

1 **SECTION 88.** 46.2805 (1) (dm) of the statutes is created to read:

2 46.2805 (1) (dm) Beginning on January 1, 2017, or the date specified in 2015
3 Wisconsin Act (this act), section 9118 (1), whichever is later, an insurer that is
4 licensed and in compliance with the applicable provisions of chs. 600 to 646, that is
5 certified as meeting the requirements for a care management organization under s.
6 46.284 (3), and that has a contract under s. 46.284 (2).

7 **SECTION 89.** 46.2805 (4) of the statutes is amended to read:

8 46.2805 (4) “Family care benefit” means financial assistance for long-term
9 care and support items for an enrollee and any financial assistance, as specified by
10 the department, for primary and acute health care services under s. 49.46 (2) for an
11 enrollee.

12 **SECTION 90.** 46.2805 (4k) of the statutes is created to read:

13 46.2805 (4k) “Family Care Partnership Program” means an integrated health
14 and long-term care program operated under an amendment to the state Medical
15 Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 1396n (c).

16 **SECTION 91.** 46.2805 (4m) of the statutes is created to read:

17 46.2805 (4m) “Family care program” means the program under s. 46.2805 to
18 46.2895 that provides the family care benefit.

19 **SECTION 92.** 46.2805 (4m) of the statutes, as created by 2015 Wisconsin Act
20 (this act), is amended to read:

21 46.2805 (4m) “Family care program” means the program under s. 46.2805 to
22 ~~46.2895~~ 46.288 that provides the family care benefit.

23 **SECTION 93.** 46.2805 (7r) of the statutes is repealed.

24 **SECTION 94.** 46.2805 (7u) of the statutes is repealed.

25 **SECTION 95.** 46.2805 (9m) of the statutes is created to read:

1 46.2805 (9m) “Program of all-inclusive care for the elderly” means an
2 integrated health and long-term care program operated under 42 USC 1395eee or
3 1396u-4.

4 **SECTION 96.** 46.2805 (10) of the statutes is amended to read:

5 46.2805 (10) “Resource center” means an entity that meets the standards for
6 operation under s. 46.283 (3) or, if under contract to provide a portion of the services
7 specified under s. 46.283 (3), meets the standards for operation with respect to those
8 services, and fulfills the duties under s. 46.283 (4).

9 **SECTION 97.** 46.2805 (10m) of the statutes is amended to read:

10 46.2805 (10m) “Self-directed services option” means the option in the family
11 care program that is operated under a waiver from the secretary of the federal
12 department of health and human services under 42 USC 1396n (c) in which an
13 enrolled individual selects his or her own services and service providers.

14 **SECTION 98.** 46.281 (1d) of the statutes is amended to read:

15 46.281 (1d) WAIVER REQUEST. The department shall request from the secretary
16 of the federal department of health and human services any waivers of federal
17 medicaid laws necessary to permit the use of federal moneys to provide the family
18 care benefit to recipients of medical assistance. The department shall implement
19 any waiver that is approved and that is consistent with ss. 46.2805 to ~~46.2895~~ 46.288.
20 Regardless of whether a waiver is approved, the department may implement
21 operation of resource centers, care management organizations, and the family care
22 benefit.

23 **SECTION 99.** 46.281 (1g) (a) of the statutes is renumbered 46.281 (1g) and
24 amended to read:

1 46.281 (1g) CONTRACTING FOR RESOURCE CENTERS AND CARE MANAGEMENT
2 ORGANIZATIONS. ~~Subject to par. (b), the~~ The department may contract with entities or
3 resource centers as provided under s. 46.283 (2) to provide any of the services under
4 s. 46.283 (3) and (4) ~~as resource centers~~ in any geographic area in the state, and may
5 contract with entities as provided under s. 46.284 (2) to administer the family care
6 benefit as care management organizations ~~in any geographic area in the state.~~

7 **SECTION 100.** 46.281 (1g) (b) of the statutes is repealed.

8 **SECTION 101.** 46.281 (1n) (b) 3. of the statutes is amended to read:

9 46.281 (1n) (b) 3. Conduct ongoing evaluations of managed care programs for
10 provision of long-term care services that are funded by medical assistance, as
11 defined in s. 46.278 (1m) (b), as to client access to services, the availability of client
12 choice of living and service options, quality of care, and cost-effectiveness. In
13 evaluating the availability of client choice, the department shall evaluate the
14 ~~opportunity for a client to arrange for, manage, and monitor his or her family care~~
15 ~~benefit directly or with assistance,~~ self-directed services option as specified in s.
16 46.284 (4) (e).

17 **SECTION 102.** 46.281 (1n) (b) 4. of the statutes is amended to read:

18 46.281 (1n) (b) 4. Require that quality assurance and quality improvement
19 efforts be included throughout the ~~long-term care system specified in ss. 46.2805 to~~
20 ~~46.2895~~ family care program.

21 **SECTION 103.** 46.281 (1n) (d) of the statutes is repealed.

22 **SECTION 104.** 46.281 (1n) (e) of the statutes is amended to read:

23 46.281 (1n) (e) Contract with a person to provide the advocacy services
24 described under s. 16.009 (2) (p) 1. to 5. to actual or potential recipients of the family
25 care benefit who are under age 60 or to their families or guardians. The department

1 may not contract under this paragraph with a county or with a person who has a
2 contract with the department to provide services under s. 46.283 (3) ~~and (4)~~ as a
3 resource center or other entity or to administer the family care benefit as a care
4 management organization. The contract under this paragraph shall include as a
5 goal that the provider of advocacy services provide one advocate for every 2,500
6 individuals under age 60 who receive the family care benefit or who participates in
7 the self-directed services option.

8 **SECTION 105.** 46.281 (3) of the statutes is amended to read:

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

19 **SECTION 106.** 46.281 (4) (c) of the statutes is amended to read:

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

1 aids distribution was reduced, in calendar year 2006 to fund the family care program
2 under ss. ~~46.2805 to 46.2895~~.

3 **SECTION 107.** 46.281 (4) (d) of the statutes is amended to read:

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

6 **SECTION 108.** 46.2825 of the statutes is repealed.

7 **SECTION 109.** 46.283 (title) of the statutes is amended to read:

8 **46.283 (title) Resource centers; resource functions.**

9 **SECTION 110.** 46.283 (1) (a) (intro.) and 1. of the statutes are consolidated,
10 renumbered 46.283 (1) (a) and amended to read:

11 46.283 (1) (a) A county board of supervisors and, in a county with a county
12 executive or a county administrator, the county executive or county administrator,
13 may decide all of the following: 1. ~~Whether~~ whether to authorize one or more county
14 departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
15 (1) (a) 1., 2., or 3. to apply to the department for a contract to operate a resource center
16 and, if so, which to authorize and what client group to serve.

17 **SECTION 111.** 46.283 (1) (a) 2. of the statutes is repealed.

18 **SECTION 112.** 46.283 (2) (intro.) of the statutes is renumbered 46.283 (2) and
19 amended to read:

20 46.283 (2) ~~EXCLUSIVE~~ RESOURCE CENTER CONTRACT; CONTRACT FOR CERTAIN
21 FUNCTIONS. The department may contract to operate a resource center with counties,
22 long-term care districts, or the governing body of a tribe or band or the Great Lakes
23 Inter-Tribal Council, Inc., under a joint application of any of these, or with a private
24 entity or nonprofit organization if the department determines that the organization
25 has no significant connection to an entity that operates a care management

1 organization and if any of the following applies: The department may contract with
2 an entity other than a resource center to perform certain functions of a resource
3 center.

4 **SECTION 113.** 46.283 (2) of the statutes, as affected by 2015 Wisconsin Act
5 (this act), is amended to read:

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

14 **SECTION 114.** 46.283 (2) (a) of the statutes is repealed.

15 **SECTION 115.** 46.283 (2) (b) of the statutes is repealed.

16 **SECTION 116.** 46.283 (3) (title) of the statutes is repealed and recreated to read:

17 46.283 (3) (title) RESOURCE FUNCTION DUTIES.

18 **SECTION 117.** 46.283 (3) (intro.) of the statutes is amended to read:

19 46.283 (3) (intro.) The department ~~shall assure that at least all~~ may in a
20 contract with a resource center or other entity specify that the resource center or
21 other entity provide any of the following are available to a person who contacts a
22 resource center for service services or functions:

23 **SECTION 118.** 46.283 (3) (e) of the statutes is amended to read:

1 46.283 (3) (e) A determination of financial eligibility and of the maximum
2 amount of cost sharing required for a person who is seeking long-term care services
3 or the family care benefit, under standards prescribed by the department.

4 **SECTION 119.** 46.283 (4) (title) of the statutes is amended to read:

5 46.283 (4) (title) DUTIES; RESOURCE CENTERS.

6 **SECTION 120.** 46.283 (4) (a) of the statutes is renumbered 46.283 (3) (L) and
7 amended to read:

8 46.283 (3) (L) Provide Provision of services statewide or within the entire
9 geographic area prescribed for the resource center or other entity by the department
10 as specified in the contract.

11 **SECTION 121.** 46.283 (4) (e) of the statutes is renumbered 46.283 (3) (m) and
12 amended to read:

13 46.283 (3) (m) ~~Provide information~~ Information about the services of the
14 resource center or other entity, including the services specified in sub. (3) (d), about
15 assessments under s. 46.284 (4) (b) and care plans under s. 46.284 (4) (c), and about
16 the family care benefit and the self-directed services option to all older persons and
17 adults with a physical or developmental disability who are residents of nursing
18 homes, community-based residential facilities, adult family homes, and residential
19 care apartment complexes in the area of the resource center or other entity when the
20 benefit under s. 46.286 first becomes available in the county where the nursing home,
21 community-based residential facility, adult family home, or residential care
22 apartment complex is located.

23 **SECTION 122.** 46.283 (4) (f) of the statutes is renumbered 46.283 (3) (n) and
24 amended to read:

1 46.283 (3) (n) ~~Perform~~ Performance of a functional screening and a financial
2 and cost-sharing screening for any resident, as specified in par. (e) ~~(m)~~, who requests
3 a screening and assist any resident who is eligible and chooses to enroll in a care
4 management organization ~~or the self-directed services option~~ to do so.

5 **SECTION 123.** 46.283 (4) (g) of the statutes is renumbered 46.283 (3) (o) and
6 amended to read:

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

21 **SECTION 124.** 46.283 (4) (j) of the statutes is repealed.

22 **SECTION 125.** 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
25 with organizations ~~that meet standards under sub. (3)~~ for performance of the duties

1 under sub. (4) (3) and shall distribute funds for services provided by resource centers
2 and other entities.

3 SECTION 126. 46.283 (6) of the statutes is repealed.

4 SECTION 127. 46.283 (7) (intro.) of the statutes is amended to read:

5 46.283 (7) (intro.) No record, as defined in s. 19.32 (2), of a resource center or
6 other contracted entity under s. 46.283 (2) that contains personally identifiable
7 information, as defined in s. 19.62 (5), concerning an individual who receives services
8 from the resource center may be disclosed by the resource center without the
9 individual's informed consent, except as follows:

10 SECTION 128. 46.283 (7) (a) of the statutes is amended to read:

11 46.283 (7) (a) A resource center or other contracted entity under sub. (2) may
12 provide information as required to comply with s. 16.009 (2) (p) or 49.45 (4) or as
13 necessary for the department to administer the family care program ~~under ss.~~
14 ~~46.2805 to 46.2895.~~

15 SECTION 129. 46.283 (7) (b) of the statutes is amended to read:

16 46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
17 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center
18 or other contracted entity under sub. (2) acting under this section may exchange
19 confidential information about a client, as defined in s. 46.287 (1), without the
20 informed consent of the client, under s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm),
21 46.23 (3) (e), 46.284 (7), 46.2895 (10), 51.42 (3) (e) or 51.437 (4r) (b) in the ~~county~~
22 operating area of the resource center or other entity, if necessary to enable the
23 resource center or other entity to perform its duties or to coordinate the delivery of
24 services to the client.

1 **SECTION 130.** 46.283 (7) (b) of the statutes, as affected by 2015 Wisconsin Act
2 ... (this act), is amended to read:

3 46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
4 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center
5 or other contracted entity under sub. (2) acting under this section may exchange
6 confidential information about a client, as defined in s. 46.287 (1), without the
7 informed consent of the client, under s. 46.21 (2m) (c), 46.215 (1m), 46.22 (1) (dm),
8 46.23 (3) (e), 46.284 (7), ~~46.2895 (10)~~, 51.42 (3) (e) or 51.437 (4r) (b) in the operating
9 area of the resource center or other entity, if necessary to enable the resource center
10 or other entity to perform its duties or to coordinate the delivery of services to the
11 client.

12 **SECTION 131.** 46.284 (1) (a) (intro.) and 1. of the statutes are consolidated,
13 renumbered 46.284 (1) (a) and amended to read:

14 46.284 (1) (a) A county board of supervisors and, in a county with a county
15 executive or a county administrator, the county executive or county administrator,
16 may decide all of the following: 1. ~~Whether~~ whether to authorize one or more county
17 departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
18 (1) (a) 1. or 2. to apply to the department for a contract to operate a care management
19 organization and, if so, which to authorize and what client group to serve.

20 **SECTION 132.** 46.284 (1) (a) 2. of the statutes is repealed.

21 **SECTION 133.** 46.284 (2) (a) of the statutes is amended to read:

22 46.284 (2) (a) The department may contract for operation of a care
23 management organization only with an entity that is certified by the department as
24 meeting the requirements under sub. (3). No entity may operate as a care

1 management organization under the requirements of this section unless so certified
2 and under contract with the department.

3 **SECTION 134.** 46.284 (2) (bm) of the statutes is amended to read:

4 46.284 (2) (bm) The department may contract with counties, long-term care
5 districts, the governing body of a tribe or band or the Great Lakes inter-tribal
6 council, inc., or under a joint application of any of these, or with a private
7 organization that has no significant connection to an entity that operates a resource
8 center. ~~Proposals for contracts under this subdivision shall be solicited under a~~
9 ~~competitive sealed proposal process under s. 16.75 (2m) and the department shall~~
10 ~~evaluate the proposals primarily as to the quality of care that is proposed to be~~
11 ~~provided, certify those~~ The department may contract with any applicants that meet
12 it certifies as meeting the requirements specified in sub. (3) (a), ~~select certified~~
13 ~~applicants for contract and contract with the selected applicants. The department~~
14 is not required to solicit proposals for contracts to be a care management
15 organization under a competitive sealed proposal process.

16 **SECTION 135.** 46.284 (2) (bm) of the statutes, as affected by 2015 Wisconsin Act
17 (this act), is amended to read:

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

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1 SECTION 136. 46.284 (2) (c) of the statutes is repealed.

2 SECTION 137. 46.284 (3) (b) 10. of the statutes is amended to read:

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

6 SECTION 138. 46.284 (3) (b) 11. of the statutes is amended to read:

7 46.284 (3) (b) 11. The ability to develop strong linkages with systems and
8 services that are not directly within the scope of the applicant's responsibility but
9 that are important to the target group that it proposes to serve, including,

10 11m. If the department chooses to make primary and acute health care services
11 part of the family care benefit, the ability to provide or provide access to primary and
12 acute health care services under s. 49.46 (2) as determined by the department.

13 SECTION 139. 46.284 (3m) of the statutes is amended to read:

14 46.284 (3m) PERMIT REQUIRED. A care management organization that is
15 described under s. 600.01 (1) (b) 10. a., 2013 stats., to which s. 600.01 (1) (b) 10. b.,
16 2013 stats., does not apply and that is certified under sub. (3) shall apply for a permit
17 with the office of the commissioner of insurance under ch. 648.

18 SECTION 140. 46.284 (3m) of the statutes, as affected by 2015 Wisconsin Act ...

19 (this act), is repealed.

20 SECTION 141. 46.284 (4) (e) of the statutes is amended to read:

21 46.284 (4) (e) Provide, within guidelines established by the department, a
22 mechanism self-directed services option by which an enrollee may arrange for,
23 manage, and monitor his or her family care benefit directly or with the assistance of
24 another person chosen by the enrollee. The care management organization shall
25 provide each enrollee with a form on which the enrollee shall indicate whether he or

1 she has been offered the self-directed services option under this paragraph and
2 whether he or she has accepted or declined the self-directed services option. If the
3 enrollee accepts the option, the care management organization shall monitor the
4 enrollee's use of a fixed budget for purchase of services or support items from any
5 qualified provider, monitor the health and safety of the enrollee, and provide
6 assistance in management of the enrollee's budget and services at a level tailored to
7 the enrollee's need and desire for the assistance.

8 **SECTION 142.** 46.284 (5) (a) of the statutes is amended to read:

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

16 **SECTION 143.** 46.284 (5) (d) 4. of the statutes is amended to read:

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

1 outstanding debts to providers of family care benefit services and for the
2 continuation of family care benefit services to enrollees.

3 **SECTION 144.** 46.284 (6) of the statutes is amended to read:

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

10 **SECTION 145.** 46.284 (7) (a) of the statutes is amended to read:

11 46.284 (7) (a) A care management organization may provide information as
12 required to comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the
13 department to administer the family care program ~~under ss. 46.2805 to 46.2895.~~

14 **SECTION 146.** 46.284 (7) (b) of the statutes is amended to read:

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

23 **SECTION 147.** 46.285 (intro.) and (1) of the statutes are consolidated,
24 renumbered 46.285 and amended to read:

1 **46.285 Operation of resource center and care management**
2 **organization.** In order to meet federal requirements and assure federal financial
3 participation in funding of the family care benefit, a county, a tribe or band, ~~a~~
4 ~~long-term care district~~ or an organization, including a private, nonprofit
5 corporation, may not directly operate both a resource center and a care management
6 organization, except as follows: ~~(1) For that~~ for an entity with which the department
7 has contracted under s. 46.281 (1) (e) 1., 2005 stats., provision of the services
8 specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
9 provision of services of the care management organization by January 1, 2001.

10 **SECTION 148.** 46.285 (2) of the statutes is repealed.

11 **SECTION 149.** 46.286 (3g) of the statutes is created to read:

12 **46.286 (3g) TRANSFERRING CARE MANAGEMENT ORGANIZATIONS.** An enrollee may
13 transfer his or her enrollment to a different care management organization but only
14 during an open enrollment period specified by the department, unless the enrollee
15 meets an exception specified by the department.

16 **SECTION 150.** 46.287 (2) (c) of the statutes is amended to read:

17 **46.287 (2) (c)** Information regarding the availability of advocacy services and
18 notice of adverse actions taken and appeal rights shall be provided to a client by the
19 resource center or other contracted entity under s. 46.283 (2) or care management
20 organization in a form and manner that is prescribed by the department by rule.

21 **SECTION 151.** 46.2895 of the statutes, as affected by 2015 Wisconsin Act (this
22 act), is repealed.

23 **SECTION 152.** 46.2895 (1) (a) (intro.) of the statutes is amended to read:

24 **46.2895 (1) (a) (intro.)** ~~A~~ Except as provided in par. (f), a county, a tribe or band,
25 or any combination of counties or tribes or bands, may create a special purpose

1 district that is termed a “long-term care district”, that is a local unit of government,
2 that is separate and distinct from, and independent of, the state and the county or
3 tribe or band that created it, and that has the powers and duties specified in this
4 section, if each county or tribe or band that participates in creating the district does
5 all of the following:

6 **SECTION 153.** 46.2895 (1) (a) 1. b. of the statutes is amended to read:

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

12 **SECTION 154.** 46.2895 (1) (c) of the statutes is amended to read:

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

17 **SECTION 155.** 46.2895 (1) (f) of the statutes is created to read:

18 46.2895 (1) (f) No county, tribe, band, or combination of counties, tribes, or
19 bands, may create a long-term care district after June 30, 2015.

20 **SECTION 156.** 46.2895 (4) (intro.) of the statutes is amended to read:

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

25 **SECTION 157.** 46.2895 (4) (dm) of the statutes is amended to 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 **SECTION 158.** 46.2895 (8) (a) (intro.) of the statutes is amended to read:

6 46.2895 (8) (a) (intro.) ~~A~~ Subject to sub. (12m), a long-term care district board
7 that is created at least in part by a county shall do all of the following:

8 **SECTION 159.** 46.2895 (12m) of the statutes is created to read:

9 46.2895 (12m) **REQUIRED DISSOLUTION.** A long-term care district that exists on
10 June 30, 2015, shall dissolve under the procedures in sub. (13) before June 30, 2017,
11 or before a date established by the department, whichever is later.

12 **SECTION 160.** 46.2897 of the statutes is repealed.

13 **SECTION 161.** 46.2899 (1) of the statutes is repealed.

14 **SECTION 162.** 46.2899 (3) of the statutes is amended to read:

15 46.2899 (3) **ELIGIBILITY.** The department shall consider as eligible for the
16 waiver program described under sub. (2) only individuals who are receiving
17 post-secondary education in a setting that is distinguishable from the institution.
18 The department shall set the financial eligibility requirements and functional
19 eligibility requirements for the waiver program described under sub. (2) the same as
20 the financial eligibility requirements and functional eligibility requirements for the
21 self-directed services option of the family care program, as defined in s. 46.2805
22 (4m), except for the requirement to be an individual who is developmentally disabled
23 and who is receiving post-secondary education on the grounds of a institution.

24 **SECTION 163.** 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 **SECTION 164.** 46.29 (1) (intro.) of the statutes is amended to read:

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

11 **SECTION 165.** 46.295 (1) of the statutes is amended to read:

12 46.295 (1) The department may, on the request of any hearing-impaired
13 person, city, village, town, or county or private agency, provide funds from the
14 appropriation accounts under s. 20.435 (4) (hs) and (7) (d) ~~and (hs)~~ to reimburse
15 interpreters for hearing-impaired persons for the provision of interpreter services.

16 **SECTION 166.** 46.40 (1) (a) of the statutes is amended to read:

17 46.40 (1) (a) Within the limits of available federal funds and of the
18 appropriations under s. 20.435 (7) (b) and (o), the department shall distribute funds
19 for community social, mental health, developmental disabilities, and alcohol and
20 other drug abuse services and for services under ss. 46.87, ~~46.985~~, and 51.421 to
21 county departments under ss. 46.215, 46.22, 46.23, 51.42, and 51.437 and to county
22 aging units, as provided in subs. (2), (2m), (8), and ~~(7)~~ ~~to~~ (9).

23 **SECTION 167.** 46.40 (7) of the statutes is repealed.

24 **SECTION 168.** 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 **SECTION 169.** 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. (e).~~ 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 **SECTION 170.** 46.45 (3) (c) of the statutes is repealed.

22 **SECTION 171.** 46.45 (6) (a) of the statutes is renumbered 46.45 (6) and amended
23 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 **SECTION 172.** 46.45 (6) (b) of the statutes is repealed.

5 **SECTION 173.** 46.56 (3) (a) 4. of the statutes is repealed.

6 **SECTION 174.** 46.56 (10) of the statutes is repealed.

7 **SECTION 175.** 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 **SECTION 176.** 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 **SECTION 177.** 46.985 of the statutes is repealed.

19 **SECTION 178.** 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

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

3 **SECTION 179.** 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 **SECTION 180.** 49.45 (6v) of the statutes, as affected by 2015 Wisconsin Act
23 (this act), is repealed.

24 **SECTION 181.** 49.45 (6v) (c) of the statutes is amended to read:

1 49.45 (6v) (c) If the report specified in par. (b) indicates that utilization of beds
2 by recipients of medical assistance in facilities is less than estimates for that
3 utilization reflected in the intentions of the joint committee on finance, legislature
4 and governor, as expressed by them in the budget determinations, the department
5 shall include a proposal to transfer moneys from the appropriation under s. 20.435
6 (4) (b) to the appropriation under s. 20.435 ~~(7)~~ (4) (bd) for the purpose of increasing
7 funding for the community options program under s. 46.27. The amount proposed
8 for transfer may not reduce the balance in the appropriation account under s. 20.435
9 (4) (b) below an amount necessary to ensure that that appropriation account will end
10 the current fiscal year or the current fiscal biennium with a positive balance. The
11 secretary shall transfer the amount identified under the proposal.

12 **SECTION 182.** 49.472 (5) of the statutes is amended to read:

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

17 **SECTION 183.** 49.475 (1) (e) 2. of the statutes is amended to read:

18 49.475 (1) (e) 2. An enrollee of the family care program, as defined in s. 46.2805
19 (4m).

20 **SECTION 184.** 49.496 (1) (bk) 2. of the statutes is repealed.

21 **SECTION 185.** 49.849 (6) (b) of the statutes is amended to read:

22 49.849 (6) (b) From the appropriation under s. 20.435 ~~(7)~~ (4) (im), with respect
23 to funds collected by the department under sub. (2) related to long-term community
24 support services funded under s. 46.27 (7) paid on behalf of the decedent or the
25 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 **SECTION 186.** 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 **SECTION 187.** 50.034 (5n) (intro.) of the statutes is amended to read:

13 50.034 (5n) REQUIRED REFERRAL. (intro.) Subject to sub. (5p), when a residential
14 care apartment complex first provides written material regarding the residential
15 care apartment complex to a prospective resident who is at least 65 years of age or
16 has developmental disability or a physical disability and whose disability or
17 condition is expected to last at least 90 days, the residential care apartment complex
18 shall refer the prospective resident to a resource center or other entity under s.
19 46.283, unless any of the following applies:

20 **SECTION 188.** 50.034 (5n) (a) of the statutes is amended to read:

21 50.034 (5n) (a) For a person for whom a screening for functional eligibility
22 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
23 under this subsection need not include performance of an additional functional
24 screening under s. 46.283 (4) ~~(g)~~ (3) (o).

25 **SECTION 189.** 50.034 (5n) (d) of the statutes is amended to read:

1 50.034 **(5n)** (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 **SECTION 190.** 50.034 (5p) of the statutes is amended to read:

8 50.034 **(5p)** APPLICABILITY. Subsections (5m) and (5n) apply only if the secretary
9 has certified under s. 46.281 (3) that a resource center or other entity is available for
10 the residential care apartment complex and for specified groups of eligible
11 individuals that include those persons seeking admission to or the residents of the
12 residential care apartment complex.

13 **SECTION 191.** 50.034 (6) of the statutes is amended to read:

14 50.034 **(6)** FUNDING. Funding for supportive, personal or nursing services that
15 a person who resides in a residential care apartment complex receives, other than
16 private or 3rd-party funding, may be provided only under s. 46.27 (11) (c) 7. or 46.277
17 (5) (e), except if the provider of the services is a certified medical assistance provider
18 under s. 49.45 or if the funding is provided as a family care benefit under ~~ss. the~~
19 family care program as defined in s. 46.2805 to 46.2895 (4m).

20 **SECTION 192.** 50.035 (4m) of the statutes is amended to read:

21 50.035 **(4m)** PROVISION OF INFORMATION REQUIRED. Subject to sub. (4p), when a
22 community-based residential facility first provides written material regarding the
23 community-based residential facility to a prospective resident, the
24 community-based residential facility shall also provide the prospective resident
25 information specified by the department concerning the services of a resource center

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

5 **SECTION 193.** 50.035 (4n) (intro.) of the statutes is amended to read:

6 50.035 (4n) REQUIRED REFERRAL. (intro.) When a community-based residential
7 facility first provides written information regarding the community-based
8 residential facility to a prospective resident who is at least 65 years of age or has
9 developmental disability or a physical disability and whose disability or condition is
10 expected to last at least 90 days, the community-based residential facility shall refer
11 the individual to a resource center or other entity under s. 46.283 or, if the secretary
12 has not certified under s. 46.281 (3) that a resource center or other entity is available
13 in the area of the community-based residential facility to serve individuals in an
14 eligibility group to which the prospective resident belongs, to the county department
15 that administers a program under ss. 46.27 or 46.277, unless any of the following
16 applies:

17 **SECTION 194.** 50.035 (4n) (a) of the statutes is amended to read:

18 50.035 (4n) (a) For a person for whom a screening for functional eligibility
19 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
20 under this subsection need not include performance of an additional functional
21 screening under s. 46.283 (4) ~~(g)~~ (3) (o).

22 **SECTION 195.** 50.035 (4n) (d) of the statutes is amended to read:

23 50.035 (4n) (d) For a person who seeks admission or is about to be admitted on
24 a private pay basis and who waives the requirement for a financial and cost-sharing
25 screening under s. 46.283 (4) ~~(g)~~ (3) (o), the referral under this subsection may not

1 include performance of a financial and cost-sharing screening under s. 46.283 (4)(g)
2 (3)(o), unless the person is expected to become eligible for medical assistance within
3 6 months.

4 **SECTION 196.** 50.035 (4p) of the statutes is amended to read:

5 50.035 (4p) APPLICABILITY. Subsection (4m) applies only if the secretary has
6 certified under s. 46.281 (3) that a resource center or other entity is available for the
7 community-based residential facility and for specified groups of eligible individuals
8 that include those persons seeking admission to or the residents of the
9 community-based residential facility.

10 **SECTION 197.** 50.04 (2g) (a) of the statutes is amended to read:

11 50.04 (2g) (a) Subject to sub. (2i), a nursing home shall, within the time period
12 after inquiry by a prospective resident that is prescribed by the department by rule,
13 inform the prospective resident of the services of a resource center or other entity
14 under s. 46.283, the family care benefit under s. 46.286, and the availability of a
15 functional screening and a financial and cost-sharing screening to determine the
16 prospective resident's eligibility for the family care benefit under s. 46.286 (1).

17 **SECTION 198.** 50.04 (2h) (a) (intro.) of the statutes is amended to read:

18 50.04 (2h) (a) (intro.) Subject to sub. (2i), a nursing home shall, within the time
19 period prescribed by the department by rule, refer to a resource center or other entity
20 under s. 46.283 a person who is seeking admission, who is at least 65 years of age or
21 has developmental disability or physical disability and whose disability or condition
22 is expected to last at least 90 days, unless any of the following applies:

23 **SECTION 199.** 50.04 (2h) (a) 1. of the statutes is amended to read:

24 50.04 (2h) (a) 1. For a person for whom a screening for functional eligibility
25 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral

1 under this paragraph need not include performance of an additional functional
2 screening under s. 46.283 ~~(4)(g)~~ (3)(o).

3 **SECTION 200.** 50.04 (2h) (a) 4. of the statutes is amended to read:

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

10 **SECTION 201.** 50.04 (2i) of the statutes is amended to read:

11 50.04 **(2i)** APPLICABILITY. Subsections (2g) and (2h) apply only if the secretary
12 has certified under s. 46.281 (3) that a resource center or other entity is available for
13 the nursing home and for specified groups of eligible individuals that include those
14 persons seeking admission to or the residents of the nursing home.

15 **SECTION 202.** 50.04 (2m) (b) of the statutes is amended to read:

16 50.04 **(2m)** (b) Paragraph (a) does not apply to those residents for whom the
17 secretary has certified under s. 46.281 (3) that a resource center or other entity is
18 available.

19 **SECTION 203.** 50.06 (7) of the statutes is amended to read:

20 50.06 **(7)** An individual who consents to an admission under this section may
21 request that an assessment be conducted for the incapacitated individual under the
22 long-term support community options program under s. 46.27 (6) or, if the secretary
23 has certified under s. 46.281 (3) that a resource center or other entity is available for
24 the individual, a functional screening and a financial and cost-sharing screening to
25 determine eligibility for the family care benefit under s. 46.286 (1). If admission is

1 sought on behalf of the incapacitated individual or if the incapacitated individual is
2 about to be admitted on a private pay basis, the individual who consents to the
3 admission may waive the requirement for a financial and cost-sharing screening
4 under s. 46.283 ~~(4) (g)~~ (3) (o), unless the incapacitated individual is expected to
5 become eligible for medical assistance within 6 months.

6 **SECTION 204.** 50.49 (6m) (b) of the statutes is amended to read:

7 50.49 **(6m)** (b) A program specified in s. 46.2805 ~~(1) (a)~~ (9m).

8 **SECTION 205.** 50.49 (6m) (c) of the statutes is amended to read:

9 50.49 **(6m)** (c) A demonstration program specified in s. 46.2805 ~~(1) (b)~~ (4k).

10 **SECTION 206.** 51.06 (8) (b) 6. of the statutes is amended to read:

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

17 **SECTION 207.** 51.22 (3) of the statutes is amended to read:

18 51.22 **(3)** Whenever an admission is made through the department, the
19 department shall determine the need for inpatient care of the individual to be
20 admitted. Unless a state-operated facility is used, the department may only
21 authorize care in an inpatient facility which is operated by or under a purchase of
22 service contract with a county department under s. 51.42 or 51.437 or an inpatient
23 facility which is under a contractual agreement with the department. Except in the
24 case of state treatment facilities, the department shall reimburse the facility for the
25 actual cost of all authorized care and services from the appropriation under s. 20.435

1 ~~(7)~~ (5) (da). For collections made under the authority of s. 46.10 (16), moneys shall
2 be credited or remitted to the department no later than 60 days after the month in
3 which collections are made. Such collections are also subject to s. 46.036 or special
4 agreement. Collections made by the department under ss. 46.03 (18) and 46.10 shall
5 be deposited in the general fund.

6 **SECTION 208.** 51.42 (1) (b) of the statutes is amended to read:

7 51.42 (1) (b) *County liability.* The county board of supervisors except in
8 Milwaukee County, has the primary responsibility for the well-being, treatment and
9 care of the mentally ill, developmentally disabled, alcoholic and other drug
10 dependent citizens residing within its county and for ensuring that those individuals
11 in need of such emergency services found within its county receive immediate
12 emergency services. In Milwaukee County, the Milwaukee County mental health
13 board has the primary responsibility for the well-being, treatment and care of the
14 mentally ill, alcoholic, and other drug dependent citizens residing within Milwaukee
15 County and for ensuring that those individuals in need of such emergency services
16 found within Milwaukee County receive immediate emergency services. The county
17 board of supervisors of Milwaukee County has the primary responsibility for the
18 well-being, treatment, and care of the developmentally disabled citizens residing
19 within Milwaukee County, except where the responsibility is delegated explicitly
20 under this section to the Milwaukee County mental health board, and for ensuring
21 that developmentally disabled individuals in need of such emergency services found
22 within Milwaukee County receive immediate emergency services. This primary
23 responsibility is limited to the programs, services and resources that the county
24 board of supervisors, or, as applicable, the Milwaukee County mental health board,
25 is reasonably able to provide within the limits of available state and federal funds

1 and of county funds required to be appropriated to match state funds. County
2 liability for care and services purchased through or provided by a county department
3 of community programs established under this section shall be based upon the
4 client's county of residence except for emergency services for which liability shall be
5 placed with the county in which the individual is found. For the purpose of
6 establishing county liability, "emergency services" includes those services provided
7 under the authority of s. 55.05 (4), 2003 stats., or s. 55.06 (11) (a), 2003 stats., or s.
8 51.15, 51.45 (11) (a) or (b) or (12), 55.13, or 55.135 for not more than 72 hours.
9 Nothing in this paragraph prevents recovery of liability under s. 46.10 or any other
10 statute creating liability upon the individual receiving a service or any other
11 designated responsible party, or prevents reimbursement by the department of
12 health services for the actual cost of all care and services from the appropriation
13 under s. 20.435 ~~(7)~~ (5) (da), as provided in s. 51.22 (3).

14 **SECTION 209.** 51.42 (3) (ar) 17. of the statutes is amended to read:

15 51.42 (3) (ar) 17. If authorized under s. 46.283 (1) (a) ~~1~~, apply to the department
16 of health services to operate a resource center under s. 46.283 and, if the department
17 contracts with the county under s. 46.283 (2), operate the resource center.

18 **SECTION 210.** 51.42 (3) (ar) 18. of the statutes is amended to read:

19 51.42 (3) (ar) 18. If authorized under s. 46.284 (1) (a) ~~1~~, apply to the department
20 of health services to operate a care management organization under s. 46.284 and,
21 if the department contracts with the county under s. 46.284 (2), operate the care
22 management organization and, if appropriate, place funds in a risk reserve.

23 **SECTION 211.** 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 **SECTION 212.** 51.42 (3) (e) of the statutes, as affected by 2015 Wisconsin Act ...
16 (this act), is amended to read:

17 51.42 (3) (e) *Exchange of information.* Notwithstanding ss. ~~46.2895 (9)~~, 48.78
18 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3)
19 (c), and 938.78 (2) (a), any subunit of a county department of community programs
20 or tribal agency acting under this section may exchange confidential information
21 about a client, without the informed consent of the client, with any other subunit of
22 the same county department of community programs or tribal agency, with a
23 resource center or other contracted entity under s. 46.283 (2), or a care management
24 organization, ~~or a long-term care district~~, or with any person providing services to
25 the client under a purchase of services contract with the county department of

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

8 **SECTION 213.** 51.437 (4m) (n) of the statutes is amended to read:

9 51.437 (4m) (n) If authorized under s. 46.283 (1) (a) ~~1.~~, apply to the department
10 of health services to operate a resource center under s. 46.283 and, if the department
11 contracts with the county under s. 46.283 (2), operate the resource center.

12 **SECTION 214.** 51.437 (4m) (p) of the statutes is amended to read:

13 51.437 (4m) (p) If authorized under s. 46.284 (1) (a) ~~1.~~, apply to the department
14 of health services to operate a care management organization under s. 46.284 and,
15 if the department contracts with the county under s. 46.284 (2), operate the care
16 management organization and, if appropriate, place funds in a risk reserve.

17 **SECTION 215.** 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 **SECTION 216.** 51.437 (4r) (b) of the statutes, as affected by 2015 Wisconsin Act
10 (this act), is amended to read:

11 51.437 (4r) (b) Notwithstanding ss. ~~46.2895 (9)~~, 48.78 (2) (a), 49.45 (4), 49.83,
12 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a),
13 any subunit of a county department of developmental disabilities services or tribal
14 agency acting under this section may exchange confidential information about a
15 client, without the informed consent of the client, with any other subunit of the same
16 county department of developmental disabilities services or tribal agency, with a
17 resource center or other contracted entity under s. 46.283 (2), or a care management
18 organization, ~~or a long-term care district~~, or with any person providing services to
19 the client under a purchase of services contract with the county department of
20 developmental disabilities services or tribal agency or with a resource center or other
21 contracted entity under s. 46.283 (2), or a care management organization, ~~or a~~
22 ~~long-term care district~~, if necessary to enable an employee or service provider to
23 perform his or her duties, or to enable the county department of developmental
24 disabilities services or tribal agency to coordinate the delivery of services to the

1 client. Any agency releasing information under this paragraph shall document that
2 a request was received and what information was provided.

3 **SECTION 217.** 66.0301 (1) (a) of the statutes, as affected by 2015 Wisconsin Act
4 (this act), is amended to read:

5 66.0301 (1) (a) Except as provided in pars. (b) and (c), in this section
6 “municipality” means the state or any department or agency thereof, or any city,
7 village, town, county, school district, public library system, public inland lake
8 protection and rehabilitation district, sanitary district, farm drainage district,
9 metropolitan sewerage district, sewer utility district, solid waste management
10 system created under s. 59.70 (2), local exposition district created under subch. II of
11 ch. 229, local professional baseball park district created under subch. III of ch. 229,
12 local professional football stadium district created under subch. IV of ch. 229, local
13 cultural arts district created under subch. V of ch. 229, local sports and
14 entertainment district created under subch. VI of ch. 229, ~~long-term care district~~
15 ~~under s. 46.2895~~, water utility district, mosquito control district, municipal electric
16 company, county or city transit commission, commission created by contract under
17 this section, taxation district, regional planning commission, housing authority
18 created under s. 66.1201, redevelopment authority created under s. 66.1333,
19 community development authority created under s. 66.1335, or city-county health
20 department.

****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.

21 **SECTION 218.** 66.0506 (1) of the statutes, as affected by 2015 Wisconsin Act
22 (this act), is amended to read:

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, the University of Wisconsin System Authority,
4 or any other political subdivision of the state, or instrumentality of one or more
5 political subdivisions of the state.

 ****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.

6 **SECTION 219.** 66.0601 (1) (b) of the statutes is amended to read:

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

12 **SECTION 220.** 66.0601 (1) (c) of the statutes is amended to read:

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

18 **SECTION 221.** 69.30 (1) (bd) of the statutes is repealed.

19 **SECTION 222.** 69.30 (2) of the statutes is amended to read:

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

1 copy of a vital record for use by the financial institution, state agency, county
2 department, Wisconsin works agency, or service office ~~or long-term care district~~,
3 including use under s. 45.04 (5), if the copy is marked “FOR ADMINISTRATIVE
4 USE”.

5 **SECTION 223.** 70.11 (2) of the statutes is amended to read:

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

21 **SECTION 224.** 71.26 (1) (b) of the statutes is amended to read:

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

1 **SECTION 225.** 101.01 (4) of the statutes is amended to read:

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

7 **SECTION 226.** 102.01 (2) (d) of the statutes is amended to read:

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

11 **SECTION 227.** 102.04 (1) (a) of the statutes is amended to read:

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

15 **SECTION 228.** 103.001 (6) of the statutes is amended to read:

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

21 **SECTION 229.** 111.70 (1) (j) of the statutes, as affected by 2015 Wisconsin Act
22 (this act), is amended to read:

23 111.70 (1) (j) “Municipal employer” means any city, county, village, town,
24 metropolitan sewerage district, school district, ~~long-term care district~~, local cultural
25 arts district created under subch. V of ch. 229, the University of Wisconsin System

1 Authority, or any other political subdivision of the state, or instrumentality of one or
2 more political subdivisions of the state, that engages the services of an employee and
3 includes any person acting on behalf of a municipal employer within the scope of the
4 person's authority, express or implied.

****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.

5 SECTION 230. 600.01 (1) (b) 10. of the statutes is repealed.

6 SECTION 231. 600.01 (3) of the statutes is created to read:

7 600.01 (3) CARE MANAGEMENT ORGANIZATIONS. A care management organization
8 as defined in s. 46.2805 (1) (dm) is considered an insurer for purposes of chs. 600 to
9 646.

10 SECTION 232. 601.41 (12) of the statutes is created to read:

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

16 SECTION 233. 632.745 (6) (a) 2m. of the statutes is repealed.

17 SECTION 234. Chapter 648 of the statutes, as affected by 2015 Wisconsin Act

18 ... (this act), is repealed.

19 SECTION 235. 648.03 of the statutes is amended to read:

20 648.03 **Applicability of other laws.** Notwithstanding s. 600.01 (1) (b) 10. a.,
21 ss. Sections 600.01, 600.02, 600.03, and 600.12 apply to this chapter.

22 SECTION 236. 985.01 (1g) of the statutes is amended to read:

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

3 **SECTION 237.** 985.01 (3) of the statutes is amended to read:

4 985.01 (3) “Municipality” has the meaning in s. 345.05 (1) (c) ~~and includes a~~
5 ~~long-term care district under s. 46.2895.~~

6 **SECTION 9118. Nonstatutory provisions; Health Services.**

7 (1) CHANGES TO FAMILY CARE PROGRAM.

8 (a) *Definitions.* In this subsection:

9 1. “Department” means the department of health services.

10 2. “Family Care Partnership Program” means an integrated health and
11 long-term care program operated under an amendment to the state Medical
12 Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 4396n (c).

13 3. “Family care program” means the program under sections 46.2805 to
14 46.2895 of the statutes that provides the family care benefit as defined in section
15 46.2805 (4) of the statutes.

16 4. “Program of all-inclusive care for the elderly” means an integrated health
17 and long-term care program operated under 42 USC 1395eee or 1396u-4.

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

23 1. Administration by care management organizations of the family care
24 program statewide instead of by geographic region, unless the department allows the

1 care management organization a waiver to administer the family care benefit in a
2 specific geographic region.

3 2. Addition of any primary and acute health care services selected by the
4 department as a benefit under the family care program.

5 3. Selection under section 46.284 (2) (bm) of the statutes as a care management
6 organization of any applicant that the department certifies meets the qualifications
7 instead of using the competitive procurement process.

8 4. Requirement under section 46.286 (3g) of the statutes that an enrollee
9 change care management organizations only during an open enrollment period
10 specified by the department.

11 5. Prevention of the creation of new long-term care districts and dissolution of
12 existing long-term care districts under section 46.2895 of the statutes.

13 6. Elimination of the insurance requirements for care management
14 organizations under chapter 648 of the statutes.

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

24 (d) *Waiver request not approved; saving provision.* If the federal department
25 of health and human services does not approve of any request or submission of waiver

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

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

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

18 **SECTION 9218. Fiscal changes; Health Services.**

19 (1) **MERGER OF DIVISIONS INTO MEDICAID SERVICES DIVISION.**

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

24 (b) The unencumbered balances of the appropriations to the department of
25 health services under section 20.435 (7) (gc) and (h) of the statutes, as affected by this

1 act, are transferred to the appropriation account under section 20.435 (4) (hp) of the
2 statutes, as affected by this act, on the effective date of this paragraph.

3 (c) The unencumbered balance of the appropriation to the department of health
4 services under section 20.435 (7) (gm) of the statutes, as affected by this act, is
5 transferred to the appropriation account under section 20.435 (4) (iL) of the statutes,
6 as affected by this act, on the effective date of this paragraph.

7 (d) The unencumbered balance of the appropriation to the department of health
8 services under section 20.435 (7) (hs) of the statutes, as affected by this act, is
9 transferred to the appropriation account under section 20.435 (4) (hs) of the statutes,
10 as affected by this act, on the effective date of this paragraph.

11 (e) The unencumbered balance of the appropriation to the department of health
12 services under section 20.435 (7) (i) of the statutes, as affected by this act, is
13 transferred to the appropriation account under section 20.435 (4) (i) of the statutes,
14 as affected by this act, on the effective date of this paragraph.

15 (f) The unencumbered balance of the appropriation to the department of health
16 services under section 20.435 (7) (im) of the statutes, as affected by this act, is
17 transferred to the appropriation account under section 20.435 (4) (im) of the statutes,
18 as affected by this act, on the effective date of this paragraph.

19 (g) The unencumbered balance of the appropriation to the department of health
20 services under section 20.435 (7) (jb) of the statutes, as affected by this act, is
21 transferred to the appropriation account under section 20.435 (4) (jc) of the statutes,
22 as affected by this act, on the effective date of this paragraph.

23 (h) The unencumbered balance of the appropriation to the department of
24 health services under section 20.435 (7) (kx) of the statutes, as affected by this act,

1 is transferred to the appropriation account under section 20.435 (4) (kx) of the
2 statutes, as affected by this act, on the effective date of this paragraph.

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

7 (j) The unencumbered balance of the appropriation to the department of health
8 services under section 20.435 (7) (n) of the statutes, as affected by this act, is
9 transferred to the appropriation account under section 20.435 (4) (n) of the statutes,
10 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.

11 **SECTION 9418. Effective dates; Health Services.**

12 (1) FAMILY CARE CHANGES; LONG-TERM CARE DISTRICTS; INSURANCE REGULATION. The
13 treatment of sections 13.94 (4) (a) 1. (by SECTION 2) and (b), 17.15 (5), 17.27 (3m),
14 19.82 (1), 20.145 (1) (g) (intro.) and 3., 20.435 (4) (jt) and (kv), 20.927 (1m) (by SECTION
15 45), 20.9275 (1) (b), 25.50 (1) (d) (by SECTION 47), 40.02 (28) and (36), 46.21 (2m) (c)
16 (by SECTION 52), 46.215 (1m) (by SECTION 56) and (1p), 46.22 (1) (dm) (by SECTION 61)
17 and (dp), 46.23 (3) (e) (by SECTION 64) and (ed), 46.27 (7) (fr) 3. c., 46.2805 (intro.), (7r),
18 and (7u218), 46.281 (1d), 46.283 (2) (by SECTION 113) and (7) (b) (by SECTION 130),
19 46.284 (2) (bm) (by SECTION 135), and (d), (3m),
20 48.47 (7g), 51.42 (3) (e) (by SECTION 212), 51.437 (4r) (b) (by SECTION 216), 66.0301 (1)
21 (a) (by SECTION 217), 66.0506 (1) (by SECTION 218), 66.0601 (1) (b) and (c), 69.30 (1)
22 (bd) and (2), 70.11 (2), 71.26 (1) (b), 101.01 (4), 102.01 (2) (d), 102.04 (1) (a), 103.001
23 (6), 111.70 (1) (j) (by SECTION 229), 632.745 (6) (a) 2m., and 985.01 (1g) and (3) of the

600.01(1)(b)10., and chapter 618

1 statutes, the repeal of sections ~~46.284 (3m) and 46.2895 and chapter 648~~ of the
2 statutes, and the amendment of section 46.2805 (4m) of the statutes take effect on
3 July 1, 2018.

4 (2) CHANGES TO COMMUNITY OPTIONS PROGRAM; CHILDREN'S COMMUNITY OPTIONS
5 PROGRAM. The treatment of sections 20.435 (4) (b) (by SECTION 12) (bd) (by SECTION
6 13), 46.27 (13), 46.272, 46.2803 (2) (by SECTION 82), 46.40 (1) (a), (7), and (14m), 46.45
7 (3) (a) and (c) and (6) (a) and (b), 46.56 (3) (a) 4. and (10), and 46.985 of the statutes,
8 and the repeal of section 49.45 (6v) of the statutes take effect on January 1, 2016.

9 (END)

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

LRB-1461/P2ins
TJD:.....

1

2 INSERT 56-2

3 **SECTION 1.** 46.284 (2) (d) of the statutes is repealed.

4 END INSERT 56-2

5 INSERT 82-9

6 **SECTION 2.** 600.03 (25) (a) 5. of the statutes is created to read:

7 600.03 **(25)** (a) 5. Services provided by a care management organization, as
8 defined in s. 46.2805 (1) (dm).

9 END INSERT 82-9