

2007 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-SB178)

Received: **02/28/2008**

Received By: **pkahler**

Wanted: **Today**

Identical to LRB:

For: **Scott Newcomer (608) 266-3007**

By/Representing: **Carol Redell**

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

Drafter: **pkahler**

May Contact:

Addl. Drafters: **dkennedy**

Subject: **Public Assistance - med. assist.
Health - miscellaneous**

Extra Copies:

Submit via email: **YES**

Requester's email: **Rep.Newcomer@legis.wisconsin.gov**

Carbon copy (CC:) to:

Pre Topic:

No specific pre topic given

Topic:

Autism funding and treatment plans and brochure

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	pkahler 02/28/2008	kfollett 02/28/2008		_____			
/1			rschluet 02/28/2008	_____	sbasford 02/28/2008	sbasford 02/28/2008	

FE Sent For:

<END>

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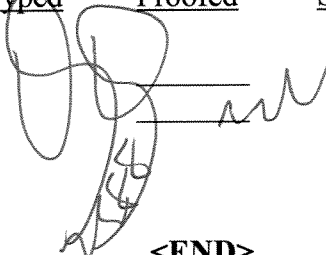
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1/?	pkahler	1/15/08 2/28/08					

FE Sent For:

<END>

(a 1435)
draft amendment as a
sub

includes:

- ① a 1388
- ② a 1394
- ③ MA funding (for autism benefit) ↑

2005

Date (time) needed Now!

LRBs 0315, 1

**SUBSTITUTE AMENDMENT
[TO A BILL]**

PJK+DAK. gf: + bjk

Use the appropriate components and routines developed for substitute amendments.

Draft

S A SUBSTITUTE AMENDMENT

TO 2005 **SB** AB 178 (LRB- /)

Regen

AN ACT ... [generate catalog] *to repeal* ... ; *to renumber* ... ; *to consolidate and renumber* ... ; *to renumber and amend* ... ; *to consolidate, renumber and amend* ... ; *to amend* ... ; *to repeal and recreate* ... ; and *to create* ... of the statutes; **relating to:** *Insert RC*

[NOTE: See section 4.02 (2) (br), Drafting Manual, for specific order of standard phrases.]

Insert A →

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

SECTION #.





**ASSEMBLY AMENDMENT ,
TO 2007 SENATE BILL 178**

Senat ROR
↓

1 At the locations indicated, amend the bill as follows:

2 **1.** Page 1, line 4: after "disorders" insert ", requiring development and
3 distribution of a brochure, requiring a treatment plan and referral when certain
4 diagnoses are made, increasing funding for the Medical Assistance autism benefit,
5 and making an appropriation".

6 **2.** Page 2, line 9: after that line insert:

7 **SECTION 51.03 (7)** of the statutes is created to read:

8 51.03 (7) The department shall develop and periodically update a brochure
9 describing the activities that a parent of a child with autism may engage in at home
10 with the child to complement the child's treatment or individualized education
11 program, as defined in s. 115.76 (9). In developing the brochure, the department
12 shall consult with teachers of special education, as defined in s. 115.76 (15); parents
13 of autistic children; physicians; and representatives of organizations that advocate

1 for the interests of children with disabilities. The department shall distribute the
2 brochure to local educational agencies, as defined in s. 115.76 (10), and physicians."

3 ~~3. Page 3, line 4: after that line insert:~~

4 ~~SECTION 5g.~~ 146.85 of the statutes is created to read:

5 **146.85 Treatment plan and referral required.** (1) Except as provided
6 under sub. (2), a health care provider, as defined in s. 146.81 (1), who diagnoses a
7 patient with a condition, injury, or illness, other than alcoholism, drug dependency,
8 mental illness, or developmental disability, shall provide the patient or, if the patient
9 is a minor, the patient's parent, guardian, or legal custodian, with a treatment plan
10 for the patient. For a condition, injury, or illness that requires further treatment or
11 services, the health care provider shall provide the patient or, if the patient is a
12 minor, the patient's parent, guardian, or legal custodian, with any necessary and
13 appropriate referral for the treatment or services.

14 (2) A health care provider need not provide a treatment plan under sub. (1) for
15 a condition, injury, or illness that may be successfully treated during the patient visit
16 at which the diagnosis is made."

17 ~~4. Page 4, line 23: after that line insert:~~

18 ~~SECTION 4.~~ **Fiscal changes.**

19 (1) **MEDICAL ASSISTANCE AUTISM BENEFIT.** In the schedule under section 20.005
20 (3) of the statutes for the appropriation to the department of health and family
21 services under section 20.435 (4) (b) of the statutes, as affected by the acts of 2007,
22 the dollar amount is increased by \$6,060,000 for fiscal year 2008-09 to increase
23 funding for the autism benefit under the children's long-term care Medical
24 Assistance waiver program, as described under 2003 Wisconsin Act 33, section 9124

1 (8c), to provide autism services to children on the statewide waiting list for those
2 services under that program." *De*

3 **5.** Page 4, line 25: delete "This act" and substitute "The treatment of sections
4 40.51 (8) and (8m), 66.0137 (4), 111.91 (2) (n), 120.13 (2) (g), 185.981 (4t), 185.983 (1)
5 (intro.), 609.87, and 632.895 (15) of the statutes".

6 **6.** Page 5, line 18: delete lines 18 to 20 and substitute:

7 **"SECTION 11c. Effective dates.** This act takes effect on the day after
8 publication, except as follows:

9 (1) INSURANCE COVERAGE OF AUTISM TREATMENT. The treatment of sections 40.51
10 (8) and (8m), 66.0137 (4), 111.91 (2) (n), 120.13 (2) (g), 185.981 (4t), 185.983 (1)
11 (intro.), 609.87, and 632.895 (15) of the statutes and SECTION 10 of this act take effect
12 on the first day of the 7th month beginning after publication."

13

(END)

D-note



State of Wisconsin
2007 - 2008 LEGISLATURE

LRBa1435/1
PJK&DAK:kjf&bjk:pg

**ASSEMBLY AMENDMENT,
TO 2007 SENATE BILL 178**

insert RC

1 At the locations indicated, amend the bill as follows:

2 **1.** Page 1, line 4: after "disorders" insert ", requiring development and
3 distribution of a brochure, requiring a treatment plan and referral when certain
4 diagnoses are made, increasing funding for the Medical Assistance autism benefit,
5 and making an appropriation".

6 **2.** Page 2, line 9: after that line insert:

7 "SECTION 2m. 51.03 (7) of the statutes is created to read:

8 51.03 (7) The department shall develop and periodically update a brochure
9 describing the activities that a parent of a child with autism may engage in at home
10 with the child to complement the child's treatment or individualized education
11 program, as defined in s. 115.76 (9). In developing the brochure, the department
12 shall consult with teachers of special education, as defined in s. 115.76 (15); parents
13 of autistic children; physicians; and representatives of organizations that advocate



**ASSEMBLY SUBSTITUTE AMENDMENT,
TO 2007 SENATE BILL 178**

Insert A

1 **AN ACT relating to:** increasing funding for the Medical Assistance autism
2 benefit.

Analysis by the Legislative Reference Bureau

This substitute amendment increases a general purpose revenue appropriation to the Department of Health and Family Services (DHFS) by \$6,060,000 in fiscal year 2008-09 for the autism benefit under the Medical Assistance (MA) program. Under an MA waiver of federal law, DHFS provides in-home services to children who have been diagnosed with an autism spectrum disorder and who would not otherwise be eligible for MA benefits. The funding increase under this substitute amendment would be used to provide those services to children diagnosed with an autism spectrum disorder who are on the statewide waiting list for those services.

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

3 **SECTION 1. Fiscal changes.**

4 (1) MEDICAL ASSISTANCE AUTISM BENEFIT. In the schedule under section 20.005
5 (3) of the statutes for the appropriation to the department of health and family

Insert A-1

treatment to cover outpatient services for the treatment of autism, Asperger's syndrome, and pervasive developmental disorder not otherwise specified (autism spectrum disorders). The coverage need not exceed \$7,000, or equivalent benefits measured in services rendered, in a policy year. The requirement specifically does not apply to limited-scope benefit plans, medicare replacement or supplement policies, or policies covering only hospital and surgical charges. The coverage may be subject to any limitations or exclusions or cost-sharing provisions that apply generally under the policy or plan. In addition, the substitute amendment prohibits any health care plan or self-insured governmental or school district health plan that excludes coverage for the treatment of autism spectrum disorders from denying coverage to an insured who has been diagnosed with an autism spectrum disorder for the treatment of another condition or complaint on the basis that the other condition or complaint may be, directly or indirectly, caused by or related to the insured's autism spectrum disorder.

Enser A-1 10/2

Currently, under the laws relating to mental health, the Department of Health and Family Services (DHFS) may, within the limits of available state and federal funds, promote use by mental health and alcohol and other drug abuse services providers of individualized service planning, under which the providers develop written individualized service plans that promote treatment and recovery, together with service consumers and their families and advocates. The substitute amendment requires a provider who diagnoses a patient on an outpatient or voluntarily admitted inpatient basis as alcoholic, drug dependent, mentally ill, or developmentally disabled to participate in individualized service planning with the patient (or, if a minor, with the patient and his or her parent, guardian, or legal custodian). If the patient's condition requires further treatment, the provider must provide the patient (or, if a minor, the patient's parent, guardian, or legal custodian) with any necessary and appropriate referral for the treatment. The substitute amendment also requires a health care provider who diagnoses a patient with a condition, injury, or illness other than alcoholism, drug dependency, mental illness, or developmental disability, that requires further treatment, to provide the patient (or, if a minor, the patient's parent, guardian, or legal custodian) with a treatment plan and to provide any necessary and appropriate referral for further treatment or services.

Under current law, a physician, nurse, psychologist, social worker, administrator of a social agency, or teacher employed by a local educational agency (typically, a school district) who reasonably believes that a child has a disability must refer the child to the local educational agency. The local educational agency is responsible for evaluating the child and preparing an individualized education program for the child. At least annually, the local educational agency must inform all those who are required to make referrals (other than teachers) about the agency's referral and evaluation procedures.

This substitute amendment requires the local educational agency annually to notify teachers as well as the other listed professionals. The substitute amendment also directs the Department of Public Instruction (DPI) annually to notify each

insert
A-1 2 of 2

DHFS

person required to make referrals to the local educational agency of his or her responsibility to make such referrals.

In addition, the substitute amendment directs ~~DEI~~ to develop and periodically update a brochure describing the activities that a parent or guardian of a child with autism may engage in at home with the child to complement the child's treatment or individualized education program. ~~DEI~~ must distribute the brochure to local educational agencies and physicians.

The substitute amendment increases by \$8,000,000 an appropriation to DHFS for the autism benefit under the children's long-term care Medical Assistance waiver program.

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

1 SECTION 1. 40.51 (8) of the statutes, as affected by 2007 Wisconsin Act 36, is
2 amended to read:

3 40.51 (8) Every health care coverage plan offered by the state under sub. (6)
4 shall comply with ss. 631.89, 631.90, 631.93 (2), 631.95, 632.72 (2), 632.746 (1) to (8)
5 and (10), 632.747, 632.748, 632.83, 632.835, 632.85, 632.853, 632.855, 632.858,
6 632.87 (3) to ~~(5)~~ (6), 632.895 (5m) and (8) to ~~(15)~~ (16), and 632.896.

7 SECTION 2. 40.51 (8m) of the statutes, as affected by 2007 Wisconsin Act 36, is
8 amended to read:

9 40.51 (8m) Every health care coverage plan offered by the group insurance
10 board under sub. (7) shall comply with ss. 631.95, 632.746 (1) to (8) and (10), 632.747,
11 632.748, 632.83, 632.835, 632.85, 632.853, 632.855, 632.858, and 632.895 (11) to ~~(15)~~
12 (16).

13 SECTION 3. 51.075 of the statutes is created to read:

14 **51.075 Individualized service plan and referral required.** A provider of
15 treatment or services under this chapter who, on an outpatient basis or for an adult
16 voluntarily admitted under s. 51.10 or 51.45 or a minor admitted under s. 51.13,
17 diagnoses a patient as alcoholic, drug dependent, mentally ill, or developmentally

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRBa1435/1dn
PJK:kjf:pg

February 28, 2008

Date
↑ *skt*

substitute

It may be argued that, because this amendment relates to a different subject and is intended to accomplish a different purpose than that of SB 178, totally alters the nature of SB 178, and substantially expands the scope of SB 178, this amendment is nongermane under Assembly Rule 54 (1) and (3) (f).

Pamela J. Kahler
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DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRBs0315/1dn
PJK:kjf:rs

February 28, 2008

It may be argued that, because this substitute amendment relates to a different subject and is intended to accomplish a different purpose than that of SB 178, totally alters the nature of SB 178, and substantially expands the scope of SB 178, this substitute amendment is nongermane under Assembly Rule 54 (1) and (3) (f).

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