

☞ **09hr_SC-PHSILTCJC_sb0494_pt01**



Details:

(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2009-10

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Public Health, Senior Issues, Long-Term Care, and Job Creation (SC-PHSILTCJC)

COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)
 - (**ab** = Assembly Bill) (**ar** = Assembly Resolution) (**ajr** = Assembly Joint Resolution)
 - (**sb** = Senate Bill) (**sr** = Senate Resolution) (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

Moved by Senator Coggs, seconded by Senator Vinehout that
Senate Bill 494 be recommended for passage.

Ayes: (5) Senators Carpenter, Coggs, Vinehout,
Schultz and Kapanke.

Noes: (0) None.

PASSAGE RECOMMENDED, Ayes 5, Noes 0



Russell DeLong
Committee Clerk

Vote Record

Committee on Public Health, Senior Issues, Long-Term Care, and Job Creation

Date: 3-3-10

Moved by: Coggs

Seconded by: Vinehout

AB _____

SB 494

Clearinghouse Rule _____

AJR _____

SJR _____

Appointment _____

AR _____

SR _____

Other _____

A/S Amdt _____

A/S Amdt _____ to A/S Amdt _____

A/S Sub Amdt _____

A/S Amdt _____ to A/S Sub Amdt _____

A/S Amdt _____ to A/S Amdt _____ to A/S Sub Amdt _____

Be recommended for:

- Passage
 Adoption
 Confirmation
 Concurrence
 Indefinite Postponement
 Introduction
 Rejection
 Tabling
 Nonconcurrency

Committee Member

	<u>Aye</u>	<u>No</u>	<u>Absent</u>	<u>Not Voting</u>
Senator Tim Carpenter, Chair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Spencer Coggs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Kathleen Vinehout	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Dale Schultz	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senator Dan Kapanke	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Totals:	<u>5</u>	<u>0</u>	_____	_____

Motion Carried

Motion Failed

February 17, 2010
Information provided by Department of Health Services
Donna McDowell, Director, Bureau of Aging & Disability Resources
Division of Long-Term Care

WI State Senate
Committee on Public Health, Senior Issues, Long-Term Care and Job Creation

SB 491

Aging & Disability Resource Centers are now serving most of the state of Wisconsin. These one-stop organizations provide a very comprehensive set of information and guidance about how, in our complicated health and social services systems, services and benefits work for adults that are elderly or have a disability, and provide help securing what people need and are entitled to. The ADRCs perform functional and financial screening that identifies persons eligible for Family Care or a self-directed supports waiver known as IRIS.

This bill updates the statute to include in the ADRC section the IRIS Medicaid waiver that permits individuals and their families to manage their own service and supports. The bill also expands the people who can receive information and assistance from an ADRC to include adults with developmental disabilities.

SB 494

DHS has suggested that the statute be amended to clarify that in addition to the county agencies that are eligible to serve as an ADRC, non-profit corporations established by counties to serve as county aging units can also qualify to serve as an ADRC. At present the ADRC can be developed by human service departments, county aging units or community service boards (51). The non-profit county aging units are treated as counties in all other programs administered by DHS when they are an appropriate provider of services for the elderly and other populations.

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