Fiscal Estimate - 2015 Session

☑ Original ☐ Updated	Corrected Su	upplemental		
LRB Number 15-4189/1	Introduction Number SE	3-522		
Description Opioid treatment programs				
Fiscal Effect				
Appropriations Rev	ease Existing enues rease Existing enues Thorrease Costs - to absorb within The Yes The Decrease Costs	May be possible agency's budget		
Permissive Mandatory Perr	5.Types of Local Government Unit Affected Towns rease Revenue missive Mandatory Mandatory Towns Counties School Districts	s Village		
Fund Sources Affected Affected Ch. 20 Appropriations GPR FED PRO PRS SEG SEGS				
Agency/Prepared By	Authorized Signature	Date		
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Fiscal Estimate Narratives DHS 1/27/2016

LRB Number 15-4189/1	Introduction Number	SB-522	Estimate Type	Original
Description				
Opioid treatment programs				

Assumptions Used in Arriving at Fiscal Estimate

Under current law, the Department certifies opioid treatment systems under DHS 75 for six months, one year, or two years. Seventeen opioid treatment systems are certified to operate in Wisconsin: one operates on a six month probationary certificate, four have one year provisional certificates, and the remaining 12 have two year certificates.

Treatment facilities pay either an initial or annual fee of \$550 to 1,350, depending on the number of services and programs it provides. Patients seeking treatment are limited to two years of treatment and must reside within 50 miles of a treatment facility, though waivers are used to extend these limitations. Medicaid provides funding for transportation to and from the nearest clinic for individuals who require it.

Under this bill, opioid treatment systems would be certified every three years, in conjunction with the federal government's certification period. Clinics would be allowed to contract with counselors to provide services to patients. The bill states the Department may not limit length of treatment for an individual or require the individual to reside within a certain geographic radius of a clinic.

Opioid treatment systems, must be certified under DHS 75 to receive Medicaid reimbursement, and the clinics must follow all other applicable Medicaid provider handbook, state plan, and contractual requirements as well. Under Medicaid policies, the program reimburses only for medically necessary services, and for the member's transportation only to the nearest provider. The Department assumes the bill language does not restrict the Department's ability to set Medicaid reimbursement policy. Under this assumption, the bill would not increase or decrease Medicaid benefits expenditures.

The bill is not expected to significantly change Department workload for certifying these providers or revenues collected from certification fees paid by these providers.

Long-Range Fiscal Implications