapprove the proposed contract. The department may enter
9	into the proposed contract only as approved or modified by the joint committee on
10	finance.
11	SECTION 13. 46.281 (1) (g) 3. of the statutes is amended to read:
12	46.281 (1) (g) 3. Conduct ongoing evaluations of the long-term care system
13	specified in ss. 46.2805 to 46.2895 as to client access to services, the availability of
14	client choice of living and service options, quality of care, and cost-effectiveness.
15	Evaluation of the availability of client choice shall include evaluation of the
16	opportunity for a client to arrange for, manage, and monitor his or her family care
17	benefit directly as specified in s. 46.284 (4) (e).
18	SECTION 14. 46.282 (2) (a) (intro.) of the statutes is amended to read:
19	46.282 (2) (a) Appointment by a county. (intro.) In a county that participates
20	in a pilot project in which the department has a contract under s. 46.281 (1) (d) (e)
21	and before a county participates in the program under ss. 46.2805 to 46.2895, the
22	following shall be done:
23	SECTION 15. 46.283 (2) (b) (intro.) of the statutes, as affected by 2005 Wisconsin
24	Act 25 is amended to read:

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46.283 (2) (b) (intro.) After June 30, 2001, the department shall contract with the entities specified under s. 46.281 (1) (d) 1. and may, if the applicable review conditions under s. 48.281 (1) (e) 2. s. 46.281 (1) (e) 2. are satisfied, in addition to contracting with these entities, contract to operate a resource center with counties, family care districts, or the governing body of a tribe or band or the Great Lakes Inter-Tribal Council, Inc., under a joint application of any of these, or with a private nonprofit organization if the department determines that the organization has no significant connection to an entity that operates a care management organization and if any of the following applies:

-8-

SECTION 16. 46.284 (4) (e) of the statutes is amended to read:

46.284 (4) (e) Provide, within guidelines established by the department, a mechanism by which an enrollee may arrange for, manage and monitor his or her family care benefit directly or with the assistance of another person chosen by the enrollee. The care management organization shall provide each enrollee with a form on which the enrollee shall indicate whether he or she has been offered the option under this paragraph and whether he or she has accepted or declined the option. If the enrollee accepts the option, the care management organization shall monitor the enrollee's use of a fixed budget for purchase of services or support items from any qualified provider, monitor the health and safety of the enrollee and provide assistance in management of the enrollee's budget and services at a level tailored to the enrollee's need and desire for the assistance.

SECTION 17. 46/285 (1) (a) of the statutes is amended to read:

46.285 (1) (a) For a pilot project established an entity with which the

department has contracted under s. 46.281 (1) (d) 2. (e) 1., provision of the services

1	specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
2	provision of services of the care management organization by January 1, 2001.
3	SECTION 18. 49.45 (3) (ag) of the statutes is amended to read:
4	49.45 (3) (ag) Reimbursement shall be made to each entity contracted with
5	under s. 46.281 (1) (d) (e) for functional screens performed under s. 46.281 (1) (d) by
6	the entity.
7	(END)

2005–2006 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

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Further, a care manager of a managed care program for provision of long-term care services must provide a mechanism by which an enrollee, beneficiary, or recipient of the program may arrange for, manage, and monitor his or her benefit directly or with the assistance of another person chosen by the enrollee, beneficiary, or recipient.

INSERT 4-16 B

(2) Under a managed care program for provision of long-term care services, the care manager shall provide, within guidelines established by the department and mechanism by which an enrollee, beneficiary, or recipient of the program may arrange for, manage, and monitor his or her benefit directly or with the assistance of another person chosen by the enrollee, beneficiary, or recipient. The care manager shall provide each enrollee, beneficiary, or recipient with a form on which the enrollee, beneficiary, or recipient shall indicate whether he or she has been offered the option under this subsection and whether he or she has accepted or declined the option. If the enrollee, beneficiary, or recipient accepts the option, the care manager shall monitor the use by the enrollee, beneficiary, or recipient of a fixed budget for purchase of services or support items from any qualified provider, monitor the health and safety of the enrollee, beneficiary, or recipient, and provide assistance in management of the budget and services of the enrollee, beneficiary, or recipient for the assistance.



State of Misconsin LEGISLATIVE REFERENCE BUREAU

RESEARCH APPENDIX - PLEASE DO NOT REMOVE FROM DRAFTING FILE

Date Transfer Requested: 03/30/2006

(Per: DAK)

™ Appendix A

The 2005 drafting file for LRB 05s0665/2

has been copied/added to the 2005 drafting file for

LRB 05s0673

The attached 2005 draft was incorporated into the new 2005 draft listed above. For research purposes, this cover sheet and the attached drafting file were copied, and added, as a appendix, to the new 2005 drafting file. If introduced this section will be scanned and added, as a

🕬 This cover sheet was added to rear of the original 2005 drafting file. The drafting file was then returned, intact, to its folder and filed.