## Fiscal Estimate - 2011 Session

Original Dpdated	Corrected	Supplemental			
LRB Number 11-2996/1	Introduction Number S	B-232			
Description Eliminating the ability for the Department of Health Services to alter Medical Assistance eligibility, provider payment methods, and other Medical Assistance program procedures by policy and eliminating the requirement to request a waiver regarding Medical Assistance program eligibility					
Fiscal Effect					
Appropriations Reve	ease Existing enues rease Existing enues  Decrease Costs  To absorb within  Yes  Decrease Costs	n agency's budget  No			
Local:  ☐ No Local Government Costs ☐ Indeterminate  ☐ 1. ☐ Increase Costs ☐ Permissive ☐ Mandatory  ☐ And Decrease Revenue ☐ Permissive ☐ Mandatory  ☐ Permissive ☐ Mandatory ☐ Permissive ☐ Mandatory ☐ Permissive ☐ Mandatory ☐ Districts ☐ Districts ☐ Districts					
Fund Sources Affected  Affected Ch. 20 Appropriations  GPR FED PRS SEG SEGS					
Agency/Prepared By	Authorized Signature	Date			
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## Fiscal Estimate Narratives DHS 10/25/2011

LRB Number 11-2996/1	Introduction Number	SB-232	Estimate Type	Original	
Description					
Eliminating the ability for the Department of Health Services to alter Medical Assistance eligibility, provider					

Eliminating the ability for the Department of Health Services to alter Medical Assistance eligibility, provider payment methods, and other Medical Assistance program procedures by policy and eliminating the requirement to request a waiver regarding Medical Assistance program eligibility

## Assumptions Used in Arriving at Fiscal Estimate

Under current law, the Department of Health Services (DHS) has the authority to implement policy changes to the Medicaid program that may conflict with existing statute. The authority to change policy that may conflict with statute is limited in scope to those policies listed under s. 49.45 (2m) (c) and was granted in the biennial budget, 2011 Wisconsin Act 32. The Legislature granted DHS the authority to enable the Department to achieve significant savings in the overall Medicaid program budget. The Department currently estimates \$219,500,000 GPR (\$554,360,00 AF) in savings measures are needed to maintain the program within budgeted levels in the 2011-13 Biennium. Medicaid expenditures are driven by multiple factors. This estimate of needed savings may change throughout the current biennium based on those factors.

Under this bill, the Department would not have the authority to implement policy changes that conflict with existing statute. As a result, DHS would experience Medicaid program expenditures that exceed budgeted funds over the biennium. While the Department would retain the ability to implement certain measures within current statutory authority, the estimated fiscal effect to DHS under this bill would be up to \$219,500,000 GPR/PR/SEG (\$554,360,000 AF) in the 2011-13 biennium.

**Long-Range Fiscal Implications**