2007 DRAFTING REQUEST

Bill

Received: 09/06/2006					Received By: rryan				
Wanted	l: As time pern	nits			Identical to LRB:				
For: Do	onald Friske (6	508) 266-7694			By/Representing: Tim Gary				
This fil	e may be shown to any legislator: NO Drafter: rryan Addl. Drafters: Health - medical assistance Extra Copies: DAK								
May Co	ontact:								
Subject	: Health	- medical assis	stance						
Submit	via email: YES	en de la companya de La companya de la co							
Reques	ter's email:	Rep.Frisk	e@legis.wis	consin.gov					
Carbon	copy (CC:) to:								
Pre To	pic:	* *************************************				***************************************	*************************************		
No spec	cific pre topic g	iven							
Topic:				A A. M. Alexander			Required State		
Prompt	payment of pha	rmacist under S	Senior Care						
Instruc	etions:								
See Atta	ached						-		
 Draftin	g History:								
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	<u>Jacketed</u>	Required		
/?				***************************************			State		
/1	rryan 10/26/2006	jdyer 10/30/2006	rschluet 10/30/200	06	sbasford 10/30/2006	lparisi 05/22/2007			

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May Con	tact:							
Subject:	Health	- medical assis	tance					
Submit v	ia email: YES							
Requeste	r's email:	Rep.Friske	e@legis.wisc	onsin.gov				
Carbon co	opy (CC:) to:		*					
Pre Topi	ic:							
No specif	ic pre topic gi	ven						
Topic:								
Prompt p	ayment of pha	rmacist under S	Senior Care					
Instructi See Attac						· ·		
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<**END>**

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Identical to LRB:

For: Donald Friske (608) 266-7694 By/Representing: Tim Gary

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

May Contact: Addl. Drafters:

Subject: Health - medical assistance Extra Copies: DAK

Submit via email: YES

Requester's email: Rep.Friske@legis.state.wi.us

Carbon copy (CC:) to:

Pre Topic:

No specific pre topic given

Topic:

Prompt payment of pharmacist under Senior Care

Instructions:

See Attached

Drafting History:

<u>Vers.</u> <u>Drafted</u> <u>Reviewed</u> <u>Typed</u> <u>Proofed</u> <u>Submitted</u> <u>Jacketed</u> Required

/? rryan 1 28 ild 1

FE Sent For:

<END>

Ryan, Robin

From:

Kraft, Becky

Sent:

Wednesday, September 06, 2006 2:28 PM

To:

Kennedy, Debora; Ryan, Robin

Subject:

FW:

From:

Gary, Tim

Sent:

Wednesday, September 06, 2006 2:24 PM

To:

LRB.Legal

Subject:

Rep. Friske respectfully requests LRB draft legislation for the upcoming session that will accomplish the following goal:

Require pharmacy benefit managers operating State-government-Assisted Rx programs (ie SeniorCare) in Wisconsin to provide payments to pharmacists within 30 days to pharmacies operating in Wisconsin.

If you have any questions, please feel free to email or call me.

Tim Gary Research Assistant to Representative Donald R Friske 266-7694

49.688 (7) (a) Stats - pay Sen. Care Claims under MA schedule

HTS 109.54 - adopts MA schedule for paying

HFS 106.04 (1/a)
must puy 95% claims when 30 days of
veryt of claim;
99% When 90 days
100% When 180 days

42 CFR 447, 45 (d) - fed, timelinas for priorder payment under MicAIS

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU

LRB

Research (608-266-0341)

Library (608-266-7040)

Legal (608-266-3561)

LRB

Research (000-200-0541) Elizary (000-200-7040) Legar (000-200-3501)
LRB -0145
Call to Tim 10/25/06
Renewed Admin Cocle HFS 106.04 (1) (a)
d fed vode - 42 CFR 447. 45 (d)
Discussed whether to affect just Sen Come or also mA/Badger
Also, whether to affect payment only for pharmacy or all services
Tim: Problem is that small phainaues don't
get paid quielly
Draft bill that regimes for all
MA/Be/Sen lave payments / covering all
benefits) that DHFS pay
95% Win 30 days & 100%
Win 45 days
matsclsen care payments (covering all benefits) that DHTS pay 95% w/m 30 days of 100% w/m 45 days codify exceptions from HTS 106,04(1)(b)
Wisconsin Legislative Reference Bureau



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State of Misconsin 2007 - 2008 LEGISLATURE

LRB-0145/2

En 10/26/06

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

Gen

AN ACT ...; relating to: deadlines for payment of provider claims under the

Medical Assistance and Badger Care programs and the prescription drug

assistance program for elderly persons.

Analysis by the Legislative Reference Bureau

Under current administrative rules, the Department of Health and Family Services (DHFS) must issue payment for at least 95 percent of provider claims under the Medical Assistance, Badger Care, and Senior Care programs within 30 days of receipt of the claims, issue payment for at least 99 percent of claims within 90 days of receipt, and issue payment for 100% of claims within 180 days of receipt. The rules allow exceptions to these deadlines under the following circumstances: for claims that are paid in accordance with a court order, hearing decision, or corrective action taken by DHFS; if a claim for payment is also made under Medicare; or if the U.S. Department of Health and Human Services waives federal payment deadlines.

This bill codifies the requirement that DHFS issue payment for at least 95 percent of claims under the Medical Assistance, Badger Care, and Senior Care programs within 30 days of receipt of the claims and requires that DHFS issue payment for 100 percent of such claims within 45 days of receipt. The bill also codifies the exceptions to payment deadlines for payments in accordance with court orders, hearing decisions, or corrective actions, for claims for which a Medicare claim is submitted, and if the federal government has granted a waveer of payment deadlines.

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

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

SECTION 1. 49.45 (3) (cm) of the statutes is created to read:

49.45 (3) (cm) 1. Except as provided under subd. 2., the department shall issue payment for at least 95 percent of proper provider claims for reimbursement under the medical assistance program within 30 days of receipt of the claims and shall issue payment for 100 percent of such claims within 45 days of receipt of the claims.

- 2. The department may exceed the claims payment deadlines under subd.1 under any of the following circumstances:
- a. If a claim is filed under medicare, as defined in par. (L) 1. b., for payment for a service, the department has up to 6 months after the department or the provider receives notice of the disposition of the medicare claim to issue payment for the service.
- b. The department may issue payments at any time in accordance with a court order or to comply with a hearing decision or a corrective action taken by the department.
- c. If the department is granted a waiver under 42 CFR 447.45 (e) that exempts the department from federal deadlines for payment of claims, the department may exceed the deadlines under subd. It to the extent permitted in the waiver.
 - **SECTION 2.** 49.665 (3) of the statutes is amended to read:
- 49.665 (3) ADMINISTRATION. Subject to sub. (2) (a) 2., the department shall administer a program to provide the health services and benefits described in s. 49.46 (2) to persons that meet the eligibility requirements specified in sub. (4) and issue

payment for such services in accordance with s. 49.45 (3) (cm). The department shall promulgate rules setting forth the application procedures and appeal and grievance procedures. The department may promulgate rules limiting access to the program under this section to defined enrollment periods. The department may also promulgate rules establishing a method by which the department may purchase family coverage offered by the employer of a member of an eligible family or of a member of an eligible child's household, or family or individual coverage offered by the employer of an eligible unborn child's mother or her spouse, under circumstances in which the department determines that purchasing that coverage would not be more costly than providing the coverage under this section.

History: 1997 a. 27, 237; 1999 a. 9; 2001 a. 16, 109; 33 a. 33; 2005 a. 25.

SECTION 3. 49.688 (7) (a) of the statutes is amended to read:

49.688 (7) (a) Except as provided in par. (b), from the appropriation accounts under s. 20.435 (4) (bv), (j), and (pg), beginning on September 1, 2002, the department shall, under a schedule that is identical to that used by the department for payment of pharmacy provider claims under medical assistance, including payment deadlines under s. 49.45 (3) cm), provide to pharmacies and pharmacists payments for prescription drugs sold by the pharmacies or pharmacists to persons eligible under sub. (2) who have paid the deductible specified under sub. (3) (b) 1. or 2. or who, under sub. (3) (b) 1., are not required to pay a deductible. The payment for each prescription drug under this paragraph shall be at the program payment rate, minus any copayment paid by the person under sub. (5) (a) 2. or 4., and plus, if applicable, incentive payments that are similar to those provided under s. 49.45 (8v). The department shall devise and distribute a claim form for use by pharmacies and pharmacists under this paragraph and may limit payment under this paragraph to

those prescription drugs for which payment claims are submitted by pharmacists or pharmacies directly to the department. The department may apply to the program under this section the same utilization and cost control procedures that apply under rules promulgated by the department to medical assistance under subch. IV of ch. 49.

History: 2001 a. 16, 109; 2003 a. 33.

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(END)

Parisi, Lori

From:

Sent:

Gary, Tim Tuesday, May 22, 2007 2:49 PM LRB.Legal

To:

Subject:

Draft Review: LRB 07-0145/1 Topic: Prompt payment of pharmacist under Senior Care

Please Jacket LRB 07-0145/1 for the ASSEMBLY.