



### 2007 DRAFTING REQUEST

#### Bill

Received: 11/27/2006

Received By: pkahler

Wanted: As time permits

Identical to LRB:

For: Administration-Budget

By/Representing: Pink

This file may be shown to any legislator: NO

Drafter: pkahler

May Contact:

Addl. Drafters:

Subject: Public Assistance - med. assist.

Extra Copies: DAK

Submit via email: YES

Requester's email:

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

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#### Pre Topic:

DOA:.....Pink, BB0185 -

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#### Topic:

BadgerCare Plus

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#### 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>
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/P2	pkahler 01/12/2007	jdyer 01/16/2007	rschluet 01/17/2007	_____	sbasford 01/19/2007		S&L
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*Handwritten signatures and initials:*  
S  
267  
JK

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*2/1 p8 p8/15*

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of "1" for  
DHFS (Attn: John)  
per PJK

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			<i>nwn 1/26</i>	<i>nwn/jf 1/26</i>			

Vers.      Drafted      Reviewed      Typed      Proofed      Submitted      Jacketed      Required

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*Jo*  
*1/29*      ~~*[Signature]*~~  
*1/29*

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*J. Jones*  
*1167*  
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## 2007-09 Budget Bill Statutory Language Drafting Request

- Topic: BadgerCare Plus
- Tracking Code: BB0185
- SBO team: Health and Insurance
- SBO analyst: Michelle Pink
  - Phone: 7-7980
  - Email: michelle.pink@wisconsin.gov
- Agency acronym: DHFS
- Agency number: 435

Priority: High

## Kahler, Pam

---

**From:** Pink, Michelle C - DOA [michelle.pink@wisconsin.gov]  
**Sent:** Wednesday, November 22, 2006 8:35 AM  
**To:** Kahler, Pam  
**Cc:** Kennedy, Debora  
**Subject:** Drafting instructions BC+

**Attachments:** DHFSDraftingInstructionsforBC+.doc



DHFSDraftingInstru  
ctionsforBC+...

Good morning, Pam,

You will soon be receiving the attached drafting instructions for the BadgerCare Plus Medicaid expansion, if you haven't already.

We have assembled a small committee of program experts working on the statutory language changes. After you have a chance to read the instructions, would you like to have a meeting with the group to go over the request prior to drafting or are the instructions sufficiently self-explanatory?

Thanks, in advance,

Michelle Pink

## Kahler, Pam

---

**From:** Pink, Michelle C - DOA  
**Sent:** Monday, November 27, 2006 12:42 PM  
**To:** Kahler, Pam  
**Subject:** Drafting instructions BC+

**Attachments:** DHFSDraftingInstructionsforBC+.doc



DHFSDraftingInstru  
ctionsforBC+...

Pam,

Please see the attached revision of the BadgerCare Plus drafting instructions. Sorry for the error!

Michelle

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

**From:** Donna Wong [mailto:wongdj@dhfs.state.wi.us]  
**Sent:** Monday, November 27, 2006 12:12 PM  
**To:** Pink, Michelle C - DOA  
**Subject:** Re: FW: Drafting instructions BC+

Could you please give this updated attached list to Pam? One thing that was left out of the other one was the change in the employment verification rules. The new info is on page 5 and 6. thanks!

### DHFS Drafting Instructions for BadgerCare Plus Statutory Language

New statutory language should be created for BadgerCare Plus (BC+). BC+ will be effective on 1/1/08 or when federal approvals are granted, whichever is later. This new program will offer coverage to many groups currently eligible for regular Medicaid (MA) or BadgerCare (BC). Implementation of the new program is contingent upon passage of state legislation and federal approval. Continuation of the program is also contingent on continued federal approval. The existing statutes should be left in place to continue the current programs in case the required federal approvals are not obtained. In addition, many groups such as the disabled and the elderly will continue to receive their benefits under the existing Medicaid and BC programs.

If a waiver of federal law is approved and then terminated in the future, statutes should be written to allow DHFS to revert to current law. The new statutory language should also include emergency rule making authority for DHFS to enact other BC+ provisions.

If the new program is approved, the BC+ statutes will overrule certain sections of the existing Medicaid and BC statutes pertaining to eligibility groups, including eligibility requirements and benefits. Below is a list of those statutes no longer in effect for persons in the BC+ program. These instructions also include BC+ coverage groups along with eligibility criteria and the plan type (Benchmark or regular Medicaid benefit plan) that applies to each group.

BC+ will maintain many features and requirements of Medical Assistance and for that reason the BC+ statutes should become part of subchapter IV in Chapter 49.

- 49.46(1)(a)1
- 49.46(1)(a)1m
- 49.46(1)(a)4m
- 49.46(1)(a)6
- 49.46(1)(a)9
- 49.46(1)(a)10
- 49.46(1)(a)11
- 49.46(1)(a)12
- 49.46(1)(a)13
- 49.46(1)(a)16
- 49.46(1)(am)
- 49.46(1)(b) → ?
- 49.46(1)(c) → ?
- 49.46(1)(cg) → ?
- 49.46(1)(co) → ?
- 49.46(1)(e) → ?
- 49.46(1)(j)
- 49.46(1)(k)
- 49.465 → presumptive
- 49.47(4)(ag) elig

*elig*

*presumptive*

*probably don't need this if left as is*

*can just NWS whole section - what doesn't apply isn't affected*

49.47(4)(am) *elig.*  
 49.47(4)(c) → *income limits*  
 49.47(4)(cm) → *ins req*  
 49.47(4)(d) → *same as 49.46(1)(b)*  
 49.665 → *BC*

BC+ Coverage Groups	Eligibility Criteria and Plan Type
Pregnant Women Under 200% FPL	Pregnant women with incomes that do not exceed 200% FPL are eligible for the regular MA benefit plan without a premium. <span style="float: right;">MA</span>
Pregnant Women 200 – 300% FPL	Pregnant women with incomes that exceed 200% FPL, but are at or below 300% FPL will be eligible for the BC+ Benchmark Plan with a premium. <span style="float: right;">BM</span>
Children Under 200% FPL	Children under age 19 are eligible for the regular Medicaid benefit plan if their income is below 200% FPL. <u>The insurance crowd out provision applies to children over 150% FPL.</u> <span style="float: right;">MA ?</span>
Children from 200 – 300% FPL	Children under age 19 are eligible for the BC+ Benchmark Plan with cost sharing if their income exceeds 200% but is at or below 300% FPL. Insurance crowd out provisions apply to this group. <span style="float: right;">BM</span>
Children 300%+ FPL	<u>Uninsured</u> children under age 19 will be covered by allowing those families with incomes exceeding 300% FPL to buy into BC+. Administrative costs for these children are not eligible for federal funding. <span style="float: right;">buy in (BM?)</span>
Parents <200% FPL	BC+ will cover parents with <u>gross</u> family incomes that do not exceed 200% FPL (with reduced deductions). Include this group <u>contingent on approval</u> of a waiver of federal law. This group is eligible for the regular Medicaid benefit plan. <span style="float: right;">diff? MA</span>
Caretaker Relatives <200% FPL	Caretaker relatives (non-legally responsible relatives caring for minors) are covered just like parents under BC+. Include this group contingent on approval of a waiver of federal law. This group is subject to cost sharing and is eligible for the regular Medicaid benefit plan. <span style="float: right;">MA</span>
Child Welfare Parents with Income <200% FPL	Parents whose children have been removed from the home, but would otherwise qualify for BC+, are still eligible if they work towards reunifying their family by complying with a permanency plan. Include this group contingent on approval of a waiver of federal <span style="float: right;">MA</span>

*See next page →*

<p>Self-Employed Parents and Caretaker Relatives</p> <p><i>* ← Premium - 5% w/o depre. deducted</i></p>	<p>law. This group is subject to cost sharing and is eligible for the regular Medicaid benefit plan.</p> <p>Self-employed income will be calculated with all deductions allowed under federal and state tax law, except for depreciation. If family income is below 200% the parent/caretaker relative is eligible. If family income exceeds 200% FPL, any depreciation is deducted from self-employment income and the new family income is compared to 200% FPL. If the new family income, minus depreciation, is below 200%, the parent/caretaker relative is eligible for BC+ but must pay 5% of family income (the amount before depreciation was subtracted from self-employment) to buy into the BC+ benchmark plan for the adult parents/caretaker relatives. This group is eligible contingent on approval of a waiver of federal law and is subject to cost sharing.</p>
<p>Youths Exiting Out-of-Home Care</p> <p>*Rate of phase-in to be determined. Please hold off on drafting language for this group pending further analysis.</p>	<p>This is a new eligibility group that should be added to BC+. Youths who age out of foster care will automatically be added to BC+ and will be eligible until they turn 21 or move out of state. These youths will be subject to most of the same eligibility criteria as the rest of BC+ enrollees, except they will not have any income limits or requirements to verify income. They also can be insured or have access to insurance. These youths will not pay premiums. This group will be phased into BC+.</p>
<p>Medicaid Extensions – earned income, loss of earnings disregards, and child support income</p>	<p>These extensions will be eliminated under BC+. See transitional grandfathering section (p.5). See 49.46(1)(c), (cg), and (co).</p>
<p>Continuously Eligible Newborns</p> <p><i>BM or MA? depend on mother's cov?</i></p>	<p>Babies born to mothers eligible for BC+ may remain eligible for BC+ for one year if they continue to reside in Wisconsin with their mothers. See 49.46(1)(a)13. <i>even if mother not eligible?</i></p>
<p>Presumptive Eligibility (PE)</p>	<p>Expand to allow PE for pregnant women with incomes up to 300% FPL and for children under age 19 with incomes up to 150% FPL. Copy PE language for BC+ from s. 49.465. Add PE for women below 300% FPL with ambulatory prenatal care services under the Benchmark plan. Add presumptive eligibility for children under age 19 with income below</p>

*buy-in  
BM  
special prov. for det income*

*hold-off*

*→ so don't include?  
if income ↑:  
I don't get this - not already covered? MA or BM?*

*BM*

7 MHA or BM?

	<p>150% FPL. <u>Cover all benefits for kids.</u> Note: Statutory language for PE for children should parallel the PE statute for women as much as possible. However, "qualified entities" should substitute for "qualified providers" in the children's PE section. "Qualified entities" should refer to a federal definition at 42 USC 1396r-1a(b)(3)(A) with the qualifier, "as determined by the department."</p>
<p>Backdating</p>	<p>Backdating of eligibility will be allowed for pregnant women and for children and adults with incomes below 150% FPL. See 49.47(4)(d).</p>
<p>Cooperation with Insurance Buy-In (Premium Assistance)</p>	<p>Individuals who fail to cooperate with insurance buy-in are ineligible for BC+, along with any other adults in the family. An adult's failure to cooperate does not affect the eligibility of minor children. See 49.47(4)(cm)1. &amp; 2.</p>
<p>Insurance Coverage</p> <p style="text-align: center;"><i>← this income? →</i></p>	<p>BC+ adults and children with family incomes above 150% FPL who are covered by individual or family health insurance coverage provided by a state employee health plan or in which the employer pays 80% or more of the premium are ineligible for BC+. Pregnant women with family income greater than 200% FPL are not ineligible if they have insurance coverage, but are required as a condition of eligibility to maintain that coverage unless they have good cause. <u>Include this group contingent on approval of a waiver of federal law.</u> See HFS103.03(1)(f)2 for current rule language.</p>
<p>Loss of Coverage Waiting Period</p> <p style="text-align: center;"><i>everyone w/ one w/ covered out req.</i></p>	<p>Individuals subject to the insurance coverage criteria above are not eligible for BC+ for the three calendar months following the month in which they lost coverage without good cause... See HFS103.03(1)(f)2 for current rule language.</p>
<p>Insurance Access</p>	<p>Adults and children with incomes that exceed 150% FPL and have access to an individual or family health insurance plan provided by a state employee health plan or where the employer pays 80% or more of the premium are not eligible for BC+. There is no access eligibility requirement for pregnant women nor is there a requirement for children and adults with family</p>

*all preg w + ch + ad < 150 FPL = yes*

*includ preg w?*

*preg w. below 200% don't have to keep cov?*

*all above or only preg w?*

	<p>incomes at or below 150% FPL. Include <u>this group</u> contingent on approval of a waiver of federal law and state plan amendment.</p>
<p>Past Insurance Access</p> <p><i>80% of state plan</i></p>	<p>Persons who have had Insurance Access (see above) in the last 12 months, as opposed to last 18 months under current law, are not eligible for BC+.</p>
<p>Future Access</p> <p><i>how determined? expected at the time of applying?</i></p>	<p>The individual or family is not eligible if access becomes available in the current month or in any of the next three calendar months at the time of application. <i>verify w/ emp at appl.</i></p>
<p>Good Cause for Coverage and Access</p>	<p>DHFS will determine good cause exceptions for persons otherwise ineligible for BC+ because of insurance coverage or access.</p>
<p>Verification of Health Insurance Access/Coverage</p> <p><i>(been fed state, etc)?</i></p> <p><i>cost of cov - det by DHFS?</i></p>	<p>The state will verify health insurance access and coverage directly with employers. Those employers who fail to provide this information in a timely manner as determined by DHFS will incur financial penalties. This only applies to adults and children above 150% FPL. Pregnant women are not subject to verification. <u>This will no longer be a condition of eligibility for BC+ applicants and recipients.</u> See 49.665(7) for current BC penalty language.</p> <p>The Department requires statutory authority to communicate directly with employers who must supply the information necessary to determine whether health insurance coverage or access exists for all adult BC+ applicants and recipients.</p> <p>Employers will be allowed 30 calendar days to supply this information for applicants and 10 calendar days for recipients.</p> <p>The Department will impose a financial penalty on employers who do not cooperate. The penalty will be equal to the <u>full per member per month cost of the individuals covered for each month that they are covered before the employer provides the information.</u> This penalty should be capped according to current law. <i>Same as C law?</i></p> <p>90% of penalties collected will be deposited</p>

?

>150% FPL?? parents + kids

just the same type of insurance by rule?

?

new seg fund like MA?

<p>new appo → (make it a B) ←</p>	<p>into the BadgerCare Plus benefits budget fund and the remaining 10% will be reserved for administrative expenses. If administrative expenses do not exceed the amount collected, those funds not encumbered should revert to the general fund after each biennium.</p>
<p>Counting Income</p>	<p>This will be the same under BC+ as it is under current BC law in that DHFS will take into account family income, with two exceptions. Non-legally responsible caretaker relatives and the children they are caring for may have their financial eligibility determined separately. The other exception is that SSI recipients are not included in the BC+ group and the income of an SSI recipient is not counted when determining eligibility for BC+. This methodology will be used contingent on approval of a waiver of federal law.</p>
<p>Earnings of Minors</p>	<p>Contingent upon federal approval, disregard all earnings of children under age 18 when determining BC+ financial eligibility.</p>
<p>Child Support Paid</p>	<p>Contingent upon federal approval, deduct from family income any court ordered support obligations actually paid.</p>
<p>Spendedown <i>med purposes - same as</i> ?? ? S. 49.47(4) (c) 2. yr</p>	<p>Allow pregnant women to spenddown to 300% FPL and children with insurance coverage to spenddown to 150% FPL. Include this group contingent on approval of a waiver of federal law.</p>
<p>Verification of Income <i>by caseworker?</i></p>	<p>BC+ will require mandatory verification of earnings for everyone of any income where a data match of current income is not available.</p>
<p>Reduced Change Reporting <i>(misc elig sub?)</i></p>	<p>Recipients will report changes that would make them ineligible for BC+ within 10 days. Workers will only act on reported changes (reported by client, data matches, other programs, etc.) Include this group contingent on approval of a waiver of federal law.</p>
<p>Transitional Grandfathering <i>if inc tax while covered?</i></p>	<p>Persons over age 18 who lose MA or BC eligibility solely due to income when BC+ becomes effective, will have their eligibility continued for 18 consecutive months under the following conditions:</p> <ul style="list-style-type: none"> <li>• They are eligible for MA or BC in the month prior to the month BC+ is implemented,</li> <li>• Eligibility for that month is based on an</li> </ul>

code if penalty

such as a family member receiving it

converse, include if received?  
yes  
→ Bond

by ap or recip?

misc elig provision

<p>during the 18 months? ←</p> <p>if one dies &amp; one eligible again, ←</p> <p>does not apply? →</p>	<p>application filed prior to the date BC+ becomes effective,</p> <ul style="list-style-type: none"> <li>• They continue to pay any BC premium that they owed for that last month of regular BC eligibility, → for 18 mos?</li> <li>• Continue to meet all MA or BC non-financial eligibility requirements, and</li> <li>• Remain financially ineligible for BC+.</li> </ul> <p>If at any time during this 18 month eligibility extension period an adult fails to meet the above conditions, his or her eligibility for the extension ends. He or she may not resume receiving MA or BC benefits under the extension after any break in eligibility. They forfeit any months of benefits remaining in the 18-month period.</p> <p>Include this group contingent on approval of a waiver of federal law.</p>
<p>Premiums—Adults</p>	<p>Adults with incomes above 150% FPL, but not greater than 200% FPL must pay a premium. The premium for an adult (or adults) will not exceed 5% of the family's income.</p>
<p>Premiums—Pregnant Women</p> <p>per month per month</p>	<p>Pregnant women with incomes greater than 200% FPL will pay a premium. The premium will not exceed the <u>full adult PMPM</u> (not the PMPM for pregnant women) at 300% FPL. Include this group contingent on approval of a waiver of federal law.</p>
<p>Premiums—Children</p>	<p>Children with incomes greater than 200% FPL will pay a premium. The premium will not exceed the <u>full children's PMPM</u> at 300% FPL. Native American/Alaskan Native children with incomes at or below 300% will not pay a premium.</p>
<p>Restrictive Reenrollment Period</p> <p>So they are dropped &amp; can apply in 6 mo? (what about 3 mo backdating)</p>	<p>Because we are changing premium amounts and income levels at which pregnant women, children and adults pay a premium, we are changing the RRP to keep an individual for whom a premium was owed but not paid from reenrolling for six months. Include this group contingent on approval of a waiver of federal law. See HFS103.085(3) for current rule language.</p>
<p>Temporary Absence</p>	<p>BC+ will include a temporary absence policy.</p>

→ but could get BC+ right?

Prem. for both MA & BM? 1/2

??

? PMPM

no pen for those categories 7

49.665 (1) (d) parent (no mention of marriage)  
 see 49.141 (1) (5) nonmarital coparent

<p><i>An spouse or child? what about parents who are not married being temp absent?</i></p>	<p>Thus, a definition of "family" for BC+ may not be limited to persons residing in the same household. The definition should allow for temporary absences of up to six months according to DHFS policy.</p>
<p>Other Eligibility Conditions</p> <p><i>See 49.82 (2) any exceptions for BC+? same as</i></p> <p><i>→</i> <i>→</i> <i>→</i></p>	<p>BC+ applicants and recipients will also be covered by the statutory requirements for providing an SSN under 49.82, child support cooperation and assignment of support under 49.45(19), citizenship documentation requirements under a new statute being added in the 2007-09 biennial budget bill, and other criteria determined by DHFS.</p>

*→ (2) SSN exception → added CEN + unborn*

**Other Technical Amendments**

<p>Funeral and Burial Expenses Available for Certain BC+ Recipients</p>	<p>Add to the list of certain medical assistance recipients who may qualify for funeral expenses under 49.785(1), the following BC+ recipients:</p> <ul style="list-style-type: none"> <li>• Pregnant women or children under age 6 with family income not exceeding 185% FPL at the time of death,</li> <li>• Children between the ages of 5 and 19 with family income not exceeding 100% FPL at the time of death, or</li> <li>• Parents or caretakers relatives with family income not exceeding 50% FPL at the time of death</li> </ul>
<p>Removal of Kinship Care children from Medical Assistance coverage</p>	<p>Children receiving Kinship Care and long-term Kinship Care will have their eligibility determined under BC+, not MA. Strike the words Kinship Care and long-term Kinship Care from 49.46(1)(a)5.</p>
<p>Elimination of Employer Verification Process for BC Unborn Children</p>	<p>Strike 49.665(4)(ap)2 and 7 to remove the requirement for employer verification of wages for unborn children to be consistent with BC+ policy.</p>

*clean up of parent law why? (if keep all stats) also can keep if keep all stats*

**Drafting Instructions for BC+ Benchmark Plan**

BC+ Benchmark Plan	Eligibility Criteria
<p>Covered services and co-payments</p>	<p>Provide current MA/BC coverage for pregnant women, children, parents/caretaker relatives, and child welfare parents with</p>

→ this is MA

<p>thought wanted to keep current law for future in a case wave, not approved</p>	<p>family income below 200% FPL. Provide the current benefit to all youths exiting out of home care, regardless of income. For children, pregnant women and self-employed parents/caretaker relatives with family incomes greater than 200% FPL, supply a <u>new more limited plan of benefits and more extensive co-payments</u>. Co-payments are for those in both FFS and managed care. Amend and delete sections in 49.45 and 49.665 of the statutes regarding MA and BC.</p> <p>Create a section in Chapter 49 establishing benefits of the BC+ benchmark package. See section 49.46(2) for reference.</p> <p>Generally speaking DHFS will want to include the following language regarding rule making authority: DHFS is authorized to promulgate such rules as are consistent with its duties in administering BC+.</p>
<p>Prescription Drugs</p> <p>terminology → 49.45 (18) (a) 1.</p>	<p>MA preferred generic drugs at no more than a \$5 co-pay and BadgerCareRx discounts. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>
<p>Physician Visits</p>	<p>Full coverage with one annual routine physical exam. Co-pay of no more than \$15 per visit. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>
<p>Inpatient Hospital</p>	<p>Full coverage as medically necessary. \$100 co-pay for medical and surgical services with no more than \$50 co-pays per admission for psychiatric services. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>
<p>Outpatient hospital</p>	<p>Lab fees, x-rays, and mammography are fully covered. Home health care is limited to 60 visits per year. There is a co-pay of no more than \$15 for outpatient services, and a co-pay of no more than \$75 for non-emergency use of the emergency room. Create a section in Chapter 49 establishing</p>

What benefits?

these are

BM ben ?

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|                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>See A-632. 85<br/>(1)(a)</p>                                                                             | <p>the benefit package of the BC+ benchmark plan. Suggested ER language from 42 USC 1396u-2 and 42 CFR 438.114: "Emergency medical condition means a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical attention to result in the following: (1) Placing the health of the individual (or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy. (2) Serious impairment to bodily functions. (3) Serious dysfunction of any bodily organ or part."</p> |
| <p>Nursing Home</p>                                                                                         | <p>Skilled nursing care is limited to 30 days per year. Inpatient rehabilitation is limited to 60 days per year. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <p>Physical, Occupational, and Speech Therapy</p>                                                           | <p>Twenty visits per therapy discipline. Thirty-six visits for cardiac rehab. No more than a \$15 co-pay per visit. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>Durable Medical Equipment</p>                                                                            | <p>Benefits limited to \$2,500 per year. Co-pay of no more than \$5. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. Reference section 49.46(2)(6)3d.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <p>Mental and AODA</p> <p>So if change, these do, too? → You mean some limits? or can just Xref perhaps</p> | <p>Linked to state employee plan. Outpatient services covered up to \$1,800 per year; transitional covered up to \$2,700 per year. AODA services up to \$7,000 per year. Co-pay of no more than \$15 per visit. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.</p>                                                                                                                                                                                                                                                                                                                                                     |
| <p>Transportation</p>                                                                                       | <p>Emergency transportation covered as medically necessary. No coverage for non-emergency. Co-pay of no more than \$5. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |

RAC:  
Some cov or under state emp plan (Ident future change)

|                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                             | plan. See section 49.46(2) for reference.                                                                                                                                                                                                                                                                                                                                                                                                                    |
| ✓ Health Screenings for Children            | Early childhood developmental services for children under 6 years old. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan.                                                                                                                                                                                                                                                                                            |
| ✓ Dental<br><i>deductible?</i><br><i>CF</i> | Preventative and basic services only for pregnant women and children under 19. Coverage is for 50% of allowable charges. Annual <u>deduction</u> of \$200 with a maximum benefit of \$750. Includes accidental injury and diagnosis and treatment of temporomandibular disorders (TMJ). Co-pay of no more than \$15 per visit. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. Reference section 49.46(2)(6)(b)1. |
| ✓ Vision                                    | One refractive eye exam every two years. Co-pay of no more than \$15 per visit. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.                                                                                                                                                                                                                                               |
| ✓ Smoking Cessation                         | Coverage for pregnant women only. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.                                                                                                                                                                                                                                                                                             |
| ✓ Prenatal Care Coordination                | Pregnant women at high risk are covered. Create a section in Chapter 49 establishing the benefit package of the BC+ benchmark plan. See section 49.46(2) for reference.                                                                                                                                                                                                                                                                                      |

## Kahler, Pam

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**From:** Jones, James D - DHFS  
**Sent:** Tuesday, December 05, 2006 8:15 AM  
**To:** Kahler, Pam  
**Subject:** Re: BC+

regular Medicaid benefits.

>>> "Kahler, Pam" <Pam.Kahler@legis.wisconsin.gov> 12/04/06 4:59 PM

>>>

Jim:

First question since meeting: we didn't discuss whether youths exiting out-of-home care got regular MA or Benchmark coverage. Thanks!

Pam

Pamela J. Kahler  
Legislative Attorney  
Legislative Reference Bureau  
608-266-2682