



**2007 DRAFTING REQUEST**

**Bill**

Received: **09/21/2006**

Received By: **rryan**

Wanted: **As time permits**

Identical to LRB:

For: **Administration-Budget**

By/Representing: **Milioto**

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

Drafter: **rryan**

May Contact:

Addl. Drafters:

Subject: **Health - long-term care**

Extra Copies:

Submit via email: **NO**

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**Pre Topic:**

DOA:.....Milioto, BB0030 -

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**Topic:**

Entitlement and eligibility for Family Care

---

**Instructions:**

See Attached

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**Drafting History:**

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	rryan 09/21/2006	wjackson 09/21/2006		_____			S&L
/P1	rryan 01/04/2007	wjackson 01/08/2007	pgreensl 09/25/2006	_____	sbasford 09/25/2006		S&L
/P2	rryan 01/10/2007	wjackson 01/10/2007	nmatzke 01/08/2007	_____	sbasford 01/08/2007		S&L
			nmatzke 01/08/2007	_____	cduerst 01/08/2007		
			nmatzke 01/08/2007	_____	mbarman 01/08/2007		
/P3	rryan	wjackson	nmatzke	_____	cduerst		S&L

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/P5	rryan 02/01/2007	csicilia 02/01/2007	rschluet 01/30/2007	_____	sbasford 01/30/2007		S&L
/P6			nmatzke 02/01/2007	_____	sbasford 02/02/2007		

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			nmatzke 01/08/2007	_____	mbarman 01/08/2007		
/P3	rryan	wjackson	nmatzke nwn 2/1	_____	cduerst		S&L
				nwn/jf 2/1			

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/P5			rschluet 01/30/2007	_____	sbasford 01/30/2007		

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/ PG jc 2/1/07

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**Topic:**

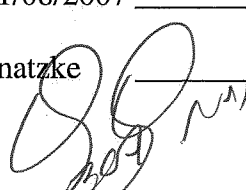
Entitlement and eligibility for Family Care

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See Attached

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/P4		/p5 WLj 1/30	rschluet _____ 01/25/2007 _____		sbasford 01/25/2007		

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			nnatzke 01/08/2007	_____	mbarman 01/08/2007		
/P3			nnatzke	_____	cduerst		

*/p4 wjl/24*

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/P2		<i>1 p3 wly 1/10</i>	nmatzke 01/08/2007	_____	sbasford 01/08/2007		

FE Sent For:

*nwn*  
*1/10*  
*nwn/*  
*1/10*  
**<END>**

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/P1	rryan	<i>p2 wly 1/5</i>	pgreensl 09/25/2006	_____	sbasford 09/25/2006		
			nwn 1/8	nwn/pg 1/8			

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Subject: Health - long-term care

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Submit via email: YES

Requester's email:

Carbon copy (CC:) to: FORSAAC@dhfs.state.wi.us

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/?	rryan	1/1 WLJ 9/21	9/22 PG	9/25 8/21/03			

FE Sent For:

<END>

DAK/RLR

LRB-0333

## 2007-09 Budget Bill Statutory Language Drafting Request

- Topic: **Family Care – Phase-In of Entitlement for Non-MA Eligible Persons**
- Tracking Code: BB0030
- SBO team: Health
- SBO analyst: **Steve Milioto**
  - Phone: 266-8593
  - Email: Steve.Milioto@Wisconsin.gov
- Agency acronym: DHFS
- Agency number: 435

Priority - High

## Family Care Phase-in of Entitlement for Non-MA Eligible Persons

### Current Language

S.46.286(3)(d) directs the Department to establish no later than January 1, 2008 the Family Care benefit on an entitlement basis for persons who meet the functional criteria for Family Care but are not eligible for Medicaid (MA).

### Proposed Change

Change January 1, 2008 to January 1, 2010.

### Effect of Change

The proposed change will extend the deadline for the establishment of the Family Care benefit on an entitlement basis for non-MA persons who are functionally eligible for Family Care. The new deadline will be January 1, 2010.

### Rationale for the Change

A sum certain amount of funding is budgeted for non-MA Family Care benefits. During the last two biennia, the Department has continuously limited enrollments for new non-MA enrollees in order to contain expenditures within the budgeted level. The limits on non-MA enrollment allows exemptions in certain situations, such as enrollment of individuals awaiting a disability determination at which point they will be Medicaid-eligible; enrollment during the deductible period for individuals who must meet a deductible to be Medicaid-eligible; people with Adult Protective Service needs at the comprehensive level of care; and people already enrolled who lose Medicaid eligibility, if they are at the comprehensive level of care. In its 07-09 biennial budget, the Department is re-estimating the annual amount of non-MA funding to \$1 million to reflect past caseload trends and intensified Department efforts to access Medicaid eligibility for potentially non-MA clients. The Department is submitting this statutory language change to provide the Department the continued authority to control the enrollment level of non-MA clients during the 07-09 biennium to stay within the budgeted level.

**Desired Effective Date:** Upon passage  
**Agency:** DHFS  
**Agency Contact:** Andy Forsaith  
**Phone:** 266-7684



State of Wisconsin  
2007 - 2008 LEGISLATURE

LRB-0333/PT

RLR:wlj:pa

stats

In 1/4/06

DOA:.....Milioto, BB0030 - Entitlement for Family Care

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

RMNR

DW

the budget

1 AN ACT ...; relating to: entitlement to the family care benefits

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

Currently, DHFS administers Family Care, a program available in several counties that combines several sources of funding to provide a flexible long-term care benefit called the family care benefit. A person must be at least 18 years of age and have a physical disability, a developmental disability, or degenerative brain disorder to qualify for the family care benefit. In addition, a person must meet both functional and financial eligibility requirements. Currently, the family care benefit is an entitlement for persons who are eligible for the Medical Assistance (MA) program and are functionally eligible at the comprehensive or intermediate level or, under certain circumstances, were receiving long-term care benefits when the family care benefit was introduced. By January 1, 2008, DHFS must extend entitlement to persons who are not MA eligible but who are functionally eligible at the comprehensive level or are in need of protective services or protective placement and functionally eligible at the intermediate level, as well as to certain persons who are not MA eligible but are functionally eligible because they were receiving long-term care benefits when the Family Care program was introduced.

This bill delays until January 1, 2010, the requirement for making the family care benefit an entitlement for persons who are not eligible for MA.

(a qualifying condition)

INS A

INS B



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:*

INS 2-1

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SECTION 1. 46.286 (3) (d) of the statutes is amended to read:  
46.286 (3) (d) The department shall determine the date, which shall not be later than January 1, ~~2008~~ 2010, on which par. (a) shall first apply to persons who are not eligible for medical assistance under ch. 49. Before the date determined by the department, persons who are not eligible for medical assistance may receive the family care benefit within the limits of state funds appropriated for this purpose and available federal funds.

(END)

Not

**Ins A:**

Currently, the family care benefit is an entitlement for persons who have a qualifying condition, satisfy functional eligibility requirements, and are eligible for Medical Assistance (MA).

**Ins B:**

This bill requires that a person be eligible for MA to receive the family care benefit, and thus eliminates the requirement that DHFS extend entitlement for the family care benefit to people who are not eligible for MA by January 1, 2008. However, the bill provides that people who are not eligible for MA but are receiving the family care benefit on the date this bill is enacted ~~as a result~~ continue to be eligible for, but not entitled to, the family care benefit.

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**Ins 2-1:**

~~SECTION #~~ 46.281 (1) (i) of the statutes is repealed.

~~SECTION #~~ 46.283 (3) (h) of the statutes is repealed.

History: 1999 a. 9, 185; 2001 a. 16, 109; 2003 a. 33; 2005 a. 25, 264, 388.

~~SECTION #~~ 46.286 (1) (b) (intro.) of the statutes is amended to read:

46.286 (1) (b) *Financial eligibility.* (intro.) A person is financially eligible if all any of the following apply:

History: 1999 a. 9, 185; 2001 a. 16, 109; 2003 a. 33; 2005 a. 25, 264, 388.

~~SECTION #~~ 46.286 (1) (b) 1. (intro.) of the statutes is repealed.

~~SECTION #~~ 46.286 (1) (b) 1. a. of the statutes is repealed.

~~SECTION #~~ 46.286 (1) (b) 1. b. and 2. of the statutes are consolidated, renumbered 46.286 (1) (b) 1m. and amended to read:

46.286 (1) (b) 1m. The person is eligible under ch. 49 for medical assistance.

~~History: 1999 a. 9, 185; 2001 a. 16, 109; 2003 a. 33; 2005 a. 25, 264, 388.~~

~~2. If subd. 1. b. applies, the person accepts medical assistance and, unless he or she is exempt from the acceptance under rules promulgated by the department, accepts medical assistance.~~

History: 1999 a. 9, 185; 2001 a. 16, 109; 2003 a. 33; 2005 a. 25, 264, 388.

Not

1 SECTION ~~4~~ 46.286 (1) (b) 3. of the statutes is created to read:

2 46.286 (1) (b) 3. The person was financially eligible for and was receiving the  
3 family care benefit on the effective date of this subdivision ... [revisor inserts date].

4 SECTION ~~4~~ 46.286 (3) (a) (intro.) of the statutes is renumbered 46.283 (3) (a)  
5 and amended to read:

6 46.283 (3) (a) (intro.) Subject to ~~pars. par.~~ (c) and (d), a person is entitled to and  
7 may receive the family care benefit through enrollment in a care management  
8 organization if he or she is at least 18 years of age, has a physical disability, as defined  
9 in s. 15.197 (4) (a) 2., a developmental disability, as defined in s. 51.01 (5) (a), or  
10 degenerative brain disorder, as defined in s. 55.01 (1v), is functionally eligible, is  
11 financially eligible, ~~under sub. (1) (b) 1m., and~~ fulfills any applicable cost-sharing  
12 requirements and ~~meets any of the following criteria:~~

13 SECTION ~~4~~ 46.286 (3) (a) 1. of the statutes is repealed.

14 SECTION ~~10~~ 46.286 (3) (a) 2. of the statutes is repealed.

15 SECTION ~~11~~ 46.286 (3) (a) 3. of the statutes is repealed.

16 SECTION ~~12~~ 46.286 (3) (a) 4. of the statutes is repealed.

17 SECTION ~~13~~ 46.286 (3) (a) 6. of the statutes is repealed.

18 SECTION ~~14~~ 46.286 (3) (d) of the statutes is repealed.

19 SECTION ~~15~~ 46.287 (2) (a) 1. c. of the statutes is repealed.

20 SECTION ~~16~~ 46.288 (2) (intro.) of the statutes is amended to read:

21 46.288 (2) (intro.) Criteria and procedures for determining functional  
22 eligibility under s. 46.286 (1) (a), financial eligibility under s. 46.286 (1) (b), and cost  
23 sharing under s. 46.286 (2) (a) and ~~entitlement under s. 46.286 (3)~~. The rules for  
24 determining functional eligibility under s. 46.286 (1) (a) 1. a. shall be substantially  
25 similar to eligibility criteria for receipt of the long-term support community options

SECTION # 46.283(3)(i) of the statutes is repealed.

1 program under s. 46.27. Rules under this subsection shall include definitions of the  
2 following terms applicable to s. 46.286:

History: 1999 a. 9.

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

LRB-0333/P2dn

RLR: /:....

WLj

Steve:

I eliminated provisions dealing with assigning priority for waiting lists for the family care benefit, since the only people who will be eligible for, but not entitled to, the family care benefit are the non-MA eligibles who currently receive the benefit. Please let me know if you want these sections retained. They are: s. 46.281 (1) (i), which directs DHFS to set criteria for waiting lists; s. 46.288 (2), which directs DHFS to promulgate rules for waiting lists; s. 46.283 (3) (h), which directs DHFS to oversee a resource center's management of a waiting list; and s. 46.287 (2) (a) 1.c., which allows a person to appeal a denial of entitlement.

Robin Ryan  
Legislative Attorney  
Phone: (608) 261-6927  
E-mail: robin.ryan@legis.wisconsin.gov

and provision of assistance to people on a waiting list

*In error*  
Please fix request sheet

DOA:.....Milioto, bb0030 - Entitlement for Family Care

FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

*RMNR*

*SOON*

1 AN ACT ...; relating to: ???

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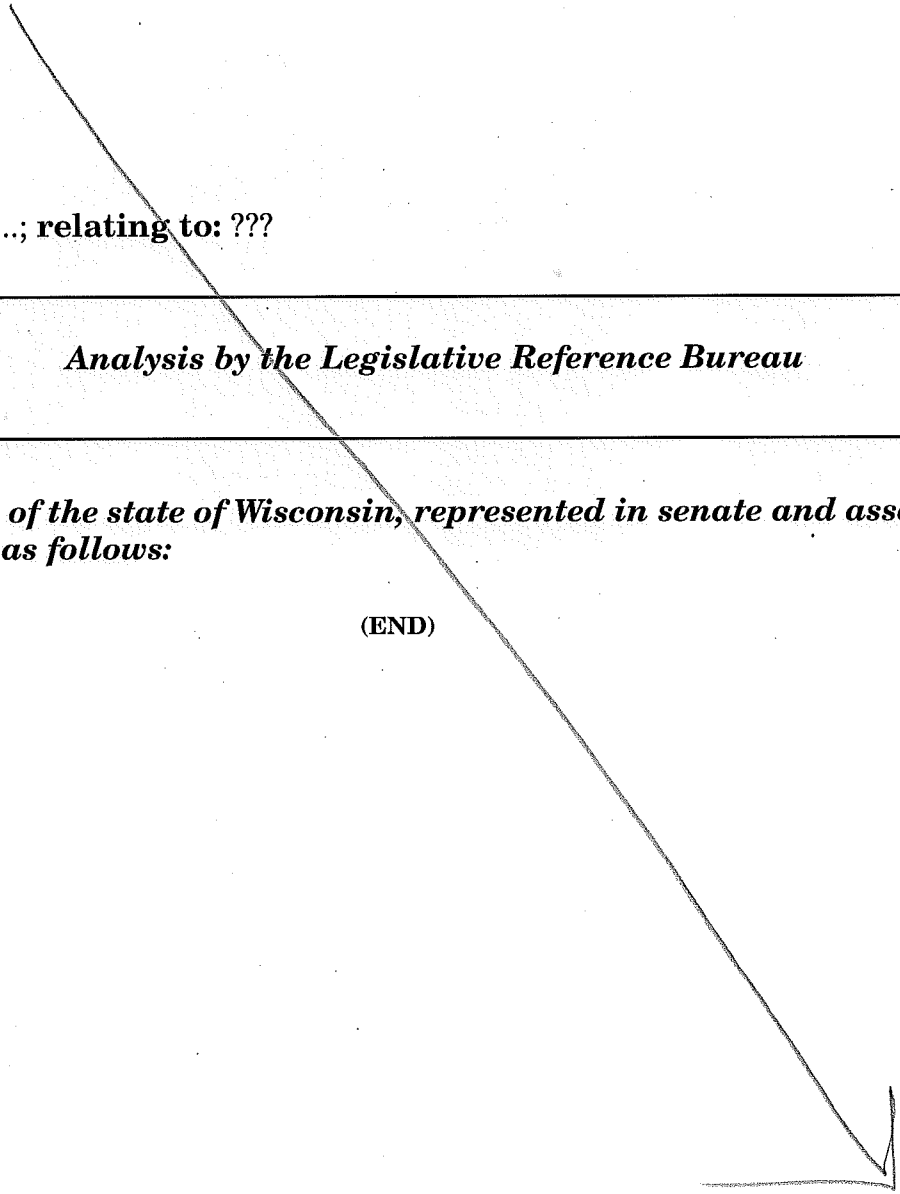
*Analysis by the Legislative Reference Bureau*

---

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

2

(END)



DOA:.....Milioto, BB0052 - Family Care phase-in of entitlement for non-MA eligible persons

FOR 2005-07 BUDGET -- NOT READY FOR INTRODUCTION

Do Not Gen

1 AN ACT ...; relating to: entitlement to the family care benefit.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

degenerative brain disorder

Currently, DHFS administers Family Care, a program available in several counties that combines several sources of funding to provide a flexible long-term care benefit called the family care benefit. A person must be at least 18 years of age and have a physical disability, a developmental disability, or infirmities of aging to qualify for the family care benefit. In addition, a person must meet both functional and financial eligibility requirements. Currently, the family care benefit is an entitlement for persons who are eligible for the Medical Assistance (MA) program and meet the functional eligibility requirements because they are functionally eligible at the comprehensive or intermediate level or, under certain circumstances, because they were receiving long-term care benefits when the family care benefit was introduced. By January 1, 2006, DHFS must extend entitlement to persons who are not MA eligible but who are functionally eligible at the comprehensive level or are in need of protective services or protective placement and functionally eligible at the intermediate level, as well as to certain persons who are not MA eligible but are functionally eligible because they were receiving long-term care benefits when the Family Care program was introduced.

2008

7/1

2010

This bill delays until January 1, ~~2008~~, the requirement for making the family care benefit an entitlement for persons who are not eligible for MA.

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

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2 46.286 (3) (d) The department shall determine the date, which shall not be later  
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5 department, persons who are not eligible for medical assistance may receive the  
6 family care benefit within the limits of state funds appropriated for this purpose and  
7 available federal funds.

LPS:  
Please  
proof  
w/  
Folio.

8 (END)



## Ryan, Robin

---

**From:** Milioto, Steve - DOA  
**Sent:** Thursday, January 04, 2007 12:43 PM  
**To:** Ryan, Robin  
**Subject:** RE: pre-admission screening draft (BB0244)

Hi Robin --

I forwarded your question to Andy.

In regard to draft 333, we would like to make the following changes to the draft:

- 1) Remove the requirement that DHFS set a date for offering the Family Care benefit to all non-MA eligible individuals who are functionally eligible for Family Care.
- 2) Allow DHFS to continue serving non-MA eligible individuals who are functionally eligible for Family Care and who are currently receiving services but end the entitlement aspect (thereby preventing the department from serving any other individuals who fall into this category.)

This draft should not be shared with the department. Best, Steve

Call to Steve 1/4/07

makes MA elig. an elig. requirement  
for FC benefit.

Non-MA eligible currently receiving FC  
benefit shouldn't be entitled.

LRB-0333/PA

**Ryan, Robin**

**From:** Milioto, Steve - DOA  
**Sent:** Wednesday, January 10, 2007 7:13 AM  
**To:** Ryan, Robin  
**Subject:** FW: Family Care Entitlement

Hi Robin --

Jim had the following questions in regard to the Family Care eligibility draft. I thought I would let you respond. Best, Steve

---

**From:** Johnston, James - DOA  
**Sent:** Tuesday, January 09, 2007 5:01 PM  
**To:** Milioto, Steve - DOA  
**Subject:** Family Care Entitlement

Steve,  
 I have a few questions about the language.

Under section 8 of the draft, people retain the Family Care eligibility if they were "financially eligible" and receiving family care benefits on the date of the bill. What does the financially eligible reference add to this section?

Under sections 12, 14, 16 & 17 of draft, entitlement provisions for certain groups appears to be deleted:

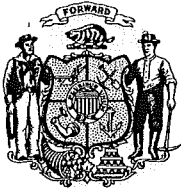
- s.46.286 (3)(a)(3) In need of protective services or protective placement
- s.46.286(3)(a)(6) Residents of nursing homes or those receiving certain LTC services when Family care starts and who enroll within 36 months
- s.46.287(2)(a)1c The ability to contest denial of entitlement status through hearing
- s.46.288 (2) Requirement to promulgate rules relating to entitlement status

Do these changes restrict current entitlement provisions for MA eligible family participants?

Jim

I should change to maintain current finan. elig. provision plus require that person receiving family care benefit on effective date

01/10/2007



State of Wisconsin  
2007 - 2008 LEGISLATURE

LRB-0333/P2  
RLR:wlj:nwn

In 11/10/07

DOA:.....Milioto, BB0030 -- Entitlement and eligibility for Family Care  
FOR 2007-09 BUDGET -- NOT READY FOR INTRODUCTION

RMN/P  
D-W

DO NOT GEN

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

*Analysis by the Legislative Reference Bureau*

**HEALTH AND HUMAN SERVICES**

**OTHER HEALTH AND HUMAN SERVICES**

Currently, DHFS administers Family Care, a program available in several counties that combines several sources of funding to provide a flexible long-term care benefit called the family care benefit. A person must be at least 18 years of age and have a physical disability, a developmental disability, or degenerative brain disorder (a qualifying condition) to qualify for the family care benefit. In addition, a person must meet both functional and financial eligibility requirements. Currently, the family care benefit is an entitlement for persons who have a qualifying condition, satisfy functional eligibility requirements, and are eligible for Medical Assistance (MA). By January 1, 2008, DHFS must extend entitlement to persons who are not MA eligible but who are functionally eligible at the comprehensive level or are in need of protective services or protective placement and functionally eligible at the intermediate level, as well as to certain persons who are not MA eligible but are functionally eligible because they were receiving long-term care benefits when the Family Care program was introduced.

This bill requires that a person be eligible for MA to receive the family care benefit, and thus eliminates the requirement that DHFS extend, by January 1, 2008, entitlement for the family care benefit to people who are not eligible for MA. However, the bill provides that people who are not eligible for MA but are receiving

the family care benefit on the date this bill is enacted continue to be eligible for, but not entitled to, the family care benefit.

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

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

1           **SECTION 1.** 46.281 (1) (i) of the statutes is repealed.

2           **SECTION 2.** 46.283 (3) (h) of the statutes is repealed.

3           **SECTION 3.** 46.283 (3) (i) of the statutes is repealed.

4           **SECTION 4.** 46.286 (1) (b) (intro.) of the statutes is amended to read:

5           46.286 (1) (b) *Financial eligibility.* (intro.) A person is financially eligible if

6           all any of the following apply:

7           **SECTION 5.** 46.286 (1) (b) 1. (intro.) of the statutes is repealed.

8           **SECTION 6.** 46.286 (1) (b) 1. a. of the statutes is repealed.

9           **SECTION 7.** 46.286 (1) (b) 1. b. and 2. of the statutes are consolidated,

10          renumbered 46.286 (1) (b) 1m. and amended to read:

11          46.286 (1) (b) 1m. The person is eligible under ch. 49 for medical assistance.

12          ~~2. If subd. 1. b. applies, the person accepts medical assistance and,~~ unless he or she

13          is exempt from the acceptance under rules promulgated by the department, accepts

14          medical assistance.

15          ~~**SECTION 8.** 46.286 (1) (b) 3. of the statutes is created to read:~~

16          ~~46.286 (1) (b) 3. The person was financially eligible for and was receiving the~~

17          ~~family care benefit on the effective date of this subdivision ... [revisor inserts date].~~

18          **SECTION 9.** 46.286 (3) (a) (intro.) of the statutes is renumbered 46.283 (3) (a)

19          and amended to read:

INS  
2-7

1           46.283 (3) (a) Subject to ~~pars. par.~~ par. (c) ~~and (d)~~, a person is entitled to and may  
2       receive the family care benefit through enrollment in a care management  
3       organization if he or she is at least 18 years of age, has a physical disability, as defined  
4       in s. 15.197 (4) (a) 2., a developmental disability, as defined in s. 51.01 (5) (a), or  
5       degenerative brain disorder, as defined in s. 55.01 (1v), is functionally eligible, is  
6       financially eligible, under sub. (1) (b) 1m., and fulfills any applicable cost-sharing  
7       requirements ~~and meets any of the following criteria.~~

8           **SECTION 10.** 46.286 (3) (a) 1. of the statutes is repealed.

9           **SECTION 11.** 46.286 (3) (a) 2. of the statutes is repealed.

10          **SECTION 12.** 46.286 (3) (a) 3. of the statutes is repealed.

11          **SECTION 13.** 46.286 (3) (a) 4. of the statutes is repealed.

12          **SECTION 14.** 46.286 (3) (a) 6. of the statutes is repealed.

13          **SECTION 15.** 46.286 (3) (d) of the statutes is repealed.

14          **SECTION 16.** 46.287 (2) (a) 1. c. of the statutes is repealed.

15          **SECTION 17.** 46.288 (2) (intro.) of the statutes is amended to read:

16           46.288 (2) (intro.) Criteria and procedures for determining functional  
17       eligibility under s. 46.286 (1) (a), financial eligibility under s. 46.286 (1) (b), and cost  
18       sharing under s. 46.286 (2) (a) ~~and entitlement under s. 46.286 (3)~~. The rules for  
19       determining functional eligibility under s. 46.286 (1) (a) 1. a. shall be substantially  
20       similar to eligibility criteria for receipt of the long-term support community options  
21       program under s. 46.27. Rules under this subsection shall include definitions of the  
22       following terms applicable to s. 46.286:

23   (END)



**2007-2008 DRAFTING INSERT  
FROM THE  
LEGISLATIVE REFERENCE BUREAU**

LRB-0333/P3ins  
RLR:.....

1           **Ins 2-7:**

2           **SECTION ~~1~~ 46.286 (1) (b) 1. a.** of the statutes is renumbered 46.286 (1) (b) 3. and  
3 amended to read:

4           46.286 (1) (b) 3. The person was receiving the family care benefit on the  
5 effective date of this subdivision .... [revisor inserts date], the person would qualify  
6 for medical assistance except for financial or disability criteria, and the projected cost  
7 of the person's care plan, as calculated by the department or its designee, exceeds the  
8 person's gross monthly income, plus one-twelfth of his or her countable assets, less  
9 deductions and allowances permitted by rule by the department.

**History:** 1999 a. 9, 185; 2001 a. 16, 109; 2003 a. 33; 2005 a. 25, 264, 388.

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

LRB-0333/P3dn

RLR: / : : : :  
Wlj

Steve:

This redraft changes the description of the financial eligibility criteria for people who are currently receiving the family care benefit but are not MA eligible.

Robin Ryan  
Legislative Attorney  
Phone: (608) 261-6927  
E-mail: robin.ryan@legis.wisconsin.gov

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

LRB-0333/P3dn  
RLR:wj:nwn

January 10, 2007

Steve:

This redraft changes the description of the financial eligibility criteria for people who are currently receiving the family care benefit but are not MA eligible.

Robin Ryan  
Legislative Attorney  
Phone: (608) 261-6927  
E-mail: [robin.ryan@legis.wisconsin.gov](mailto:robin.ryan@legis.wisconsin.gov)



## Ryan, Robin

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**From:** Milioto, Steve - DOA  
**Sent:** Wednesday, January 24, 2007 8:40 AM  
**To:** Ryan, Robin  
**Subject:** FW: LRB Draft: 07-0333/P3 Entitlement and eligibility for Family Care

Hi Robin --

As a follow-up to this, I want to make sure that the draft is only eliminating the provision regarding denial of entitlement for the non-MA people who are functionally eligible for Family Care. All others should continue to be able to appeal. Best, Steve

-----Original Message-----

**From:** Milioto, Steve - DOA  
**Sent:** Wednesday, January 24, 2007 7:51 AM  
**To:** Forsaith, Andrew C - DHFS  
**Cc:** Ryan, Robin - LEGIS; Johnston, James - DOA  
**Subject:** RE: LRB Draft: 07-0333/P3 Entitlement and eligibility for Family Care

Hi Andy --

I think the answer to your second point is that there would no longer be entitlement for the people who are non-MA eligible but are functionally eligible for Family Care. The people who are currently receiving Family Care and will be functionally eligible for Family Care on the effective date of the bill would continue to receive services due to eligibility and not entitlement.

Robin -- please feel free to correct me if I got the above explanation wrong. Also, please review Andy's suggestion in his first point. Best, Steve

-----Original Message-----

**From:** Andrew Forsaith [mailto:FORSAAC@dhfs.state.wi.us]  
**Sent:** Tuesday, January 23, 2007 5:21 PM  
**To:** Milioto, Steve - DOA  
**Cc:** Bove, Fredi-Ellen E - DHFS; Deignan, Monica A - DHFS; Frye, Judith E - DHFS; Jones, Charles M - DHFS; Olson, Anne C - DHFS  
**Subject:** Re: LRB Draft: 07-0333/P3 Entitlement and eligibility for Family Care

Steve -- It looks like the draft accomplishes the Governor's intent. Here, however, are two technical comments:

1) In section 8 of the draft, it seems that s. 46.286(3) should not be moved to s. 46.283 but should stay in s. 46.286 *typo - should be in 46.286*

2) I'm unclear why Section 15 deletes the client's right to appeal denial of entitlement. *Keep right to appeal entitlement*

In terms of the draft's fiscal effect, the new provisions will make it more difficult to manage the caseload for non-MAs to stay within the \$1 million budgeted in the next biennium. The non-MAs consist of three groups 1) Clients who are waiting the results of their disability determination from SSA/DDB 2) clients who go off and on MA from month to month because their income in a given month exceed eligibility limits and 3) clients whose assets exceed the MA limits and who entered FC through the non-MA "door" early in the program before non MA enrollment was capped. The Department hopes to make the first group MA eligible under presumptive eligibility. The Department would need to continue to serve any clients in the other two groups who are in Family Care when the budget passes -- perhaps around 80 clients based on current caseloads (sound right Anne?). Our costs to serve that number of clients would likely exceed \$1 million in FY 08. Eventually, these grandfathered clients will attrit out, but it will cause a problem in FY 08.

>>> "Milioto, Steve - DOA" <steve.milioto@wisconsin.gov> 1/22/2007  
12:41 PM >>>

Hi Andy --

Attached is the draft for people who are non-MA eligible but functionally eligible for Family Care. The Governor wants to do away with the entitlement provision altogether but continue to serve the people who will be getting services on the effective date of the bill.

Please review. Best, Steve