

1 ***-0972/P5.37***SECTION 93. 46.2805 (1) (intro.) of the statutes is amended to
2 read:

3 46.2805 (1) (intro.) “Care management organization” means all of the
4 following:

5 (cm) Before January 1, 2017, or the date specified in 2015 Wisconsin Act
6 (this act), section 9118 (1), whichever is later, an entity that is certified as meeting
7 the requirements for a care management organization under s. 46.284 (3) and that
8 has a contract under s. 46.284 (2). “Care management organization” does not mean
9 an entity that contracts with the department to operate one of the following:

10 ***-0972/P5.38***SECTION 94. 46.2805 (1) (a) of the statutes is repealed.

11 ***-0972/P5.39***SECTION 95. 46.2805 (1) (b) of the statutes is repealed.

12 ***-0972/P5.40***SECTION 96. 46.2805 (1) (dm) of the statutes is created to read:

13 46.2805 (1) (dm) Beginning on January 1, 2017, or the date specified in 2015
14 Wisconsin Act (this act), section 9118 (1), whichever is later, an insurer that is
15 licensed and in compliance with the applicable provisions of chs. 600 to 646, that is
16 certified as meeting the requirements for a care management organization under s.
17 46.284 (3), and that has a contract under s. 46.284 (2).

18 ***-0972/P5.41***SECTION 97. 46.2805 (4) of the statutes is amended to read:

19 46.2805 (4) “Family care benefit” means financial assistance for long-term
20 care and support items for an enrollee and any financial assistance, as specified by
21 the department, for primary and acute health care services under s. 49.46 (2) for an
22 enrollee.

23 ***-0972/P5.42***SECTION 98. 46.2805 (4k) of the statutes is created to read:

1 46.2805 (4k) “Family Care Partnership Program” means an integrated health
2 and long-term care program operated under an amendment to the state Medical
3 Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 1396n (c).

4 *~~-0972/P5.43~~*SECTION 99. 46.2805 (4m) of the statutes is created to read:

5 46.2805 (4m) “Family care program” means the program under s. 46.2805 to
6 46.2895 that provides the family care benefit.

7 *~~-0972/P5.44~~*SECTION 100. 46.2805 (4m) of the statutes, as created by 2015
8 Wisconsin Act (this act), is amended to read:

9 46.2805 (4m) “Family care program” means the program under s. 46.2805 to
10 46.2895 46.288 that provides the family care benefit.

11 *~~-0972/P5.45~~*SECTION 101. 46.2805 (7r) of the statutes is repealed.

12 *~~-0972/P5.46~~*SECTION 102. 46.2805 (7u) of the statutes is repealed.

13 *~~-0972/P5.47~~*SECTION 103. 46.2805 (9m) of the statutes is created to read:

14 46.2805 (9m) “Program of all-inclusive care for the elderly” means an
15 integrated health and long-term care program operated under 42 USC 1395eee or
16 1396u-4.

17 *~~-1035/P3.14~~*SECTION 104. 46.2805 (10) of the statutes is amended to read:

18 46.2805 (10) “Resource center” means an entity that meets the standards for
19 operation under s. 46.283 (3) or, if under contract to provide a portion of the services
20 specified under s. 46.283 (3), meets the standards for operation with respect to those
21 services, and fulfills the duties under s. 46.283 (4).

22 *~~-0972/P5.48~~*SECTION 105. 46.2805 (10m) of the statutes is amended to read:

23 46.2805 (10m) “Self-directed services option” means the option in the family
24 care program that is operated under a waiver from the secretary of the federal

1 ~~department of health and human services under 42 USC 1396n~~ (e) in which an
2 enrolled individual selects his or her own services and service providers.

3 ***-0972/P5.49*SECTION 106.** 46.281 (1d) of the statutes is amended to read:

4 46.281 (1d) WAIVER REQUEST. The department shall request from the secretary
5 of the federal department of health and human services any waivers of federal
6 medicaid laws necessary to permit the use of federal moneys to provide the family
7 care benefit to recipients of medical assistance. The department shall implement
8 any waiver that is approved and that is consistent with ss. 46.2805 to ~~46.2895~~ 46.288.
9 Regardless of whether a waiver is approved, the department may implement
10 operation of resource centers, care management organizations, and the family care
11 benefit.

12 ***-0972/P5.50*SECTION 107.** 46.281 (1g) (a) of the statutes is renumbered
13 46.281 (1g) and amended to read: or resource centers ✓

14 46.281 (1g) CONTRACTING FOR RESOURCE CENTERS AND CARE MANAGEMENT
15 ORGANIZATIONS. ~~Subject to par. (b), the~~ The department may contract with entities as
16 provided under s. 46.283 (2) to provide any of the services under s. 46.283 (3) and (4) ~~as~~ ^{strike}
17 ~~resource centers~~ ^{Strike} in any geographic area in the state, and may contract with entities
18 as provided under s. 46.284 (2) to administer the family care benefit as care
19 management organizations ~~in any geographic area in the state.~~

20 ***-1035/P3.15*SECTION 108.** 46.281 (1g) (a) of the statutes is amended to read:

21 46.281 (1g) (a) Subject to par. (b), the department may contract with entities
22 or resource centers as provided under s. 46.283 (2) to provide any of the services
23 under s. 46.283 (3) and (4) ~~as resource centers~~ ✓ in any geographic area in the state,
24 and may contract with entities as provided under s. 46.284 (2) to administer the

1 family care benefit as care management organizations in any geographic area in the
2 state.

3 ***-0972/P5.51*SECTION 109.** 46.281 (1g) (b) of the statutes is repealed.

4 ***-0972/P5.52*SECTION 110.** 46.281 (1n) (b) 3. of the statutes is amended to
5 read:

6 46.281 (1n) (b) 3. Conduct ongoing evaluations of managed care programs for
7 provision of long-term care services that are funded by medical assistance, as
8 defined in s. 46.278 (1m) (b), as to client access to services, the availability of client
9 choice of living and service options, quality of care, and cost-effectiveness. In
10 evaluating the availability of client choice, the department shall evaluate the
11 opportunity for a client to arrange for, manage, and monitor his or her family care
12 benefit directly or with assistance, self-directed services option as specified in s.
13 46.284 (4) (e).

14 ***-0972/P5.53*SECTION 111.** 46.281 (1n) (b) 4. of the statutes is amended to
15 read:

16 46.281 (1n) (b) 4. Require that quality assurance and quality improvement
17 efforts be included throughout the ~~long-term care system specified in ss. 46.2805 to~~
18 ~~46.2895~~ family care program.

19 ***-1035/P3.16*SECTION 112.** 46.281 (1n) (d) of the statutes is repealed.

20 ***-1035/P3.17*SECTION 113.** 46.281 (1n) (e) of the statutes is amended to read:

21 46.281 (1n) (e) Contract with a person to provide the advocacy services
22 described under s. 16.009 (2) (p) 1. to 5. to actual or potential recipients of the family
23 care benefit who are under age 60 or to their families or guardians. The department
24 may not contract under this paragraph with a county or with a person who has a
25 contract with the department to provide services under s. 46.283 (3) and (4) as a

1 resource center or other entity or to administer the family care benefit as a care
2 management organization. The contract under this paragraph shall include as a
3 goal that the provider of advocacy services provide one advocate for every 2,500
4 individuals under age 60 who receive the family care benefit or who participates in
5 the self-directed services option.

6 ***-1035/P3.18*SECTION 114.** 46.281 (3) of the statutes is amended to read:

7 46.281 (3) DUTY OF THE SECRETARY. The secretary shall certify to each county,
8 hospital, nursing home, community-based residential facility, adult family home,
9 and residential care apartment complex the date on which a resource center or other
10 entity under contract under s. 46.283 (2) that serves the area of the county, hospital,
11 nursing home, community-based residential facility, adult family home, or
12 residential care apartment complex is first available to perform functional
13 screenings and financial and cost-sharing screenings. To facilitate phase-in of
14 services of ~~resource centers~~, the secretary may certify that the resource center or
15 other entity is available for specified groups of eligible individuals or for specified
16 facilities in the county.

17 ***-0972/P5.54*SECTION 115.** 46.281 (4) (c) of the statutes is amended to read:

18 46.281 (4) (c) Each county in which the department has a contract with an
19 entity to administer the family care benefit, and in which the department had such
20 a contract before January 1, 2006, shall annually either pay the department or agree
21 to reduce the community aids distribution to the county under s. 46.40 (2) by the
22 amount that the county paid the department, or by which the county's community
23 aids distribution was reduced, in calendar year 2006 to fund the family care program
24 under ss. 46.2805 to 46.2895.

25 ***-1130/P4.39*SECTION 116.** 46.281 (4) (d) of the statutes is amended to read:

1 46.281 (4) (d) The department shall deposit payments made by counties under
2 this subsection in the appropriation account under s. 20.435 (7) (g) (4) (h).

3 *~~-1035/P3.19~~*SECTION 117. 46.2825 of the statutes is repealed.

4 *~~-0972/P5.55~~*SECTION 118. 46.2825 (2) (a) of the statutes is amended to read:

5 46.2825 (2) (a) Evaluate the performance of care management organizations
6 and entities that operate ~~a~~ the program described under s. 46.2805 (1) (a) or (b) of
7 all-inclusive care for the elderly or the Family Care Partnership Program in the
8 committee's region with respect to responsiveness to recipients of their services,
9 fostering choices for recipients, and other issues affecting recipients; and make
10 recommendations based on the evaluation to the department and to the care
11 management organizations and entities, as appropriate.

12 *~~-0972/P5.56~~*SECTION 119. 46.2825 (2) (c) of the statutes is amended to read:

13 46.2825 (2) (c) Monitor grievances and appeals made to care management
14 organizations or entities that operate ~~a~~ the program described under s. 46.2805 (1)
15 (a) or (b) of all-inclusive care for the elderly or the Family Care Partnership Program
16 within the committee's region.

17 *~~-1035/P3.20~~*SECTION 120. 46.283 (title) of the statutes is amended to read:

18 **46.283 (title) Resource centers; resource functions.**

19 *~~-0972/P5.57~~*SECTION 121. 46.283 (1) (a) (intro.) and 1. of the statutes are
20 consolidated, renumbered 46.283 (1) (a) and amended to read:

21 46.283 (1) (a) A county board of supervisors and, in a county with a county
22 executive or a county administrator, the county executive or county administrator,
23 may decide ~~all of the following:~~ 1. ~~Whether~~ whether to authorize one or more county
24 departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82

1 (1) (a) 1., 2., or 3. to apply to the department for a contract to operate a resource center
2 and, if so, which to authorize and what client group to serve.

3 *-0972/P5.58*SECTION 122. 46.283 (1) (a) 2. of the statutes is repealed.

4 *-1035/P3.21*SECTION 123. 46.283 (2) (intro.) of the statutes is renumbered
5 46.283 (2) and amended to read:

6 46.283 (2) EXCLUSIVE RESOURCE CENTER CONTRACT; CONTRACT FOR CERTAIN
7 FUNCTIONS. The department may contract to operate a resource center with counties,
8 long-term care districts, or the governing body of a tribe or band or the Great Lakes
9 Inter-Tribal Council, Inc., under a joint application of any of these, or with a private
10 entity or nonprofit organization if the department determines that the organization
11 has no significant connection to an entity that operates a care management
12 organization and if any of the following applies: The department may contract with
13 an entity other than a resource center to perform certain functions of a resource
14 center.

as affected by 2015 Wisconsin Act (this act),

*-0972/P5.59*SECTION 124. 46.283 (2) (intro.) of the statutes is amended to

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read:

46.283 (2) EXCLUSIVE CONTRACT. (intro.) The department may contract to
18 operate a resource center with counties, long-term care districts, or the governing
19 body of a tribe or band or the Great Lakes Inter-Tribal Council, Inc., under a joint
20 application of any of these, or with a private nonprofit organization if the department
21 determines that the organization has no significant connection to an entity that
22 operates a care management organization and if any of the following applies:

*-1035/P3.22*SECTION 125. 46.283 (2) (a) of the statutes is repealed.

*-0972/P5.60*SECTION 126. 46.283 (2) (b) of the statutes is amended to read:

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SECTION 126

1 ~~46.283 (2) (b) A county agency or a long-term care district applies for a contract~~
2 ~~but fails to meet the standards specified in sub. (3).~~

3 *–1035/P3.23*SECTION 127. 46.283 (2) (b) of the statutes is repealed.

4 *–1035/P3.24*SECTION 128. 46.283 (3) (title) of the statutes is repealed and
5 recreated to read:

6 46.283 (3) (title) RESOURCE FUNCTION DUTIES.

7 *–1035/P3.25*SECTION 129. 46.283 (3) (intro.) of the statutes is amended to
8 read:

9 46.283 (3) (intro.) The department shall ~~assure that at least all~~ may in a
10 contract with a resource center or other entity specify that the resource center or
11 other entity provide any of the following ~~are available to a person who contacts a~~
12 resource center for service services or functions:

13 *–0972/P5.61*SECTION 130. 46.283 (3) (e) of the statutes is amended to read:

14 46.283 (3) (e) A determination of financial eligibility and of the maximum
15 amount of cost sharing required for a person who is seeking long-term care services
16 or the family care benefit, under standards prescribed by the department.

17 *–1035/P3.26*SECTION 131. 46.283 (4) (title) of the statutes is amended to
18 read:

19 46.283 (4) (title) DUTIES; RESOURCE CENTERS.

20 *–1035/P3.27*SECTION 132. 46.283 (4) (a) of the statutes is renumbered 46.283
21 (3) (L) and amended to read:

22 46.283 (3) (L) Provide Provision of services statewide or within the entire
23 geographic area prescribed for the resource center or other entity by the department
24 as specified in the contract.

1 *~~1035/P3.28~~**SECTION 133.** 46.283 (4) (e) of the statutes is renumbered 46.283
2 (3) (m) and amended to read:

3 46.283 (3) (m) ~~Provide information~~ Information about the services of the
4 resource center or other entity, including the services specified in sub. (3) (d), about
5 assessments under s. 46.284 (4) (b) and care plans under s. 46.284 (4) (c), and about
6 the family care benefit and the self-directed services option to all older persons and
7 adults with a physical or developmental disability who are residents of nursing
8 homes, community-based residential facilities, adult family homes, and residential
9 care apartment complexes in the area of the resource center or other entity when the
10 benefit under s. 46.286 first becomes available in the county where the nursing home,
11 community-based residential facility, adult family home, or residential care
12 apartment complex is located.

13 *~~1035/P3.29~~**SECTION 134.** 46.283 (4) (f) of the statutes is renumbered 46.283
14 (3) (n) and amended to read:

15 46.283 (3) (n) ~~Perform~~ Performance of a functional screening and a financial
16 and cost-sharing screening for any resident, as specified in par. (e) (m), who requests
17 a screening and assist any resident who is eligible and chooses to enroll in a care
18 management organization [✓] ~~or the self-directed services option~~ ^{Strike} to do so.

19 *~~0972/P5.62~~**SECTION 135.** 46.283 (4) (f) of the statutes is amended to read:

20 46.283 (4) (f) Perform a functional screening and a financial and cost-sharing
21 screening for any resident, as specified in par. (e), who requests a screening and
22 assist any resident who is eligible and chooses to enroll in a care management
23 organization ~~or the self-directed services option~~ to do so.

24 *~~1035/P3.30~~**SECTION 136.** 46.283 (4) (g) of the statutes is renumbered 46.283
25 (3) (o) and amended to read:

1 46.283 (3) (o) ~~Perform~~ Performance of a functional screening and a financial
2 and cost-sharing screening for any person seeking admission to a nursing home,
3 community-based residential facility, residential care apartment complex, or adult
4 family home, if the secretary has certified that the resource center or other entity is
5 available to the person and the facility and the person is determined by the resource
6 center or other entity to have a condition that is expected to last at least 90 days that
7 would require care, assistance, or supervision. A resource center or other entity may
8 not require a financial and cost-sharing screening for a person seeking admission
9 or about to be admitted on a private pay basis who waives the requirement for a
10 financial and cost-sharing screening under this paragraph, unless the person is
11 expected to become eligible for medical assistance within 6 months. A resource
12 center or other entity need not perform a functional screening for a person seeking
13 admission or about to be admitted for whom a functional screening was performed
14 within the previous 6 months.

15 *~~1035/P3.31~~*SECTION 137. 46.283 (4) (j) of the statutes is repealed.

16 *~~1035/P3.32~~*SECTION 138. 46.283 (5) of the statutes is amended to read: (bd)[^],

17 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
18 (bm), (gm), (pa), and (w) and (7) (b), ^{Strike} ~~(bd)~~, and (md), the department may contract with
19 organizations ~~that meet standards under sub. (3)~~ for performance of the duties under
20 sub. (4) (3) and shall distribute funds for services provided by resource centers and
21 other entities.

22 *~~1130/P4.40~~*SECTION 139. 46.283 (5) of the statutes is amended to read:

23 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
24 (bd), (bm), (gm), (pa), and (w) and (7) (b), ~~(bd)~~, and (md), the department may contract

1 with organizations that meet standards under sub. (3) for performance of the duties
2 under sub. (4) and shall distribute funds for services provided by resource centers.

3 ~~*-1035/P3.33*SECTION 140.~~ 46.283 (6) of the statutes is repealed.

4 ~~*-0972/P5.63*SECTION 141.~~ 46.283 (6) (a) 2. of the statutes is amended to read:

5 46.283 (6) (a) 2. At least one-fourth of the members of the governing board shall
6 be individuals who belong to a client group served by the resource center or their
7 family members, guardians, or other advocates. The proportion of these board
8 members who belong to each client group, or their family members, guardians, or
9 advocates, shall be the same, respectively, as the proportion of individuals in this
10 state who receive services under s. ~~46.2805 to 46.2895~~ the family care program and
11 belong to each client group.

12 ~~*-0972/P5.64*SECTION 142.~~ 46.283 (6) (a) 3. of the statutes is amended to read:

13 46.283 (6) (a) 3. An individual who has a financial interest in, or serves on the
14 governing board of, a care management organization or an organization that
15 administers a program ~~described under s. 46.2805 (1) (a) or (b)~~ of all-inclusive care
16 for the elderly or a Family Care Partnership Program or a managed care program
17 under s. 49.45 for individuals who are eligible to receive supplemental security
18 income under 42 USC 1381 to 1383c, which serves any geographic area also served
19 by a resource center, and the individual's family members, may not serve as members
20 of the governing board of the resource center.

21 ~~*-1035/P3.34*SECTION 143.~~ 46.283 (7) (intro.) of the statutes is amended to
22 read:

23 46.283 (7) (intro.) No record, as defined in s. 19.32 (2), of a resource center or
24 other contracted entity under s. 46.283 (2) that contains personally identifiable
25 information, as defined in s. 19.62 (5), concerning an individual who receives services

1 from the resource center may be disclosed by the resource center without the
2 individual's informed consent, except as follows:

3 ***-0972/P5.65*SECTION 144.** 46.283 (7) (a) of the statutes is amended to read:

4 46.283 (7) (a) A resource center or other contracted entity under 5.46.283(2)
5 with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer
6 the family care program under ss. 46.2805 to 46.2895.

7 ***-1035/P3.35*SECTION 145.** 46.283 (7) (a) of the statutes is amended to read:

8 46.283 (7) (a) A resource center or other contracted entity under s. 46.283 (2)
9 may provide information as required to comply with s. 16.009 (2) (p) or 49.45 (4) or
10 as necessary for the department to administer the program under ss. 46.2805 to
11 46.2895.

12 ***-0972/P5.66*SECTION 146.** 46.283 (7) (b) of the statutes is amended to read:

13 46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
14 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center
15 or other contracted entity under sub. (2) acting under this section may exchange confidential information about a client, as
16 defined in s. 46.287 (1), without the informed consent of the client, under s. 46.21
17 (2m) (c), 46.215 (1m), 46.22 (1) (dm), 46.23 (3) (e), 46.284 (7), ~~46.2895 (10)~~, 51.42 (3)
18 (e) or 51.437 (4r) (b) in the county of the resource center, operating area if necessary to enable the
19 resource center or other entity to perform its duties or to coordinate the delivery of services to the
20 client.

21 ***-1035/P3.36*SECTION 147.** 46.283 (7) (b) of the statutes is amended to read:

22 46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
23 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center
24 or other contracted entity under sub. (2) acting under this section may exchange
25 confidential information about a client, as defined in s. 46.287 (1), without the

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1 informed consent of the client, under s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm),
2 46.23 (3) (e), 46.284 (7), 46.2895 (10), 51.42 (3) (e) or 51.437 (4r) (b) in the county
3 operating area of the resource center or other entity, if necessary to enable the
4 resource center or other entity to perform its duties or to coordinate the delivery of
5 services to the client.

6 ***-0972/P5.67*SECTION 148.** 46.284 (1) (a) (intro.) and 1. of the statutes are
7 consolidated, renumbered 46.284 (1) (a) and amended to read:

8 46.284 (1) (a) A county board of supervisors and, in a county with a county
9 executive or a county administrator, the county executive or county administrator,
10 may decide all of the following: 1. ~~Whether~~ whether to authorize one or more county
11 departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
12 (1) (a) 1. or 2. to apply to the department for a contract to operate a care management
13 organization and, if so, which to authorize and what client group to serve.

14 ***-0972/P5.68*SECTION 149.** 46.284 (1) (a) 2. of the statutes is repealed.

15 ***-0972/P5.69*SECTION 150.** 46.284 (2) (a) of the statutes is amended to read:

16 46.284 (2) (a) The department may contract for operation of a care
17 management organization only with an entity that is certified by the department as
18 meeting the requirements under sub. (3). No entity may operate as a care
19 management organization under the requirements of this section unless so certified
20 and under contract with the department.

21 ***-0972/P5.70*SECTION 151.** 46.284 (2) (bm) of the statutes is amended to read:

22 46.284 (2) (bm) The department may contract with counties, long-term care
23 districts, the governing body of a tribe or band or the Great Lakes inter-tribal
24 council, inc., or under a joint application of any of these, or with a private
25 organization that has no significant connection to an entity that operates a resource

1 center. ~~Proposals for contracts under this subdivision shall be solicited under a~~
2 ~~competitive sealed proposal process under s. 16.75 (2m) and the department shall~~
3 ~~evaluate the proposals primarily as to the quality of care that is proposed to be~~
4 ~~provided, certify those~~ The department may contract with any applicants that meet
5 it certifies as meeting the requirements specified in sub. (3) (a), ~~select certified~~
6 ~~applicants for contract and contract with the selected applicants. The department~~
7 ~~is not required to solicit proposals for contracts to be a care management~~
8 ~~organization under a competitive sealed proposal process.~~

9 ***-0972/P5.71***SECTION 152. 46.284 (2) (bm) of the statutes, as affected by 2015
10 Wisconsin Act (this act), is amended to read:

11 46.284 (2) (bm) The department may contract with counties, ~~long-term care~~
12 ~~districts~~, the governing body of a tribe or band or the Great Lakes inter-tribal
13 council, inc., or under a joint application of any of these, or with a private
14 organization that has no significant connection to an entity that operates a resource
15 center. The department may contract with any applicants that it certifies as meeting
16 the requirements specified in sub. (3) (a). The department is not required to solicit
17 proposals for contracts to be a care management organization under a competitive
18 sealed proposal process.

19 ***-0972/P5.72***SECTION 153. 46.284 (2) (c) of the statutes is repealed.

20 ***-0972/P5.73***SECTION 154. 46.284 (3) (b) 10. of the statutes is amended to
21 read:

22 46.284 (3) (b) 10. Coverage statewide or for a geographic area specified by the
23 department if the department grants the applicant an exception to statewide
24 coverage.

1 ***-0972/P5.74***SECTION 155. 46.284 (3) (b) 11. of the statutes is amended to
2 read:

3 46.284 (3) (b) 11. The ability to develop strong linkages with systems and
4 services that are not directly within the scope of the applicant's responsibility but
5 that are important to the target group that it proposes to serve, including,

6 11m. If the department chooses to make primary and acute health care services
7 part of the family care benefit, the ability to provide or provide access to primary and
8 acute health care services under s. 49.46 (2) as determined by the department.

9 ***-0972/P5.75***SECTION 156. 46.284 (3m) of the statutes is amended to read:

10 46.284 (3m) PERMIT REQUIRED. A care management organization that is
11 described under s. 600.01 (1) (b) 10. a., 2013 stats., to which s. 600.01 (1) (b) 10. b.,
12 2013 stats., does not apply and that is certified under sub. (3) shall apply for a permit
13 with the office of the commissioner of insurance under ch. 648.

14 ***-0972/P5.76***SECTION 157. 46.284 (3m) of the statutes, as affected by 2015
15 Wisconsin Act (this act), is repealed.

16 ***-0972/P5.77***SECTION 158. 46.284 (4) (e) of the statutes is amended to read:

17 46.284 (4) (e) Provide, within guidelines established by the department, a
18 ~~mechanism~~ self-directed services option by which an enrollee may arrange for,
19 manage, and monitor his or her family care benefit directly or with the assistance of
20 another person chosen by the enrollee. The care management organization shall
21 provide each enrollee with a form on which the enrollee shall indicate whether he or
22 she has been offered the self-directed services option under this paragraph and
23 whether he or she has accepted or declined the self-directed services option. If the
24 enrollee accepts the option, the care management organization shall monitor the
25 enrollee's use of a fixed budget for purchase of services or support items from any

1 qualified provider, monitor the health and safety of the enrollee, and provide
2 assistance in management of the enrollee's budget and services at a level tailored to
3 the enrollee's need and desire for the assistance.

4 ***-1130/P4.41*SECTION 159.** 46.284 (5) (a) of the statutes is amended to read:

5 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (bd), (g),
6 (gm), (h), (im), (o), and (w) and (7) (b), (bd), ~~and (g)~~, the department shall provide
7 funding on a capitated payment basis for the provision of services under this section.
8 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
9 under contract with the department may expend the funds, consistent with this
10 section, including providing payment, on a capitated basis, to providers of services
11 under the family care benefit.

12 ***-0972/P5.78*SECTION 160.** 46.284 (5) (d) 4. of the statutes is amended to read:

13 46.284 (5) (d) 4. The requirement that a care management organization place
14 funds in a risk reserve and maintain the risk reserve in an interest-bearing escrow
15 account with a financial institution, as defined in s. 69.30 (1) (b), ~~or invest funds as~~
16 ~~specified in s. 46.2895 (4) (j) 2. or 3.~~ Moneys in the risk reserve or invested as specified
17 in this subdivision may be expended only for the provision of services under this
18 section. If a care management organization ceases participation under this section,
19 the funds in the risk reserve or invested as specified in this subdivision, minus any
20 contribution of moneys other than those specified in par. (c), shall be returned to the
21 department. The department shall expend the moneys for the payment of
22 outstanding debts to providers of family care benefit services and for the
23 continuation of family care benefit services to enrollees.

24 ***-0972/P5.79*SECTION 161.** 46.284 (6) of the statutes is amended to read:

1 46.284 (6) GOVERNING BOARD. A care management organization shall have a
2 governing board that reflects the ethnic and economic diversity of the geographic
3 area served by the care management organization. At least one-fourth of the
4 members of the governing board shall be representative of the ~~client group or groups~~
5 ~~whom the care management organization is contracted to serve or those clients'~~
6 enrollees or the enrollees' family members, guardians, or other advocates.

7 *~~0972/P5.80~~*SECTION 162. 46.284 (7) (a) of the statutes is amended to read:

8 46.284 (7) (a) A care management organization may provide information as
9 required to comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the
10 department to administer the family care program under ~~ss. 46.2805 to 46.2895~~.

11 *~~0972/P5.81~~*SECTION 163. 46.284 (7) (b) of the statutes is amended to read:

12 46.284 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
13 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a care
14 management organization acting under this section may exchange confidential
15 information about a client, as defined in s. 46.287 (1), without the informed consent
16 of the client, under s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm), 46.23 (3) (e), 46.283
17 (7), ~~46.2895 (10)~~, 51.42 (3) (e) or 51.437 (4r) (b) in the county of the care management
18 organization, if necessary to enable the care management organization to perform
19 its duties or to coordinate the delivery of services to the client.

20 *~~0972/P5.82~~*SECTION 164. 46.285 (intro.) and (1) of the statutes are
21 consolidated, renumbered 46.285 and amended to read:

22 **46.285 Operation of resource center and care management**
23 **organization.** In order to meet federal requirements and assure federal financial
24 participation in funding of the family care benefit, a county, a tribe or band, ~~a~~
25 ~~long-term care district~~ or an organization, including a private, nonprofit

1 corporation, may not directly operate both a resource center and a care management
2 organization, except as follows: ~~(1) For that for~~ an entity with which the department
3 has contracted under s. 46.281 (1) (e) 1., 2005 stats., provision of the services
4 specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
5 provision of services of the care management organization by January 1, 2001.

6 ***-0972/P5.83*SECTION 165.** 46.285 (2) of the statutes is repealed.

7 ***-0972/P5.84*SECTION 166.** 46.286 (3g) of the statutes is created to read:

8 46.286 (3g) TRANSFERRING CARE MANAGEMENT ORGANIZATIONS. An enrollee may
9 transfer his or her enrollment to a different care management organization but only
10 during an open enrollment period specified by the department, unless the enrollee
11 meets an exception specified by the department.

12 ***-1035/P3.37*SECTION 167.** 46.287 (2) (c) of the statutes is amended to read:

13 46.287 (2) (c) Information regarding the availability of advocacy services and
14 notice of adverse actions taken and appeal rights shall be provided to a client by the
15 resource center or other contracted entity under s. 46.283 (2) or care management
16 organization in a form and manner that is prescribed by the department by rule.

17 ***-0972/P5.85*SECTION 168.** 46.2895 of the statutes, as affected by 2015
18 Wisconsin Act (this act), is repealed.

19 ***-0972/P5.86*SECTION 169.** 46.2895 (1) (a) (intro.) of the statutes is amended
20 to read:

21 46.2895 (1) (a) (intro.) ~~A~~ Except as provided in par. (f), a county, a tribe or band,
22 or any combination of counties or tribes or bands, may create a special purpose
23 district that is termed a “long-term care district”, that is a local unit of government,
24 that is separate and distinct from, and independent of, the state and the county or
25 tribe or band that created it, and that has the powers and duties specified in this

1 section, if each county or tribe or band that participates in creating the district does
2 all of the following:

3 ***-0972/P5.87*SECTION 170.** 46.2895 (1) (a) 1. b. of the statutes is amended to
4 read:

5 46.2895 (1) (a) 1. b. Specifies the long-term care district's primary purpose,
6 which shall be to operate, under contract with the department, a resource center
7 under s. 46.283, a care management organization under s. 46.284, or a program
8 ~~described under s. 46.2805 (1) (a) or (b) of all-inclusive care for the elderly or the~~
9 Family Care Partnership Program.

10 ***-0972/P5.88*SECTION 171.** 46.2895 (1) (c) of the statutes is amended to read:

11 46.2895 (1) (c) A long-term care district may not operate a care management
12 organization under s. 46.284 ~~or~~, a program ~~described under s. 46.2805 (1) (a) or (b)~~
13 of all-inclusive care for the elderly, or the Family Care Partnership Program if the
14 district operates a resource center under s. 46.283.

15 ***-0972/P5.89*SECTION 172.** 46.2895 (1) (f) of the statutes is created to read:

16 46.2895 (1) (f) No county, tribe, band, or combination of counties, tribes, or
17 bands, may create a long-term care district after June 30, 2015.

18 ***-0972/P5.90*SECTION 173.** 46.2895 (4) (intro.) of the statutes is amended to
19 read:

20 46.2895 (4) POWERS. (intro.) Subject to ~~sub. subs.~~ (1) (c) and (12m), a long-term
21 care district has all the powers necessary or convenient to carry out the purposes and
22 provisions of the family care program ss. 46.2805 to 46.2895. In addition to all these
23 powers, a long-term care district may do all of the following:

24 ***-0972/P5.91*SECTION 174.** 46.2895 (4) (dm) of the statutes is amended to
25 read:

1 46.2895 (4) (dm) Subject to sub. (1) (c), enter into a contract with the
2 department to operate ~~a the program described under s. 46.2805 (1) (a) or (b) of~~
3 all-inclusive care for the elderly or the Family Care Partnership Program and
4 provide services related to the contracted services.

5 ***-0972/P5.92***SECTION 175. 46.2895 (8) (a) (intro.) of the statutes is amended
6 to read:

7 46.2895 (8) (a) (intro.) ~~A~~ Subject to sub. (12m), a long-term care district board
8 that is created at least in part by a county shall do all of the following:

9 ***-0972/P5.93***SECTION 176. 46.2895 (12m) of the statutes is created to read:

10 46.2895 (12m) REQUIRED DISSOLUTION. A long-term care district that exists on
11 June 30, 2015, shall dissolve under the procedures in sub. (13) before June 30, 2017,
12 or before a date established by the department, whichever is later.

13 ***-0972/P5.94***SECTION 177. 46.2897 of the statutes is repealed.

14 ***-0972/P5.95***SECTION 178. 46.2899 (1) of the statutes is repealed.

15 ***-0972/P5.96***SECTION 179. 46.2899 (3) of the statutes is amended to read:

16 46.2899 (3) ELIGIBILITY. The department shall consider as eligible for the
17 waiver program described under sub. (2) only individuals who are receiving
18 post-secondary education in a setting that is distinguishable from the institution.
19 The department shall set the financial eligibility requirements and functional
20 eligibility requirements for the waiver program described under sub. (2) the same as
21 the financial eligibility requirements and functional eligibility requirements for the
22 self-directed services option of the family care program, as defined in s. 46.2805
23 (4m), except for the requirement to be an individual who is developmentally disabled
24 and who is receiving post-secondary education on the grounds of a institution.

25 ***-0972/P5.97***SECTION 180. 46.2899 (4) of the statutes is amended to read:

1 46.2899 (4) SERVICES AND BENEFITS. The department shall provide the same
2 services under the waiver program described in sub. (2) as it provides under the
3 self-directed services option of the family care program, as defined in s. 46.2805
4 (4m). The department shall determine the funding amount for a waiver program
5 participant under this section.

6 *~~1130/P4.42~~*SECTION 181. 46.29 (1) (intro.) of the statutes is amended to
7 read:

8 46.29 (1) (intro.) From the appropriation account under s. 20.435 (7) (4) (a), the
9 department shall distribute at least \$16,100 in each fiscal year for operation of the
10 council on physical disabilities. The council on physical disabilities shall do all of the
11 following:

12 *~~1130/P4.43~~*SECTION 182. 46.295 (1) of the statutes is amended to read:

13 46.295 (1) The department may, on the request of any hearing-impaired
14 person, city, village, town, or county or private agency, provide funds from the
15 appropriation accounts under s. 20.435 (4) (hs) and (7) (d) and (hs) to reimburse
16 interpreters for hearing-impaired persons for the provision of interpreter services.

17 *~~1255/P2.6~~*SECTION 183. 46.40 (1) (a) of the statutes is amended to read:

18 46.40 (1) (a) Within the limits of available federal funds and of the
19 appropriations under s. 20.435 (7) (b) and (o), the department shall distribute funds
20 for community social, mental health, developmental disabilities, and alcohol and
21 other drug abuse services and for services under ss. 46.87, ~~46.985~~, and 51.421 to
22 county departments under ss. 46.215, 46.22, 46.23, 51.42, and 51.437 and to county
23 aging units, as provided in subs. (2), (2m), (8), and ~~(7)~~ to (9).

24 *~~1255/P2.7~~*SECTION 184. 46.40 (7) of the statutes is repealed.

25 *~~1255/P2.8~~*SECTION 185. 46.40 (14m) of the statutes is amended to read:

1 46.40 (14m) COUNTY COMMUNITY AIDS BUDGETS. Before December 1 of each year,
2 each county department under ss. 46.215, 46.22, 46.23, 51.42 and 51.437 and each
3 tribal governing body shall submit to the department a proposed budget for the
4 expenditure of funds allocated under this section or carried forward under s. 46.45
5 (3) (a). The proposed budget shall be submitted on a form developed by the
6 department and approved by the department of administration.

7 *~~1255/P2.9~~*SECTION 186. 46.45 (3) (a) of the statutes is amended to read:

8 46.45 (3) (a) Except as provided in par. (b), at the request of a county, tribal
9 governing body, or private nonprofit organization, the department shall carry
10 forward up to 3% of the total amount allocated to the county, tribal governing body,
11 or nonprofit organization for a calendar year, ~~not including the amount allocated to~~
12 ~~the county under s. 46.40 (7), which amount may be carried forward as provided in~~
13 ~~par. (c).~~ All funds carried forward for a tribal governing body or nonprofit
14 organization and all funds allocated under s. 46.40 (2m) carried forward for a county
15 shall be used for the purpose for which the funds were originally allocated. Other
16 funds carried forward under this paragraph may be used for any purpose under s.
17 20.435 (7) (b), except that a county may not use any funds carried forward under this
18 paragraph for administrative or staff costs. An allocation of carried-forward funding
19 under this paragraph does not affect a county's base allocations under s. 46.40 (2),
20 (2m), (8), and (9).

21 *~~1255/P2.10~~*SECTION 187. 46.45 (3) (c) of the statutes is repealed.

22 *~~1255/P2.11~~*SECTION 188. 46.45 (6) (a) of the statutes is renumbered 46.45
23 (6) and amended to read:

24 46.45 (6) The department may carry forward 10% of any funds specified in sub.
25 (3) (a) that are not carried forward under sub. (3) (a) for emergencies, for justifiable

1 unit services costs above planned levels, and for increased costs due to population
2 shifts. An allocation of carried-forward funding under this paragraph does not affect
3 a county's base allocations under s. 46.40 (2), (2m), (8), and (9).

4 ***-1255/P2.12*SECTION 189.** 46.45 (6) (b) of the statutes is repealed.

5 ***-1255/P2.13*SECTION 190.** 46.56 (3) (a) 4. of the statutes is repealed.

6 ***-1255/P2.14*SECTION 191.** 46.56 (10) of the statutes is repealed.

7 ***-0972/P5.98*SECTION 192.** 46.82 (3) (a) 19. of the statutes is amended to read:

8 46.82 (3) (a) 19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
9 under s. 46.283 (1) (a) ~~1.~~, apply to the department to operate a resource center under
10 s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate
11 the resource center.

12 ***-0972/P5.99*SECTION 193.** 46.82 (3) (a) 20. of the statutes is amended to read:

13 46.82 (3) (a) 20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
14 under s. 46.284 (1) (a) ~~1.~~, apply to the department to operate a care management
15 organization under s. 46.284 and, if the department contracts with the county under
16 s. 46.284 (2), operate the care management organization and, if appropriate, place
17 funds in a risk reserve.

18 ***-1255/P2.15*SECTION 194.** 46.985 of the statutes is repealed.

19 ***-1130/P4.44*SECTION 195.** 46.99 (4) of the statutes is amended to read:

20 46.99 (4) From the appropriation account under s. 20.435 (4) (o), the
21 department may distribute to counties that provide services under this section the
22 amount of federal moneys received by the state as the federal share of medical
23 assistance for those services, minus the amount transferred to the appropriation
24 account under s. 20.435 (7) (4) (im) for the department's costs of administering this

SECTION 195

1 section. Counties shall use moneys distributed under this section to provide services
2 under this section or s. 51.44.

3 ***-0972/P5.100*SECTION 196.** 48.47 (7g) of the statutes is amended to read:

4 48.47 (7g) STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. Establish
5 a statewide automated child welfare information system. Notwithstanding ss.
6 ~~46.2895 (9)~~, 48.396 (1) and (2) (a), 48.78 (2) (a), 48.981 (7), 49.45 (4), 49.83, 51.30,
7 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 252.15, 253.07 (3) (c), 938.396 (1) (a) and
8 (2), and 938.78 (2) (a), the department may enter the content of any record kept or
9 information received by the department into the statewide automated child welfare
10 information system, and a county department under s. 46.215, 46.22, or 46.23, the
11 department, or any other organization that has entered into an information sharing
12 and access agreement with the department or any of those county departments and
13 that has been approved for access to the statewide automated child welfare
14 information system by the department may have access to information that is
15 maintained in that system, if necessary to enable the county department,
16 department, or organization to perform its duties under this chapter, ch. 46, 51, 55,
17 or 938, or 42 USC 670 to 679b or to coordinate the delivery of services under this
18 chapter, ch. 46, 51, 55, or 938, or 42 USC 670 to 679b. The department may also
19 transfer information that is maintained in the system to a court under s. 48.396 (3)
20 (bm), and the court and the director of state courts may allow access to that
21 information as provided in s. 48.396 (3) (c) 2.

22 ***-1255/P2.16*SECTION 197.** 49.45 (6v) of the statutes ^{as affected by 2015 Wisconsin Act} is repealed. (this act) ^

23 ***-1130/P4.45*SECTION 198.** 49.45 (6v) (c) of the statutes is amended to read:

24 49.45 (6v) (c) If the report specified in par. (b) indicates that utilization of beds
25 by recipients of medical assistance in facilities is less than estimates for that

1 utilization reflected in the intentions of the joint committee on finance, legislature
2 and governor, as expressed by them in the budget determinations, the department
3 shall include a proposal to transfer moneys from the appropriation under s. 20.435
4 (4) (b) to the appropriation under s. 20.435 ~~(7)~~ (4) (bd) for the purpose of increasing
5 funding for the community options program under s. 46.27. The amount proposed
6 for transfer may not reduce the balance in the appropriation account under s. 20.435
7 (4) (b) below an amount necessary to ensure that that appropriation account will end
8 the current fiscal year or the current fiscal biennium with a positive balance. The
9 secretary shall transfer the amount identified under the proposal.

10 *~~1130/P4.46~~*SECTION 199. 49.472 (5) of the statutes is amended to read:

11 49.472 (5) COMMUNITY OPTIONS PARTICIPANTS. From the appropriation under s.
12 20.435 ~~(7)~~ (4) (bd), the department may pay all or a portion of the monthly premium
13 calculated under sub. (4) (a) for an individual who is a participant in the community
14 options program under s. 46.27 (11).

15 *~~0972/P5.101~~*SECTION 200. 49.475 (1) (e) 2. of the statutes is amended to
16 read:

17 49.475 (1) (e) 2. An enrollee of the family care program, as defined in s. 46.2805
18 (4m).

19 *~~0972/P5.102~~*SECTION 201. 49.496 (1) (bk) 2. of the statutes is repealed.

20 *~~1130/P4.47~~*SECTION 202. 49.849 (6) (b) of the statutes is amended to read:

21 49.849 (6) (b) From the appropriation under s. 20.435 ~~(7)~~ (4) (im), with respect
22 to funds collected by the department under sub. (2) related to long-term community
23 support services funded under s. 46.27 (7) paid on behalf of the decedent or the
24 decedent's spouse, the department shall pay claims under sub. (5) and shall spend

1 the remainder of the funds recovered under this section for long-term community
2 support services funded under s. 46.27 (7).

3 ***-1035/P3.38*SECTION 203.** 50.034 (5m) of the statutes is amended to read:

4 50.034 (5m) PROVISION OF INFORMATION REQUIRED. Subject to sub. (5p), when a
5 residential care apartment complex first provides written material regarding the
6 residential care apartment complex to a prospective resident, the residential care
7 apartment complex shall also provide the prospective resident information specified
8 by the department concerning the services of a resource center or other entity under
9 s. 46.283, the family care benefit under s. 46.286, and the availability of a functional
10 screening and a financial and cost-sharing screening to determine the prospective
11 resident's eligibility for the family care benefit under s. 46.286 (1).

12 ***-1035/P3.39*SECTION 204.** 50.034 (5n) (intro.) of the statutes is amended to
13 read:

14 50.034 (5n) REQUIRED REFERRAL. (intro.) Subject to sub. (5p), when a residential
15 care apartment complex first provides written material regarding the residential
16 care apartment complex to a prospective resident who is at least 65 years of age or
17 has developmental disability or a physical disability and whose disability or
18 condition is expected to last at least 90 days, the residential care apartment complex
19 shall refer the prospective resident to a resource center or other entity under s.
20 46.283, unless any of the following applies:

21 ***-1035/P3.40*SECTION 205.** 50.034 (5n) (a) of the statutes is amended to read:

22 50.034 (5n) (a) For a person for whom a screening for functional eligibility
23 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
24 under this subsection need not include performance of an additional functional
25 screening under s. 46.283 (4) ~~(g)~~ (3) (o).

1 *~~1035/P3.41~~*SECTION 206. 50.034 (5n) (d) of the statutes is amended to read:

2 50.034 (5n) (d) For a person who seeks admission or is about to be admitted on
3 a private pay basis and who waives the requirement for a financial and cost-sharing
4 screening under s. 46.283 (4) (g) (3) (o), the referral under this subsection may not
5 include performance of a financial and cost-sharing screening under s. 46.283 (4) (g)
6 (3) (o), unless the person is expected to become eligible for medical assistance within
7 6 months.

8 *~~1035/P3.42~~*SECTION 207. 50.034 (5p) of the statutes is amended to read:

9 50.034 (5p) APPLICABILITY. Subsections (5m) and (5n) apply only if the secretary
10 has certified under s. 46.281 (3) that a resource center or other entity is available for
11 the residential care apartment complex and for specified groups of eligible
12 individuals that include those persons seeking admission to or the residents of the
13 residential care apartment complex.

14 *~~0972/P5.103~~*SECTION 208. 50.034 (6) of the statutes is amended to read:

15 50.034 (6) FUNDING. Funding for supportive, personal or nursing services that
16 a person who resides in a residential care apartment complex receives, other than
17 private or 3rd-party funding, may be provided only under s. 46.27 (11) (c) 7. or 46.277
18 (5) (e), except if the provider of the services is a certified medical assistance provider
19 under s. 49.45 or if the funding is provided as a family care benefit under ss. the
20 family care program as defined in s. 46.2805 to 46.2895 (4m).

21 *~~1035/P3.43~~*SECTION 209. 50.035 (4m) of the statutes is amended to read:

22 50.035 (4m) PROVISION OF INFORMATION REQUIRED. Subject to sub. (4p), when a
23 community-based residential facility first provides written material regarding the
24 community-based residential facility to a prospective resident, the
25 community-based residential facility shall also provide the prospective resident

1 information specified by the department concerning the services of a resource center
2 or other entity under s. 46.283, the family care benefit under s. 46.286, and the
3 availability of a functional screening and a financial and cost-sharing screening to
4 determine the prospective resident's eligibility for the family care benefit under s.
5 46.286 (1).

6 ***-1035/P3.44***SECTION 210. 50.035 (4n) (intro.) of the statutes is amended to
7 read:

8 50.035 (4n) REQUIRED REFERRAL. (intro.) When a community-based residential
9 facility first provides written information regarding the community-based
10 residential facility to a prospective resident who is at least 65 years of age or has
11 developmental disability or a physical disability and whose disability or condition is
12 expected to last at least 90 days, the community-based residential facility shall refer
13 the individual to a resource center or other entity under s. 46.283 or, if the secretary
14 has not certified under s. 46.281 (3) that a resource center or other entity is available
15 in the area of the community-based residential facility to serve individuals in an
16 eligibility group to which the prospective resident belongs, to the county department
17 that administers a program under ss. 46.27 or 46.277, unless any of the following
18 applies:

19 ***-1035/P3.45***SECTION 211. 50.035 (4n) (a) of the statutes is amended to read:

20 50.035 (4n) (a) For a person for whom a screening for functional eligibility
21 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
22 under this subsection need not include performance of an additional functional
23 screening under s. 46.283 (4) ~~(g)~~ (3) ~~(o)~~.

24 ***-1035/P3.46***SECTION 212. 50.035 (4n) (d) of the statutes is amended to read:

1 50.035 (4n) (d) For a person who seeks admission or is about to be admitted on
2 a private pay basis and who waives the requirement for a financial and cost-sharing
3 screening under s. 46.283 (4) (g) (3) (o), the referral under this subsection may not
4 include performance of a financial and cost-sharing screening under s. 46.283 (4) (g)
5 (3) (o), unless the person is expected to become eligible for medical assistance within
6 6 months.

7 *~~1035/P3.47~~SECTION 213. 50.035 (4p) of the statutes is amended to read:

8 50.035 (4p) APPLICABILITY. Subsection (4m) applies only if the secretary has
9 certified under s. 46.281 (3) that a resource center or other entity is available for the
10 community-based residential facility and for specified groups of eligible individuals
11 that include those persons seeking admission to or the residents of the
12 community-based residential facility.

13 *~~1035/P3.48~~SECTION 214. 50.04 (2g) (a) of the statutes is amended to read:

14 50.04 (2g) (a) Subject to sub. (2i), a nursing home shall, within the time period
15 after inquiry by a prospective resident that is prescribed by the department by rule,
16 inform the prospective resident of the services of a resource center or other entity
17 under s. 46.283, the family care benefit under s. 46.286, and the availability of a
18 functional screening and a financial and cost-sharing screening to determine the
19 prospective resident's eligibility for the family care benefit under s. 46.286 (1).

20 *~~1035/P3.49~~SECTION 215. 50.04 (2h) (a) (intro.) of the statutes is amended
21 to read:

22 50.04 (2h) (a) (intro.) Subject to sub. (2i), a nursing home shall, within the time
23 period prescribed by the department by rule, refer to a resource center or other entity
24 under s. 46.283 a person who is seeking admission, who is at least 65 years of age or

1 has developmental disability or physical disability and whose disability or condition
2 is expected to last at least 90 days, unless any of the following applies:

3 ***-1035/P3.50*SECTION 216.** 50.04 (2h) (a) 1. of the statutes is amended to read:

4 50.04 (2h) (a) 1. For a person for whom a screening for functional eligibility
5 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
6 under this paragraph need not include performance of an additional functional
7 screening under s. 46.283 (4) ~~(g)~~ (3) (o).

8 ***-1035/P3.51*SECTION 217.** 50.04 (2h) (a) 4. of the statutes is amended to read:

9 50.04 (2h) (a) 4. For a person who seeks admission or is about to be admitted
10 on a private pay basis and who waives the requirement for a financial and
11 cost-sharing screening under s. 46.283 (4) ~~(g)~~ (3) (o), the referral under this
12 subsection may not include performance of a financial and cost-sharing screening
13 under s. 46.283 (4) ~~(g)~~ (3) (o), unless the person is expected to become eligible for
14 medical assistance within 6 months.

15 ***-1035/P3.52*SECTION 218.** 50.04 (2i) of the statutes is amended to read:

16 50.04 (2i) APPLICABILITY. Subsections (2g) and (2h) apply only if the secretary
17 has certified under s. 46.281 (3) that a resource center or other entity is available for
18 the nursing home and for specified groups of eligible individuals that include those
19 persons seeking admission to or the residents of the nursing home.

20 ***-1035/P3.53*SECTION 219.** 50.04 (2m) (b) of the statutes is amended to read:

21 50.04 (2m) (b) Paragraph (a) does not apply to those residents for whom the
22 secretary has certified under s. 46.281 (3) that a resource center or other entity is
23 available.

24 ***-1035/P3.54*SECTION 220.** 50.06 (7) of the statutes is amended to read:

1 50.06 (7) An individual who consents to an admission under this section may
2 request that an assessment be conducted for the incapacitated individual under the
3 long-term support community options program under s. 46.27 (6) or, if the secretary
4 has certified under s. 46.281 (3) that a resource center or other entity is available for
5 the individual, a functional screening and a financial and cost-sharing screening to
6 determine eligibility for the family care benefit under s. 46.286 (1). If admission is
7 sought on behalf of the incapacitated individual or if the incapacitated individual is
8 about to be admitted on a private pay basis, the individual who consents to the
9 admission may waive the requirement for a financial and cost-sharing screening
10 under s. 46.283 (4) ~~(g)~~ (3) ~~(o)~~, unless the incapacitated individual is expected to
11 become eligible for medical assistance within 6 months.

12 *~~0972/P5.104~~*SECTION 221. 50.49 (6m) (b) of the statutes is amended to read:

13 50.49 (6m) (b) A program specified in s. 46.2805 ~~(1) (a)~~ (9m).

14 *~~0972/P5.105~~*SECTION 222. 50.49 (6m) (c) of the statutes is amended to read:

15 50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) ~~(b)~~ (4k).

16 *~~0972/P5.106~~*SECTION 223. 51.06 (8) (b) 6. of the statutes is amended to read:

17 51.06 (8) (b) 6. The extent of Medical Assistance provided to relocated or
18 diverted individuals that is in addition to Medical Assistance provided to the
19 individuals under s. 46.27 (11), 46.275, 46.277, or 46.278, ~~as a~~ under the family care
20 ~~benefit under ss. program as defined in s. 46.2805 to 46.2895 (4m)~~, or under any other
21 home-based or community-based program for which the department has received
22 a waiver under 42 USC 1396n (c).

23 *~~1130/P4.48~~*SECTION 224. 51.22 (3) of the statutes is amended to read:

24 51.22 (3) Whenever an admission is made through the department, the
25 department shall determine the need for inpatient care of the individual to be

1 admitted. Unless a state-operated facility is used, the department may only
2 authorize care in an inpatient facility which is operated by or under a purchase of
3 service contract with a county department under s. 51.42 or 51.437 or an inpatient
4 facility which is under a contractual agreement with the department. Except in the
5 case of state treatment facilities, the department shall reimburse the facility for the
6 actual cost of all authorized care and services from the appropriation under s. 20.435
7 ~~(7)~~ (5) (da). For collections made under the authority of s. 46.10 (16), moneys shall
8 be credited or remitted to the department no later than 60 days after the month in
9 which collections are made. Such collections are also subject to s. 46.036 or special
10 agreement. Collections made by the department under ss. 46.03 (18) and 46.10 shall
11 be deposited in the general fund.

12 *~~1130/P4.49~~SECTION 225. 51.42 (1) (b) of the statutes is amended to read:

13 51.42 (1) (b) *County liability.* The county board of supervisors except in
14 Milwaukee County, has the primary responsibility for the well-being, treatment and
15 care of the mentally ill, developmentally disabled, alcoholic and other drug
16 dependent citizens residing within its county and for ensuring that those individuals
17 in need of such emergency services found within its county receive immediate
18 emergency services. In Milwaukee County, the Milwaukee County mental health
19 board has the primary responsibility for the well-being, treatment and care of the
20 mentally ill, alcoholic, and other drug dependent citizens residing within Milwaukee
21 County and for ensuring that those individuals in need of such emergency services
22 found within Milwaukee County receive immediate emergency services. The county
23 board of supervisors of Milwaukee County has the primary responsibility for the
24 well-being, treatment, and care of the developmentally disabled citizens residing
25 within Milwaukee County, except where the responsibility is delegated explicitly

1 under this section to the Milwaukee County mental health board, and for ensuring
2 that developmentally disabled individuals in need of such emergency services found
3 within Milwaukee County receive immediate emergency services. This primary
4 responsibility is limited to the programs, services and resources that the county
5 board of supervisors, or, as applicable, the Milwaukee County mental health board,
6 is reasonably able to provide within the limits of available state and federal funds
7 and of county funds required to be appropriated to match state funds. County
8 liability for care and services purchased through or provided by a county department
9 of community programs established under this section shall be based upon the
10 client's county of residence except for emergency services for which liability shall be
11 placed with the county in which the individual is found. For the purpose of
12 establishing county liability, "emergency services" includes those services provided
13 under the authority of s. 55.05 (4), 2003 stats., or s. 55.06 (11) (a), 2003 stats., or s.
14 51.15, 51.45 (11) (a) or (b) or (12), 55.13, or 55.135 for not more than 72 hours.
15 Nothing in this paragraph prevents recovery of liability under s. 46.10 or any other
16 statute creating liability upon the individual receiving a service or any other
17 designated responsible party, or prevents reimbursement by the department of
18 health services for the actual cost of all care and services from the appropriation
19 under s. 20.435 (7) (5) (da), as provided in s. 51.22 (3).

20 ***-0972/P5.107*SECTION 226.** 51.42 (3) (ar) 17. of the statutes is amended to
21 read:

22 51.42 (3) (ar) 17. If authorized under s. 46.283 (1) (a) ~~1~~, apply to the department
23 of health services to operate a resource center under s. 46.283 and, if the department
24 contracts with the county under s. 46.283 (2), operate the resource center.

1 *-0972/P5.108*SECTION 227. 51.42 (3) (ar) 18. of the statutes is amended to
2 read:

3 51.42 (3) (ar) 18. If authorized under s. 46.284 (1) (a) ~~1.~~, apply to the department
4 of health services to operate a care management organization under s. 46.284 and,
5 if the department contracts with the county under s. 46.284 (2), operate the care
6 management organization and, if appropriate, place funds in a risk reserye.

7 *-0972/P5.109*SECTION ~~228~~ 51.42 (3) (e) of the statutes is amended to read:
8 Autoref ✓ ^{as affected by 2015 Wisconsin Act ... (this act)}

8 51.42 (3) (e) *Exchange of information.* Notwithstanding ss. 46.2895 (9), 48.78
9 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3)
10 (c), and 938.78 (2) (a), any subunit of a county department of community programs
11 or tribal agency acting under this section may exchange confidential information
12 about a client, without the informed consent of the client, with any other subunit of
13 the same county department of community programs or tribal agency, with a
14 resource center, ^{or other contracted entity under s. 46.283(2) ← plain} or a care management organization, or a long-term care district, or
15 with any person providing services to the client under a purchase of services contract
16 with the county department of community programs or tribal agency or with a
17 resource center, ^{or other contracted entity under s. 46.283(2) ←} or care management organization, or long-term care district, if
18 necessary to enable an employee or service provider to perform his or her duties, or
19 to enable the county department of community programs or tribal agency to
20 coordinate the delivery of services to the client. Any agency releasing information
21 under this paragraph shall document that a request was received and what
22 information was provided.

23 *-1035/P3.55*SECTION 229. 51.42 (3) (e) of the statutes is amended to read:

24 51.42 (3) (e) *Exchange of information.* Notwithstanding ss. 46.2895 (9), 48.78
25 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3)

1 (c), and 938.78 (2) (a), any subunit of a county department of community programs
2 or tribal agency acting under this section may exchange confidential information
3 about a client, without the informed consent of the client, with any other subunit of
4 the same county department of community programs or tribal agency, with a
5 resource center or other contracted entity under s. 46.283 (2), a care management
6 organization, or a long-term care district, or with any person providing services to
7 the client under a purchase of services contract with the county department of
8 community programs or tribal agency or with a resource center or other contracted
9 entity under s. 46.283 (2), care management organization, or long-term care district,
10 if necessary to enable an employee or service provider to perform his or her duties,
11 or to enable the county department of community programs or tribal agency to
12 coordinate the delivery of services to the client. Any agency releasing information
13 under this paragraph shall document that a request was received and what
14 information was provided.

15 ***-0972/P5.110*SECTION 230.** 51.437 (4m) (n) of the statutes is amended to
16 read:

17 51.437 (4m) (n) If authorized under s. 46.283 (1) (a) ~~1.~~, apply to the department
18 of health services to operate a resource center under s. 46.283 and, if the department
19 contracts with the county under s. 46.283 (2), operate the resource center.

20 ***-0972/P5.111*SECTION 231.** 51.437 (4m) (p) of the statutes is amended to
21 read:

22 51.437 (4m) (p) If authorized under s. 46.284 (1) (a) ~~1.~~, apply to the department
23 of health services to operate a care management organization under s. 46.284 and,
24 if the department contracts with the county under s. 46.284 (2), operate the care
25 management organization and, if appropriate, place funds in a risk reserve.

SECTION 232

as affected by 2015 Wisconsin Act ... (this act)

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*-0972/P5.112*SECTION 232. 51.437 (4r) (b) of the statutes is amended to read:

2 51.437 (4r) (b) Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83,

3 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a),

4 any subunit of a county department of developmental disabilities services or tribal

5 agency acting under this section may exchange confidential information about a

6 client, without the informed consent of the client, with any other subunit of the same

7 county department of developmental disabilities services or tribal agency, with a

8 resource center, ^{or other contracted entity under s. 46.283 (2) ← plain} or a care management organization, or a long-term care district, or

9 with any person providing services to the client under a purchase of services contract

10 with the county department of developmental disabilities services or tribal agency

11 or with a resource center, ^{or other contracted entity under s. 46.283 (2)} or a care management organization, or a long-term care

12 district, if necessary to enable an employee or service provider to perform his or her

13 duties, or to enable the county department of developmental disabilities services or

14 tribal agency to coordinate the delivery of services to the client. Any agency releasing

15 information under this paragraph shall document that a request was received and

16 what information was provided.

*-1035/P3.56*SECTION 233. 51.437 (4r) (b) of the statutes is amended to read:

18 51.437 (4r) (b) Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83,

19 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a),

20 any subunit of a county department of developmental disabilities services or tribal

21 agency acting under this section may exchange confidential information about a

22 client, without the informed consent of the client, with any other subunit of the same

23 county department of developmental disabilities services or tribal agency, with a

24 resource center or other contracted entity under s. 46.283 (2), a care management

25 organization, or a long-term care district, or with any person providing services to

1 the client under a purchase of services contract with the county department of
2 developmental disabilities services or tribal agency or with a resource center or other
3 contracted entity under s. 46.283 (2), a care management organization, or a
4 long-term care district, if necessary to enable an employee or service provider to
5 perform his or her duties, or to enable the county department of developmental
6 disabilities services or tribal agency to coordinate the delivery of services to the
7 client. Any agency releasing information under this paragraph shall document that
8 a request was received and what information was provided.

9 *Autoref X* ***-0972/P5.113*SECTION 234.** ^{as affected by 2015 Wisconsin Act ... (this act)} 66.0301 (1) (a) of the statutes ^{is} amended to read:

10 66.0301 (1) (a) Except as provided in pars. (b) and (c), in this section
11 "municipality" means the state or any department or agency thereof, or any city,
12 village, town, county, school district, public library system, public inland lake
13 protection and rehabilitation district, sanitary district, farm drainage district,
14 metropolitan sewerage district, sewer utility district, solid waste management
15 system created under s. 59.70 (2), local exposition district created under subch. II of
16 ch. 229, local professional baseball park district created under subch. III of ch. 229,
17 local professional football stadium district created under subch. IV of ch. 229, local
18 cultural arts district created under subch. V of ch. 229, ^{long-term care district under}
19 ~~s. 46.2895~~, water utility district, mosquito control district, municipal electric
20 company, county or city transit commission, commission created by contract under
21 this section, taxation district, regional planning commission, housing authority
22 created under s. 66.1201, redevelopment authority created under s. 66.1333,
23 community development authority created under s. 66.1335, or city-county health
24 department. ^{local sports and entertainment district created}
^{under subch. VI of ch. 229; ← plain}

Insert
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Autoref V ***-0972/P5.114*SECTION 235.** 66.0506 (1) of the statutes ^{is} amended to read:
^{as affected by 2015 Wisconsin Act ... (this act)}

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the University of Wisconsin System Authority

1 66.0506 (1) In this section, "local governmental unit" means any city, village,
2 town, county, metropolitan sewerage district, ~~long-term care district~~, local cultural
3 arts district under subch. V of ch. 229, or any other political subdivision of the state,
4 or instrumentality of one or more political subdivisions of the state.

Insert
38-5

5 ***-0972/P5.115*SECTION 236.** 66.0601 (1) (b) of the statutes is amended to read:

6 66.0601 (1) (b) *Payments for abortions restricted.* No city, village, town,
7 ~~long-term care district~~ under s. 46.2895 or agency or subdivision of a city, village or
8 town may authorize funds for or pay to a physician or surgeon or a hospital, clinic
9 or other medical facility for the performance of an abortion except those permitted
10 under and which are performed in accordance with s. 20.927.

11 ***-0972/P5.116*SECTION 237.** 66.0601 (1) (c) of the statutes is amended to read:

12 66.0601 (1) (c) *Payments for abortion-related activity restricted.* No city,
13 village, town, ~~long-term care district~~ under s. 46.2895 or agency or subdivision of a
14 city, village or town may authorize payment of funds for a grant, subsidy or other
15 funding involving a pregnancy program, project or service if s. 20.9275 (2) applies to
16 the pregnancy program, project or service.

17 ***-0972/P5.117*SECTION 238.** 69.30 (1) (bd) of the statutes is repealed.

18 ***-0972/P5.118*SECTION 239.** 69.30 (2) of the statutes is amended to read:

19 69.30 (2) A financial institution, state agency, county department, Wisconsin
20 works agency, or service office ~~or long-term care district~~ or an employee of a financial
21 institution, state agency, county department, Wisconsin works agency, or service
22 office ~~or long-term care district~~ is not subject to s. 69.24 (1) (a) for copying a certified
23 copy of a vital record for use by the financial institution, state agency, county
24 department, Wisconsin works agency, or service office ~~or long-term care district~~,

1 including use under s. 45.04 (5), if the copy is marked "FOR ADMINISTRATIVE
2 USE".

3 ***-0972/P5.119*SECTION 240.** 70.11 (2) of the statutes is amended to read:

4 70.11 (2) MUNICIPAL PROPERTY AND PROPERTY OF CERTAIN DISTRICTS, EXCEPTION.
5 Property owned by any county, city, village, town, school district, technical college
6 district, public inland lake protection and rehabilitation district, metropolitan
7 sewerage district, municipal water district created under s. 198.22, joint local water
8 authority created under s. 66.0823, ~~long-term care district under s. 46.2895~~ or town
9 sanitary district; lands belonging to cities of any other state used for public parks;
10 land tax-deeded to any county or city before January 2; but any residence located
11 upon property owned by the county for park purposes that is rented out by the county
12 for a nonpark purpose shall not be exempt from taxation. Except as to land acquired
13 under s. 59.84 (2) (d), this exemption shall not apply to land conveyed after
14 August 17, 1961, to any such governmental unit or for its benefit while the grantor
15 or others for his or her benefit are permitted to occupy the land or part thereof in
16 consideration for the conveyance. Leasing the property exempt under this
17 subsection, regardless of the lessee and the use of the leasehold income, does not
18 render that property taxable.

19 ***-0972/P5.120*SECTION 241.** 71.26 (1) (b) of the statutes is amended to read:

20 71.26 (1) (b) *Political units.* Income received by the United States, the state
21 and all counties, cities, villages, towns, school districts, technical college districts,
22 joint local water authorities created under s. 66.0823, ~~long-term care districts under~~
23 ~~s. 46.2895~~ or other political units of this state.

24 ***-0972/P5.121*SECTION 242.** 101.01 (4) of the statutes is amended to read:

SECTION 242

1 101.01 (4) “Employer” means any person, firm, corporation, state, county,
 2 town, city, village, school district, sewer district, drainage district, ~~long-term care~~
 3 ~~district~~ and other public or quasi-public corporations as well as any agent, manager,
 4 representative or other person having control or custody of any employment, place
 5 of employment or of any employee.

6 *~~0972/P5.122~~*SECTION 243. 102.01 (2) (d) of the statutes is amended to read:

7 102.01 (2) (d) “Municipality” includes a county, city, town, village, school
 8 district, sewer district, drainage district and ~~long-term care district~~ and other public
 9 or quasi-public corporations.

10 *~~0972/P5.123~~*SECTION 244. 102.04 (1) (a) of the statutes is amended to read:

11 102.04 (1) (a) The state, each county, city, town, village, school district, sewer
 12 district, drainage district, ~~long-term care district~~ and other public or quasi-public
 13 corporations therein.

14 *~~0972/P5.124~~*SECTION 245. 103.001 (6) of the statutes is amended to read:

15 103.001 (6) “Employer” means any person, firm, corporation, state, county,
 16 town, city, village, school district, sewer district, drainage district, ~~long-term care~~
 17 ~~district~~ and other public or quasi-public corporations as well as any agent, manager,
 18 representative or other person having control or custody of any employment, place
 19 of employment or of any employee.

*as affected by 2015 Wisconsin Act
(this act);*

20 *~~0972/P5.125~~*SECTION ~~246~~. 111.70 (1) (j) of the statutes is amended to read:

21 111.70 (1) (j) “Municipal employer” means any city, county, village, town,
 22 metropolitan sewerage district, school district, ~~long-term care district~~, local cultural
 23 arts district created under subch. V of ch. 229, or any other political subdivision of
 24 the state, or instrumentality of one or more political subdivisions of the state, that

the University of Wisconsin System Authority;

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1 engages the services of an employee and includes any person acting on behalf of a
2 municipal employer within the scope of the person’s authority, express or implied.

3 *-0972/P5.126*SECTION 247. 600.01 (1) (b) 10. of the statutes is repealed.

4 *-0972/P5.127*SECTION 248. 600.01 (3) of the statutes is created to read:

5 600.01 (3) CARE MANAGEMENT ORGANIZATIONS. A care management organization
6 as defined in s. 46.2805 (1) (dm) is considered an insurer for purposes of chs. 600 to
7 646.

8 *-0972/P5.128*SECTION 249. 601.41 (12) of the statutes is created to read:

9 601.41 (12) CARE MANAGEMENT ORGANIZATIONS. The commissioner may apply
10 the provisions of chs. 600 to 646 to a care management organization, as defined in
11 s. 46.2805 (1) (dm). The commissioner may promulgate rules to license care
12 management organizations, as defined in s. 46.2805 (1) (dm), as insurers and to
13 otherwise regulate care management organizations.

14 *-0972/P5.129*SECTION 250. 632.745 (6) (a) 2m. of the statutes is repealed.

15 *-0972/P5.130*SECTION 251. Chapter 648 of the statutes, as affected by 2015
16 Wisconsin Act (this act), is repealed.

17 *-0972/P5.131*SECTION 252. 648.03 of the statutes is amended to read:

18 **648.03 Applicability of other laws.** Notwithstanding s. 600.01 (1) (b) 10. a.,
19 ss. Sections 600.01, 600.02, 600.03, and 600.12 apply to this chapter.

20 *-0972/P5.132*SECTION 253. 985.01 (1g) of the statutes is amended to read:

21 985.01 (1g) “Governing body” has the meaning given in s. 345.05 (1) (b) and
22 includes a long-term care district board under s. 46.2895.

23 *-0972/P5.133*SECTION 254. 985.01 (3) of the statutes is amended to read:

24 985.01 (3) “Municipality” has the meaning in s. 345.05 (1) (c) and includes a
25 long-term care district under s. 46.2895.

1 ***-0972/P5.9118***SECTION **9118. Nonstatutory provisions; Health**
2 **Services.**

3 ***-0972/P5.9118***(1) CHANGES TO FAMILY CARE PROGRAM.

4 ***-0972/P5.9118***(a) *Definitions.* In this subsection:

5 ***-0972/P5.9118***1. “Department” means the department of health services.

6 ***-0972/P5.9118***2. “Family Care Partnership Program” means an integrated
7 health and long-term care program operated under an amendment to the state
8 Medical Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 4396n
9 (c).

10 ***-0972/P5.9118***3. “Family care program” means the program under sections
11 46.2805 to 46.2895 of the statutes that provides the family care benefit as defined in
12 section 46.2805 (4) of the statutes.

13 ***-0972/P5.9118***4. “Program of all-inclusive care for the elderly” means an
14 integrated health and long-term care program operated under 42 USC 1395eee or
15 1396u-4.

16 ***-0972/P5.9118***(b) *Waiver request; generally.* The department shall request
17 any approval from and shall submit any amendments or waiver requests to the
18 federal department of health and human services that are necessary to implement
19 changes to the family care program, the program of all-inclusive care for the elderly,
20 or the Family Care Partnership Program, including all of the following:

21 ***-0972/P5.9118***1. Administration by care management organizations of the
22 family care program statewide instead of by geographic region, unless the
23 department allows the care management organization a waiver to administer the
24 family care benefit in a specific geographic region.

1 ***-0972/P5.9118***2. Addition of any primary and acute health care services
2 selected by the department as a benefit under the family care program.

3 ***-0972/P5.9118***3. Selection under section 46.284 (2) (bm) of the statutes as
4 a care management organization of any applicant that the department certifies
5 meets the qualifications instead of using the competitive procurement process.

6 ***-0972/P5.9118***4. Requirement under section 46.286 (3g) of the statutes that
7 an enrollee change care management organizations only during an open enrollment
8 period specified by the department.

9 ***-0972/P5.9118***5. Prevention of the creation of new long-term care districts
10 and dissolution of existing long-term care districts under section 46.2895 of the
11 statutes.

12 ***-0972/P5.9118***6. Elimination of the insurance requirements for care
13 management organizations under chapter 648 of the statutes.

14 ***-0972/P5.9118***(c) *Family care in all counties.* The department shall request
15 any approval or submit any waiver request necessary to the federal department of
16 health and human services to administer the family care program in every county
17 in the state. If the federal department of health and human services does not
18 disapprove the request, the department shall ensure that the family care program
19 is available to eligible residents of every county in the state by January 1, 2017, or
20 by a date specified by the department, whichever is later. If the department specifies
21 a later date than January 1, 2017, it shall submit a notice of that date to the
22 legislative reference bureau for publication in the Wisconsin Administrative
23 Register.

24 ***-0972/P5.9118***(d) *Waiver request not approved; saving provision.* If the
25 federal department of health and human services does not approve of any request or

1 submission of waiver request under paragraph (b) or (c) the department may
2 administer that portion of the family care program under the applicable provision
3 of sections 46.2805 to 46.2895, 2013 stats.

4 ***-0972/P5.9118*(e)** *Other long-term care programs discontinued.* If the
5 federal department of health and human services does not disapprove the request
6 to administer the family care program in every county in the state, the department
7 may elect to discontinue enrollment of participants in or administration of any of the
8 programs under sections 46.271, 46.275, 46.277, 46.278, or 46.2785 of the statutes
9 at any time determined by the department that is after the date that the family care
10 program is available to eligible residents of every county in the state under
11 paragraph (c).

12 ***-1130/P4.9118*(2)** MERGER OF DIVISIONS INTO MEDICAID SERVICES DIVISION.
13 Before March 31, 2016, the department of health services shall submit to the state
14 budget office in the department of administration a report of the final organization
15 of the merger of the division of the department of health services relating to
16 long-term care and the division of the department of health services relating to
17 health care access and accountability into a single division of the department of
18 health services relating to Medicaid services.

19 ***-1130/P4.9218*SECTION 9218. Fiscal changes; Health Services.**

20 ***-1130/P4.9218*(1)** MERGER OF DIVISIONS INTO MEDICAID SERVICES DIVISION.

21 ***-1130/P4.9218*(a)** The unencumbered balances of the appropriations to the
22 department of health services under section 20.435 (7) (g) and (hc) of the statutes,
23 as affected by this act, are transferred to the appropriation account under section
24 20.435 (4) (h) of the statutes, as affected by this act, on the effective date of this
25 paragraph.

1 *–1130/P4.9218*(b) The unencumbered balances of the appropriations to the
2 department of health services under section 20.435 (7) (gc) and (h) of the statutes,
3 as affected by this act, are transferred to the appropriation account under section
4 20.435 (4) (hp) of the statutes, as affected by this act, on the effective date of this
5 paragraph.

6 *–1130/P4.9218*(c) The unencumbered balance of the appropriation to the
7 department of health services under section 20.435 (7) (gm) of the statutes, as
8 affected by this act, is transferred to the appropriation account under section 20.435
9 (4) (iL) of the statutes, as affected by this act, on the effective date of this paragraph.

10 *–1130/P4.9218*(d) The unencumbered balance of the appropriation to the
11 department of health services under section 20.435 (7) (hs) of the statutes, as affected
12 by this act, is transferred to the appropriation account under section 20.435 (4) (hs)
13 of the statutes, as affected by this act, on the effective date of this paragraph.

14 *–1130/P4.9218*(e) The unencumbered balance of the appropriation to the
15 department of health services under section 20.435 (7) (i) of the statutes, as affected
16 by this act, is transferred to the appropriation account under section 20.435 (4) (i) of
17 the statutes, as affected by this act, on the effective date of this paragraph.

18 *–1130/P4.9218*(f) The unencumbered balance of the appropriation to the
19 department of health services under section 20.435 (7) (im) of the statutes, as
20 affected by this act, is transferred to the appropriation account under section 20.435
21 (4) (im) of the statutes, as affected by this act, on the effective date of this paragraph.

22 *–1130/P4.9218*(g) The unencumbered balance of the appropriation to the
23 department of health services under section 20.435 (7) (jb) of the statutes, as affected
24 by this act, is transferred to the appropriation account under section 20.435 (4) (jc)
25 of the statutes, as affected by this act, on the effective date of this paragraph.

1 *-1130/P4.9218*(h) The unencumbered balance of the appropriation to the
2 department of health services under section 20.435 (7) (kx) of the statutes, as affected
3 by this act, is transferred to the appropriation account under section 20.435 (4) (kx)
4 of the statutes, as affected by this act, on the effective date of this paragraph.

5 *-1130/P4.9218*(i) The unencumbered balance of the appropriations to the
6 department of health services under section 20.435 (7) (m) and (mc) of the statutes,
7 as affected by this act, are transferred to the appropriation account under section
8 20.435 (4) (m) of the statutes, as affected by this act, on the effective date of this
9 paragraph.

10 *-1130/P4.9218*(j) The unencumbered balance of the appropriation to the
11 department of health services under section 20.435 (7) (n) of the statutes, as affected
12 by this act, is transferred to the appropriation account under section 20.435 (4) (n)
13 of the statutes, as affected by this act, on the effective date of this paragraph.

****NOTE: Under section 20.002 (3m), an amount encumbered before the repeal of
an appropriation is still paid from the appropriation that will be repealed. I believe it is
necessary to transfer the balances of the program revenue appropriations as I have done
in this fiscal change nonstatutory provision.

14 *-0972/P5.9418*SECTION 9418. Effective dates; Health Services.

15 *-0972/P5.9418*(1) FAMILY CARE CHANGES; LONG-TERM CARE DISTRICTS;

16 INSURANCE REGULATION. The treatment of sections 13.94 (4) (a) 1, and (b), 17.15 (5),

17 17.27 (3m), 19.82 (1), 20.145 (1) (g) (intro.) and 3., 20.435 (4) (jt) and (kv), 20.927 (1m),

18 20.9275 (1) (b), 25.50 (1) (d), 40.02 (28) and (36), 46.21 (2m) (c), 46.215 (1m) and (1p),

19 46.22 (1) (dm) and (dp), 46.23 (3) (e) and (ed), 46.27 (7) (fr) 3. c., 46.2805 (intro.), (7r),

20 and (7u), 46.281 (1d), 46.283 (2) (intro.) and (b) and (7) (b), 46.284 (2) (bm) (by SECTION

21 152), (5) (d) 4., and (7) (b), 46.285 (intro.), (1), and (2), 48.47 (7g), 51.42 (3) (e), 51.437

22 (4r) (b), 66.0301 (1) (a), 66.0506 (1), 66.0601 (1) (b) and (c), 69.30 (1) (bd) and (2), 70.11

23 (2), 71.26 (1) (b), 101.01 (4), 102.01 (2) (d), 102.04 (1) (a), 103.001 (6), 111.70 (1) (j),

Handwritten notes on the right side of the page:
- autoref W (with arrow pointing to SECTION 53)
- CS (circled)
- autoref D (with arrow pointing to SECTION 63)
- CS (circled)
- autoref I (with arrow pointing to SECTION 146)
- CS (circled)
- autoref J (with arrow pointing to SECTION 228)
- CS (circled)

Handwritten circled numbers on the left side of the page:
14, 15, 16, 17, 18, 19, 20, 21, 22, 23

(by SECTION 232) autoref K (CS)

(by SECTION 246) autoref L (CS)

1 632.745 (6) (a) 2m., and 985.01 (1g) and (3) of the statutes, the repeal of sections
2 46.284 (3m) and 46.2895 and chapter 648 of the statutes, and the amendment of
3 section 46.2805 (4m) of the statutes take effect on July 1, 2018. (by SECTION 14)

4 *-1255/P2.9418*(2) CHANGES TO COMMUNITY OPTIONS PROGRAM; CHILDREN'S
5 COMMUNITY OPTIONS PROGRAM. The treatment of sections 20.435 (4) (b) and (7) (bd)
6 46.27 (13), 46.272, 46.2803 (2), 46.40 (1) (a), (7), and (14m), 46.45 (3) (a) and (c) and
7 (6) (a) and (b), 46.56 (3) (a) 4. and (10), 46.985, and 49.45 (6v) of the statutes takes
8 effect on January 1, 2016. and

9 (END)

CS
autoref A
autoref B
SECTION 14
SECTION 37

5
6
7

The repeal of section ✓

D-note

**2015-2016 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-1461/P1ins
TJD:.....

1 **INSERT 2-25**

 ***NOTE: This is reconciled s. 13.94 (4) (a) 1. This SECTION has been affected by drafts with the following LRB numbers: -0971/P4, -1215/P2, and -1461/P1. ✓

2 **END INSERT 2-25**

3 **INSERT 20-18**

 ***NOTE: This is reconciled s. 20.927 (1m). This SECTION has been affected by drafts with the following LRB numbers: -0971/P4 and -1461/P1. ✓

4 **END INSERT 20-18**

5 **INSERT 21-15**

 ***NOTE: This is reconciled s. 25.50 (1) (d). This SECTION has been affected by drafts with the following LRB numbers: -0971/P4, -1215/P2, and -1461/P1. ✓

6 **END INSERT 21-15**

7 **INSERT 57-17**

8 46.283 (2) RESOURCE CENTER CONTRACT; CONTRACT FOR CERTAIN FUNCTIONS. The
9 department may contract to operate a resource center with counties, ~~long-term care~~
10 ~~districts~~, or the governing body of a tribe or band or the Great Lakes Inter-Tribal
11 Council, Inc., under a joint application of any of these, or with a private entity or
12 nonprofit organization if the department determines that the organization has no
13 significant connection to an entity that operates a care management organization.
14 The department may contract with an entity other than a resource center to perform
15 certain functions of a resource center.

16 **END INSERT 57-17**

17 **INSERT 87-25**

 ***NOTE: This is reconciled s. 66.0301 (1) (a). This SECTION has been affected by drafts with the following LRB numbers: -1461/P1 and -1502/2. ✓

18 **END INSERT 87-25**

19 **INSERT 88-5**



***NOTE: This is reconciled s. 66.0506 (1). This SECTION has been affected by drafts with the following LRB numbers: -0971/P4 and -1461/P1.

1 **END INSERT 88-5**

2 **INSERT 91-3**

***NOTE: This is reconciled s. 111.70 (1) (j). This SECTION has been affected by drafts with the following LRB numbers: -0971/P4 and -1461/P1.

3 **END INSERT 91-3**

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-1461/P1dn

TJD: A:...

JLD

Date

This draft reconciles LRB-0596/P2, LRB-0971/P4, LRB-1215/P2, and LRB-1502/2.
All of these drafts should continue to appear in the compiled bill.

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

LRB-1461/P1dn
TJD:jld:jm

January 29, 2015

This draft reconciles LRB-0596/P2, LRB-0971/P4, LRB-1215/P2, and LRB-1502/2.
All of these drafts should continue to appear in the compiled bill.

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Dodge, Tamara

From: Steinmetz, Jana D - DOA <Jana.Steinmetz@wisconsin.gov>
Sent: Thursday, January 29, 2015 8:59 AM
To: Dodge, Tamara
Cc: Dombrowski, Cynthia A - DOA
Subject: Draft 972/4

Hi Tami,

Here are comments from OCI related to this draft. Can you give us a call to discuss?

Thanks,
Jana

Delay repeal to 7/1/18

- 1.) In Section 126 of the bill 600.01 (1)(b) 10. Is repealed immediately. This repeal should take effect on the effective date in Section 9418 otherwise ch. 600 to 646 will apply to the current non-insurer CMOs. Same applies for Section 128.
- 2.) The effective date of the non statutory provisions in section 9118 does not synch up with the effective date in Section 9418. As written some of the changes, such as the switch to insurers, could happen as soon as Jan. 1, 2017 while many of the changes to accomplish this do not take effect until July 1, 2018. In the alternative, there needs to be a set date where current requirements expire and new requirement take affect that give sufficient lead time.
- 3.) Section 600.03(25)(a)(5) should be created to reference CMOs. If this change is made, Section 127 of the bill could be deleted. *Delete §127; create 600.03(25)(a)5.*
- 4.) Section 46.28⁴(2)(d) should be repealed on the effective date in Section 9418. This section precludes an insurer from recouping overpayments to providers.

7/1/18

DHS? Yes - repeal 46.284(2)(d) on 7/1/18