

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23 **SECTION 93.** 46.2805 (7r) of the statutes is repealed.

24 **SECTION 94.** 46.2805 (7u) of the statutes is repealed.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

1 **SECTION 136.** 46.284 (2) (c) of the statutes is repealed.

2 **SECTION 137.** 46.284 (2) (d) of the statutes is repealed.

3 **SECTION 138.** 46.284 (3) (b) 10. of the statutes is amended to read:

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

7 **SECTION 139.** 46.284 (3) (b) 11. of the statutes is amended to read:

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

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

14 **SECTION 140.** 46.284 (3m) of the statutes, is repealed.

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

16 46.284 (4) (e) Provide, within guidelines established by the department, a
17 ~~mechanism~~ self-directed services option by which an enrollee may arrange for,
18 manage, and monitor his or her family care benefit directly or with the assistance of
19 another person chosen by the enrollee. The care management organization shall
20 provide each enrollee with a form on which the enrollee shall indicate whether he or
21 she has been offered the self-directed services option under this paragraph and
22 whether he or she has accepted or declined the self-directed services option. If the
23 enrollee accepts the option, the care management organization shall monitor the
24 enrollee's use of a fixed budget for purchase of services or support items from any
25 qualified provider, monitor the health and safety of the enrollee, and provide

1 assistance in management of the enrollee's budget and services at a level tailored to
2 the enrollee's need and desire for the assistance.

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

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

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

12 46.284 (5) (d) 4. The requirement that a care management organization place
13 funds in a risk reserve and maintain the risk reserve in an interest-bearing escrow
14 account with a financial institution, as defined in s. 69.30 (1) (b), ~~or invest funds as~~
15 ~~specified in s. 46.2895 (4) (j) 2. or 3.~~ Moneys in the risk reserve or invested as specified
16 in this subdivision may be expended only for the provision of services under this
17 section. If a care management organization ceases participation under this section,
18 the funds in the risk reserve or invested as specified in this subdivision, minus any
19 contribution of moneys other than those specified in par. (c), shall be returned to the
20 department. The department shall expend the moneys for the payment of
21 outstanding debts to providers of family care benefit services and for the
22 continuation of family care benefit services to enrollees.

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

24 46.284 (6) GOVERNING BOARD. A care management organization shall have a
25 governing board that reflects the ethnic and economic diversity of the geographic

1 area served by the care management organization. At least one-fourth of the
2 members of the governing board shall be representative of the ~~client group or groups~~
3 ~~whom the care management organization is contracted to serve or those clients'~~
4 enrollees or the enrollees' family members, guardians, or other advocates.

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

6 46.284 (7) (a) A care management organization may provide information as
7 required to comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the
8 department to administer the family care program ~~under ss. 46.2805 to 46.2895.~~

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

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

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

20 **46.285 Operation of resource center and care management**
21 **organization.** In order to meet federal requirements and assure federal financial
22 participation in funding of the family care benefit, a county, a tribe or band, –a
23 ~~long-term care district~~ or an organization, including a private, nonprofit
24 corporation, may not directly operate both a resource center and a care management
25 organization, except as follows: ~~(1) For that for~~ that for an entity with which the department

1 has contracted under s. 46.281 (1) (e) 1., 2005 stats., provision of the services
2 specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
3 provision of services of the care management organization by January 1, 2001.

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

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

6 46.286 (3g) TRANSFERRING CARE MANAGEMENT ORGANIZATIONS. An enrollee may
7 transfer his or her enrollment to a different care management organization but only
8 during an open enrollment period specified by the department, unless the enrollee
9 meets an exception specified by the department.

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

11 46.287 (2) (c) Information regarding the availability of advocacy services and
12 notice of adverse actions taken and appeal rights shall be provided to a client by the
13 resource center or other contracted entity under s. 46.283 (2) or care management
14 organization in a form and manner that is prescribed by the department by rule.

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

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

18 46.2895 (1) (a) (intro.) A. Except as provided in par. (f), a county, a tribe or band,
19 or any combination of counties or tribes or bands, may create a special purpose
20 district that is termed a “long-term care district”, that is a local unit of government,
21 that is separate and distinct from, and independent of, the state and the county or
22 tribe or band that created it, and that has the powers and duties specified in this
23 section, if each county or tribe or band that participates in creating the district does
24 all of the following:

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

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

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

7 46.2895 (1) (c) A long-term care district may not operate a care management
8 organization under s. 46.284 ~~or~~, a program described under s. ~~46.2805 (1) (a) or (b)~~
9 of all-inclusive care for the elderly, or the Family Care Partnership Program if the
10 district operates a resource center under s. 46.283.

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

12 46.2895 (1) (f) No county, tribe, band, or combination of counties, tribes, or
13 bands, may create a long-term care district after June 30, 2015.

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

15 46.2895 (4) POWERS. (intro.) Subject to ~~sub.~~ subs. (1) (c) and (12m), a long-term
16 care district has all the powers necessary or convenient to carry out the purposes and
17 provisions of the family care program ss. 46.2805 to 46.2895. In addition to all these
18 powers, a long-term care district may do all of the following:

19 **SECTION 157.** 46.2895 (4) (dm) of the statutes is amended to read:

20 46.2895 (4) (dm) Subject to sub. (1) (c), enter into a contract with the
21 department to operate ~~a~~ the program described under s. 46.2805 (1) (a) or (b) of
22 all-inclusive care for the elderly or the Family Care Partnership Program and
23 provide services related to the contracted services.

24 **SECTION 158.** 46.2895 (8) (a) (intro.) of the statutes is amended to read:

1 46.2895 (8) (a) (intro.) ~~A- Subject to sub. (12m), a long-term care district board~~
2 that is created at least in part by a county shall do all of the following:

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

4 46.2895 (12m) REQUIRED DISSOLUTION. A long-term care district that exists on
5 June 30, 2015, shall dissolve under the procedures in sub. (13) before June 30, 2017,
6 or before a date established by the department, whichever is later.

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

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

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

10 46.2899 (3) ELIGIBILITY. The department shall consider as eligible for the
11 waiver program described under sub. (2) only individuals who are receiving
12 post-secondary education in a setting that is distinguishable from the institution.
13 The department shall set the financial eligibility requirements and functional
14 eligibility requirements for the waiver program described under sub. (2) the same as
15 the financial eligibility requirements and functional eligibility requirements for the
16 self-directed services option of the family care program, as defined in s. 46.2805
17 (4m), except for the requirement to be an individual who is developmentally disabled
18 and who is receiving post-secondary education on the grounds of a institution.

19 **SECTION 163.** 46.2899 (4) of the statutes is amended to read:

20 46.2899 (4) SERVICES AND BENEFITS. The department shall provide the same
21 services under the waiver program described in sub. (2) as it provides under the
22 self-directed services option of the family care program, as defined in s. 46.2805
23 (4m). The department shall determine the funding amount for a waiver program
24 participant under this section.

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

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

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

6 46.295 (1) The department may, on the request of any hearing-impaired
7 person, city, village, town, or county or private agency, provide funds from the
8 appropriation accounts under s. 20.435 (4) (hs) and (7) (d) and ~~(hs)~~ to reimburse
9 interpreters for hearing-impaired persons for the provision of interpreter services.

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

11 46.40 (1) (a) Within the limits of available federal funds and of the
12 appropriations under s. 20.435 (7) (b) and (o), the department shall distribute funds
13 for community social, mental health, developmental disabilities, and alcohol and
14 other drug abuse services and for services under ss. 46.87, ~~46.985~~, and 51.421 to
15 county departments under ss. 46.215, 46.22, 46.23, 51.42, and 51.437 and to county
16 aging units, as provided in subs. (2), (2m), (8), and ~~(7) to~~ (9).

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

18 **SECTION 168.** 46.40 (14m) of the statutes is amended to read:

19 46.40 **(14m)** COUNTY COMMUNITY AIDS BUDGETS. Before December 1 of each year,
20 each county department under ss. 46.215, 46.22, 46.23, 51.42 and 51.437 and each
21 tribal governing body shall submit to the department a proposed budget for the
22 expenditure of funds allocated under this section or carried forward under s. 46.45
23 (3) (a). The proposed budget shall be submitted on a form developed by the
24 department and approved by the department of administration.

25 **SECTION 169.** 46.45 (3) (a) of the statutes is amended to read:

1 46.45 (3) (a) Except as provided in par. (b), at the request of a county, tribal
2 governing body, or private nonprofit organization, the department shall carry
3 forward up to 3% of the total amount allocated to the county, tribal governing body,
4 or nonprofit organization for a calendar year, ~~not including the amount allocated to~~
5 ~~the county under s. 46.40 (7), which amount may be carried forward as provided in~~
6 ~~par. (e).~~ All funds carried forward for a tribal governing body or nonprofit
7 organization and all funds allocated under s. 46.40 (2m) carried forward for a county
8 shall be used for the purpose for which the funds were originally allocated. Other
9 funds carried forward under this paragraph may be used for any purpose under s.
10 20.435 (7) (b), except that a county may not use any funds carried forward under this
11 paragraph for administrative or staff costs. An allocation of carried-forward funding
12 under this paragraph does not affect a county's base allocations under s. 46.40 (2),
13 (2m), (8), and (9).

14 **SECTION 170.** 46.45 (3) (c) of the statutes is repealed.

15 **SECTION 171.** 46.45 (6) (a) of the statutes is renumbered 46.45 (6) and amended
16 to read:

17 46.45 (6) The department may carry forward 10% of any funds specified in sub.
18 (3) (a) that are not carried forward under sub. (3) (a) for emergencies, for justifiable
19 unit services costs above planned levels, and for increased costs due to population
20 shifts. An allocation of carried-forward funding under this paragraph does not affect
21 a county's base allocations under s. 46.40 (2), (2m), (8), and (9).

22 **SECTION 172.** 46.45 (6) (b) of the statutes is repealed.

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

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

25 **SECTION 175.** 46.82 (3) (a) 19. of the statutes is amended to read:

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

5 **SECTION 176.** 46.82 (3) (a) 20. of the statutes is amended to read:

6 46.82 (3) (a) 20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
7 under s. 46.284 (1) (a) ~~1.~~, apply to the department to operate a care management
8 organization under s. 46.284 and, if the department contracts with the county under
9 s. 46.284 (2), operate the care management organization and, if appropriate, place
10 funds in a risk reserve.

11 **SECTION 177.** 46.985 of the statutes is repealed.

12 **SECTION 178.** 46.99 (4) of the statutes is amended to read:

13 46.99 (4) From the appropriation account under s. 20.435 (4) (o), the
14 department may distribute to counties that provide services under this section the
15 amount of federal moneys received by the state as the federal share of medical
16 assistance for those services, minus the amount transferred to the appropriation
17 account under s. 20.435 (~~7~~) (4) (im) for the department's costs of administering this
18 section. Counties shall use moneys distributed under this section to provide services
19 under this section or s. 51.44.

20 **SECTION 179.** 48.47 (7g) of the statutes is amended to read:

21 48.47 (7g) STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. Establish
22 a statewide automated child welfare information system. Notwithstanding ss.
23 46.2895-~~(9)~~, 48.396 (1) and (2) (a), 48.78 (2) (a), 48.981 (7), 49.45 (4), 49.83, 51.30,
24 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 252.15, 253.07 (3) (c), 938.396 (1) (a) and
25 (2), and 938.78 (2) (a), the department may enter the content of any record kept or

1 information received by the department into the statewide automated child welfare
2 information system, and a county department under s. 46.215, 46.22, or 46.23, the
3 department, or any other organization that has entered into an information sharing
4 and access agreement with the department or any of those county departments and
5 that has been approved for access to the statewide automated child welfare
6 information system by the department may have access to information that is
7 maintained in that system, if necessary to enable the county department,
8 department, or organization to perform its duties under this chapter, ch. 46, 51, 55,
9 or 938, or 42 USC 670 to 679b or to coordinate the delivery of services under this
10 chapter, ch. 46, 51, 55, or 938, or 42 USC 670 to 679b. The department may also
11 transfer information that is maintained in the system to a court under s. 48.396 (3)
12 (bm), and the court and the director of state courts may allow access to that
13 information as provided in s. 48.396 (3) (c) 2.

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

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

17 49.45 (6v) (c) If the report specified in par. (b) indicates that utilization of beds
18 by recipients of medical assistance in facilities is less than estimates for that
19 utilization reflected in the intentions of the joint committee on finance, legislature
20 and governor, as expressed by them in the budget determinations, the department
21 shall include a proposal to transfer moneys from the appropriation under s. 20.435
22 (4) (b) to the appropriation under s. 20.435 (7) (4) (bd) for the purpose of increasing
23 funding for the community options program under s. 46.27. The amount proposed
24 for transfer may not reduce the balance in the appropriation account under s. 20.435
25 (4) (b) below an amount necessary to ensure that that appropriation account will end

1 the current fiscal year or the current fiscal biennium with a positive balance. The
2 secretary shall transfer the amount identified under the proposal.

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

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

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

9 49.475 (1) (e) 2. An enrollee of the family care program, as defined in s. 46.2805
10 (4m).

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

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

13 49.849 (6) (b) From the appropriation under s. 20.435 (7) (4) (im), with respect
14 to funds collected by the department under sub. (2) related to long-term community
15 support services funded under s. 46.27 (7) paid on behalf of the decedent or the
16 decedent's spouse, the department shall pay claims under sub. (5) and shall spend
17 the remainder of the funds recovered under this section for long-term community
18 support services funded under s. 46.27 (7).

19 **SECTION 186.** 50.034 (5m) of the statutes is amended to read:

20 50.034 (5m) PROVISION OF INFORMATION REQUIRED. Subject to sub. (5p), when a
21 residential care apartment complex first provides written material regarding the
22 residential care apartment complex to a prospective resident, the residential care
23 apartment complex shall also provide the prospective resident information specified
24 by the department concerning the services of a resource center or other entity under
25 s. 46.283, the family care benefit under s. 46.286, and the availability of a functional

1 screening and a financial and cost-sharing screening to determine the prospective
2 resident's eligibility for the family care benefit under s. 46.286 (1).

3 **SECTION 187.** 50.034 (5n) (intro.) of the statutes is amended to read:

4 50.034 (5n) REQUIRED REFERRAL. (intro.) Subject to sub. (5p), when a residential
5 care apartment complex first provides written material regarding the residential
6 care apartment complex to a prospective resident who is at least 65 years of age or
7 has developmental disability or a physical disability and whose disability or
8 condition is expected to last at least 90 days, the residential care apartment complex
9 shall refer the prospective resident to a resource center or other entity under s.
10 46.283, unless any of the following applies:

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

12 50.034 (5n) (a) For a person for whom a screening for functional eligibility
13 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
14 under this subsection need not include performance of an additional functional
15 screening under s. 46.283 (4) ~~(g)~~ (3) (o).

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

17 50.034 (5n) (d) For a person who seeks admission or is about to be admitted on
18 a private pay basis and who waives the requirement for a financial and cost-sharing
19 screening under s. 46.283 (4) ~~(g)~~ (3) (o), the referral under this subsection may not
20 include performance of a financial and cost-sharing screening under s. 46.283 (4) ~~(g)~~
21 (3) (o), unless the person is expected to become eligible for medical assistance within
22 6 months.

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

24 50.034 (5p) APPLICABILITY. Subsections (5m) and (5n) apply only if the secretary
25 has certified under s. 46.281 (3) that a resource center or other entity is available for

1 the residential care apartment complex and for specified groups of eligible
2 individuals that include those persons seeking admission to or the residents of the
3 residential care apartment complex.

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

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

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

12 50.035 (4m) PROVISION OF INFORMATION REQUIRED. Subject to sub. (4p), when a
13 community-based residential facility first provides written material regarding the
14 community-based residential facility to a prospective resident, the
15 community-based residential facility shall also provide the prospective resident
16 information specified by the department concerning the services of a resource center
17 or other entity under s. 46.283, the family care benefit under s. 46.286, and the
18 availability of a functional screening and a financial and cost-sharing screening to
19 determine the prospective resident's eligibility for the family care benefit under s.
20 46.286 (1).

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

22 50.035 (4n) REQUIRED REFERRAL. (intro.) When a community-based residential
23 facility first provides written information regarding the community-based
24 residential facility to a prospective resident who is at least 65 years of age or has
25 developmental disability or a physical disability and whose disability or condition is

1 expected to last at least 90 days, the community-based residential facility shall refer
2 the individual to a resource center or other entity under s. 46.283 or, if the secretary
3 has not certified under s. 46.281 (3) that a resource center or other entity is available
4 in the area of the community-based residential facility to serve individuals in an
5 eligibility group to which the prospective resident belongs, to the county department
6 that administers a program under ss. 46.27 or 46.277, unless any of the following
7 applies:

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

9 50.035 (4n) (a) For a person for whom a screening for functional eligibility
10 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
11 under this subsection need not include performance of an additional functional
12 screening under s. 46.283 ~~(4) (g)~~ (3) (o).

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

14 50.035 (4n) (d) For a person who seeks admission or is about to be admitted on
15 a private pay basis and who waives the requirement for a financial and cost-sharing
16 screening under s. 46.283 ~~(4) (g)~~ (3) (o), the referral under this subsection may not
17 include performance of a financial and cost-sharing screening under s. 46.283 ~~(4) (g)~~
18 (3) (o), unless the person is expected to become eligible for medical assistance within
19 6 months.

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

21 50.035 (4p) **APPLICABILITY.** Subsection (4m) applies only if the secretary has
22 certified under s. 46.281 (3) that a resource center or other entity is available for the
23 community-based residential facility and for specified groups of eligible individuals
24 that include those persons seeking admission to or the residents of the
25 community-based residential facility.

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

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

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

9 50.04 (2h) (a) (intro.) Subject to sub. (2i), a nursing home shall, within the time
10 period prescribed by the department by rule, refer to a resource center or other entity
11 under s. 46.283 a person who is seeking admission, who is at least 65 years of age or
12 has developmental disability or physical disability and whose disability or condition
13 is expected to last at least 90 days, unless any of the following applies:

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

15 50.04 (2h) (a) 1. For a person for whom a screening for functional eligibility
16 under s. 46.286 (1) (a) has been performed within the previous 6 months, the referral
17 under this paragraph need not include performance of an additional functional
18 screening under s. 46.283 ~~(4) (g)~~ (3) (o).

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

20 50.04 (2h) (a) 4. For a person who seeks admission or is about to be admitted
21 on a private pay basis and who waives the requirement for a financial and
22 cost-sharing screening under s. 46.283 ~~(4) (g)~~ (3) (o), the referral under this
23 subsection may not include performance of a financial and cost-sharing screening
24 under s. 46.283 ~~(4) (g)~~ (3) (o), unless the person is expected to become eligible for
25 medical assistance within 6 months.

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

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

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

7 50.04 (2m) (b) Paragraph (a) does not apply to those residents for whom the
8 secretary has certified under s. 46.281 (3) that a resource center or other entity is
9 available.

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

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

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

23 50.49 (6m) (b) A program specified in s. 46.2805 (1)-(a) (9m).

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

25 50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1)-(b) (4k).

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

2 51.06 (8) (b) 6. The extent of Medical Assistance provided to relocated or
3 diverted individuals that is in addition to Medical Assistance provided to the
4 individuals under s. 46.27 (11), 46.275, 46.277, or 46.278, as a under the family care
5 benefit under ss. program as defined in s. 46.2805 to 46.2895 (4m), or under any other
6 home-based or community-based program for which the department has received
7 a waiver under 42 USC 1396n (c).

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

9 51.22 (3) Whenever an admission is made through the department, the
10 department shall determine the need for inpatient care of the individual to be
11 admitted. Unless a state-operated facility is used, the department may only
12 authorize care in an inpatient facility which is operated by or under a purchase of
13 service contract with a county department under s. 51.42 or 51.437 or an inpatient
14 facility which is under a contractual agreement with the department. Except in the
15 case of state treatment facilities, the department shall reimburse the facility for the
16 actual cost of all authorized care and services from the appropriation under s. 20.435
17 ~~(7)~~ (5) (da). For collections made under the authority of s. 46.10 (16), moneys shall
18 be credited or remitted to the department no later than 60 days after the month in
19 which collections are made. Such collections are also subject to s. 46.036 or special
20 agreement. Collections made by the department under ss. 46.03 (18) and 46.10 shall
21 be deposited in the general fund.

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

23 51.42 (1) (b) *County liability.* The county board of supervisors except in
24 Milwaukee County, has the primary responsibility for the well-being, treatment and
25 care of the mentally ill, developmentally disabled, alcoholic and other drug

1 dependent citizens residing within its county and for ensuring that those individuals
2 in need of such emergency services found within its county receive immediate
3 emergency services. In Milwaukee County, the Milwaukee County mental health
4 board has the primary responsibility for the well-being, treatment and care of the
5 mentally ill, alcoholic, and other drug dependent citizens residing within Milwaukee
6 County and for ensuring that those individuals in need of such emergency services
7 found within Milwaukee County receive immediate emergency services. The county
8 board of supervisors of Milwaukee County has the primary responsibility for the
9 well-being, treatment, and care of the developmentally disabled citizens residing
10 within Milwaukee County, except where the responsibility is delegated explicitly
11 under this section to the Milwaukee County mental health board, and for ensuring
12 that developmentally disabled individuals in need of such emergency services found
13 within Milwaukee County receive immediate emergency services. This primary
14 responsibility is limited to the programs, services and resources that the county
15 board of supervisors, or, as applicable, the Milwaukee County mental health board,
16 is reasonably able to provide within the limits of available state and federal funds
17 and of county funds required to be appropriated to match state funds. County
18 liability for care and services purchased through or provided by a county department
19 of community programs established under this section shall be based upon the
20 client's county of residence except for emergency services for which liability shall be
21 placed with the county in which the individual is found. For the purpose of
22 establishing county liability, "emergency services" includes those services provided
23 under the authority of s. 55.05 (4), 2003 stats., or s. 55.06 (11) (a), 2003 stats., or s.
24 51.15, 51.45 (11) (a) or (b) or (12), 55.13, or 55.135 for not more than 72 hours.
25 Nothing in this paragraph prevents recovery of liability under s. 46.10 or any other

1 statute creating liability upon the individual receiving a service or any other
2 designated responsible party, or prevents reimbursement by the department of
3 health services for the actual cost of all care and services from the appropriation
4 under s. 20.435 ~~(7)~~ (5) (da), as provided in s. 51.22 (3).

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

6 51.42 (3) (ar) 17. If authorized under s. 46.283 (1) (a) ~~1~~, apply to the department
7 of health services to operate a resource center under s. 46.283 and, if the department
8 contracts with the county under s. 46.283 (2), operate the resource center.

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

10 51.42 (3) (ar) 18. If authorized under s. 46.284 (1) (a) ~~1~~, apply to the department
11 of health services to operate a care management organization under s. 46.284 and,
12 if the department contracts with the county under s. 46.284 (2), operate the care
13 management organization and, if appropriate, place funds in a risk reserve.

14 **SECTION 211.** 51.42 (3) (e) of the statutes is amended to read:

15 51.42 (3) (e) *Exchange of information.* Notwithstanding ss. 46.2895 (9), 48.78
16 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3)
17 (c), and 938.78 (2) (a), any subunit of a county department of community programs
18 or tribal agency acting under this section may exchange confidential information
19 about a client, without the informed consent of the client, with any other subunit of
20 the same county department of community programs or tribal agency, with a
21 resource center or other contracted entity under s. 46.283 (2), a care management
22 organization, or a long-term care district, or with any person providing services to
23 the client under a purchase of services contract with the county department of
24 community programs or tribal agency or with a resource center or other contracted
25 entity under s. 46.283 (2), care management organization, or long-term care district,

1 if necessary to enable an employee or service provider to perform his or her duties,
2 or to enable the county department of community programs or tribal agency to
3 coordinate the delivery of services to the client. Any agency releasing information
4 under this paragraph shall document that a request was received and what
5 information was provided.

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

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), or a care management
15 organization, ~~or a long-term care district~~, or with any person providing services to
16 the client under a purchase of services contract with the county department of
17 community programs or tribal agency or with a resource center or other contracted
18 entity under s. 46.283 (2), or care management organization, ~~or long-term care~~
19 ~~district~~, if necessary to enable an employee or service provider to perform his or her
20 duties, or to enable the county department of community programs or tribal agency
21 to coordinate the delivery of services to the client. Any agency releasing information
22 under this paragraph shall document that a request was received and what
23 information was provided.

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

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

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

5 51.437 (4m) (p) If authorized under s. 46.284 (1) (a) ~~1~~, apply to the department
6 of health services to operate a care management organization under s. 46.284 and,
7 if the department contracts with the county under s. 46.284 (2), operate the care
8 management organization and, if appropriate, place funds in a risk reserve.

9 **SECTION 215.** 51.437 (4r) (b) of the statutes is amended to read:

10 51.437 (4r) (b) Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83,
11 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a),
12 any subunit of a county department of developmental disabilities services or tribal
13 agency acting under this section may exchange confidential information about a
14 client, without the informed consent of the client, with any other subunit of the same
15 county department of developmental disabilities services or tribal agency, with a
16 resource center or other contracted entity under s. 46.283 (2), a care management
17 organization, or a long-term care district, or with any person providing services to
18 the client under a purchase of services contract with the county department of
19 developmental disabilities services or tribal agency or with a resource center or other
20 contracted entity under s. 46.283 (2), a care management organization, or a
21 long-term care district, if necessary to enable an employee or service provider to
22 perform his or her duties, or to enable the county department of developmental
23 disabilities services or tribal agency to coordinate the delivery of services to the
24 client. Any agency releasing information under this paragraph shall document that
25 a request was received and what information was provided.

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

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

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

21 66.0301 (1) (a) Except as provided in pars. (b) and (c), in this section
22 “municipality” means the state or any department or agency thereof, or any city,
23 village, town, county, school district, public library system, public inland lake
24 protection and rehabilitation district, sanitary district, farm drainage district,
25 metropolitan sewerage district, sewer utility district, solid waste management

SECTION 217

1 system created under s. 59.70 (2), local exposition district created under subch. II of
2 ch. 229, local professional baseball park district created under subch. III of ch. 229,
3 local professional football stadium district created under subch. IV of ch. 229, local
4 cultural arts district created under subch. V of ch. 229, local sports and
5 entertainment district created under subch. VI of ch. 229, ~~long-term care district~~
6 ~~under s. 46.2895~~, water utility district, mosquito control district, municipal electric
7 company, county or city transit commission, commission created by contract under
8 this section, taxation district, regional planning commission, housing authority
9 created under s. 66.1201, redevelopment authority created under s. 66.1333,
10 community development authority created under s. 66.1335, or city-county health
11 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.

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

14 66.0506 (1) In this section, “local governmental unit” means any city, village,
15 town, county, metropolitan sewerage district, ~~long-term care district~~, local cultural
16 arts district under subch. V of ch. 229, the University of Wisconsin System Authority,
17 or any other political subdivision of the state, or instrumentality of one or more
18 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.

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

20 66.0601 (1) (b) *Payments for abortions restricted.* No city, village, town,
21 ~~long-term care district under s. 46.2895~~ or agency or subdivision of a city, village or
22 town may authorize funds for or pay to a physician or surgeon or a hospital, clinic

1 or other medical facility for the performance of an abortion except those permitted
2 under and which are performed in accordance with s. 20.927.

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

4 66.0601 (1) (c) *Payments for abortion-related activity restricted.* No city,
5 village, town, ~~long-term care district under s. 46.2895~~ or agency or subdivision of a
6 city, village or town may authorize payment of funds for a grant, subsidy or other
7 funding involving a pregnancy program, project or service if s. 20.9275 (2) applies to
8 the pregnancy program, project or service.

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

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

11 69.30 (2) A financial institution, state agency, county department, Wisconsin
12 works agency, or service office ~~or long-term care district~~ or an employee of a financial
13 institution, state agency, county department, Wisconsin works agency, or service
14 office ~~or long-term care district~~ is not subject to s. 69.24 (1) (a) for copying a certified
15 copy of a vital record for use by the financial institution, state agency, county
16 department, Wisconsin works agency, or service office ~~or long-term care district~~,
17 including use under s. 45.04 (5), if the copy is marked “FOR ADMINISTRATIVE
18 USE”.

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

20 70.11 (2) MUNICIPAL PROPERTY AND PROPERTY OF CERTAIN DISTRICTS, EXCEPTION.
21 Property owned by any county, city, village, town, school district, technical college
22 district, public inland lake protection and rehabilitation district, metropolitan
23 sewerage district, municipal water district created under s. 198.22, joint local water
24 authority created under s. 66.0823, ~~long-term care district under s. 46.2895~~ or town
25 sanitary district; lands belonging to cities of any other state used for public parks;

1 land tax–deeded to any county or city before January 2; but any residence located
2 upon property owned by the county for park purposes that is rented out by the county
3 for a nonpark purpose shall not be exempt from taxation. Except as to land acquired
4 under s. 59.84 (2) (d), this exemption shall not apply to land conveyed after
5 August 17, 1961, to any such governmental unit or for its benefit while the grantor
6 or others for his or her benefit are permitted to occupy the land or part thereof in
7 consideration for the conveyance. Leasing the property exempt under this
8 subsection, regardless of the lessee and the use of the leasehold income, does not
9 render that property taxable.

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

11 71.26 (1) (b) *Political units.* Income received by the United States, the state
12 and all counties, cities, villages, towns, school districts, technical college districts,
13 joint local water authorities created under s. 66.0823, ~~long-term care districts under~~
14 ~~s. 46.2895~~ or other political units of this state.

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

16 101.01 (4) “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 226.** 102.01 (2) (d) of the statutes is amended to read:

22 102.01 (2) (d) “Municipality” includes a county, city, town, village, school
23 district, sewer district, drainage district and ~~long-term care district~~ and other public
24 or quasi–public corporations.

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

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

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

5 103.001 (6) “Employer” means any person, firm, corporation, state, county,
6 town, city, village, school district, sewer district, drainage district, ~~long-term care~~
7 ~~district~~ and other public or quasi-public corporations as well as any agent, manager,
8 representative or other person having control or custody of any employment, place
9 of employment or of any employee.

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

12 111.70 (1) (j) “Municipal employer” means any city, county, village, town,
13 metropolitan sewerage district, school district, ~~long-term care district~~, local cultural
14 arts district created under subch. V of ch. 229, the University of Wisconsin System
15 Authority, or any other political subdivision of the state, or instrumentality of one or
16 more political subdivisions of the state, that engages the services of an employee and
17 includes any person acting on behalf of a municipal employer within the scope of the
18 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.

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

20 **SECTION 231.** 600.03 (25) (a) 5. of the statutes is created to read:

21 600.03 (25) (a) 5. Services provided by a care management organization, as
22 defined in s. 46.2805 (1) (dm).

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

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

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

7 **SECTION 234.** Chapter 648 of the statutes is repealed.

8 **SECTION 235.** 985.01 (1g) of the statutes is amended to read:

9 985.01 (1g) “Governing body” has the meaning given in s. 345.05 (1) (b) and
10 ~~includes a long-term care district board under s. 46.2895.~~

11 **SECTION 236.** 985.01 (3) of the statutes is amended to read:

12 985.01 (3) “Municipality” has the meaning in s. 345.05 (1) (c) ~~and includes a~~
13 ~~long-term care district under s. 46.2895.~~

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

15 (1) CHANGES TO FAMILY CARE PROGRAM.

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

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

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

21 3. “Family care program” means the program under sections 46.2805 to
22 46.2895 of the statutes that provides the family care benefit as defined in section
23 46.2805 (4) of the statutes.

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

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

6 1. Administration by care management organizations of the family care
7 program statewide instead of by geographic region, unless the department allows the
8 care management organization a waiver to administer the family care benefit in a
9 specific geographic region.

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

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

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

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

20 6. Elimination of the insurance requirements for care management
21 organizations under chapter 648 of the statutes.

22 (c) *Family care in all counties.* The department shall request any approval or
23 submit any waiver request necessary to the federal department of health and human
24 services to administer the family care program in every county in the state. If the
25 federal department of health and human services does not disapprove the request,

1 the department shall ensure that the family care program is available to eligible
2 residents of every county in the state by January 1, 2017, or by a date specified by
3 the department, whichever is later. If the department specifies a later date than
4 January 1, 2017, it shall submit a notice of that date to the legislative reference
5 bureau for publication in the Wisconsin Administrative Register.

6 (d) *Waiver request not approved; saving provision.* If the federal department
7 of health and human services does not approve of any request or submission of waiver
8 request under paragraph (b) or (c) the department may administer that portion of
9 the family care program under the applicable provision of sections 46.2805 to
10 46.2895, 2013 stats.

11 (e) *Other long-term care programs discontinued.* If the federal department of
12 health and human services does not disapprove the request to administer the family
13 care program in every county in the state, the department may elect to discontinue
14 enrollment of participants in or administration of any of the programs under sections
15 46.271, 46.275, 46.277, 46.278, or 46.2785 of the statutes at any time determined by
16 the department that is after the date that the family care program is available to
17 eligible residents of every county in the state under paragraph (c).

18 (2) **MERGER OF DIVISIONS INTO MEDICAID SERVICES DIVISION.** Before March 31,
19 2016, the department of health services shall submit to the state budget office in the
20 department of administration a report of the final organization of the merger of the
21 division of the department of health services relating to long-term care and the
22 division of the department of health services relating to health care access and
23 accountability into a single division of the department of health services relating to
24 Medicaid services.

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

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

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

6 (b) The unencumbered balances of the appropriations to the department of
7 health services under section 20.435 (7) (gc) and (h) of the statutes, as affected by this
8 act, are transferred to the appropriation account under section 20.435 (4) (hp) of the
9 statutes, as affected by this act, on the effective date of this paragraph.

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

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

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

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

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

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

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

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

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

18 (1) FAMILY CARE CHANGES; LONG-TERM CARE DISTRICTS; INSURANCE REGULATION. The
19 treatment of sections 13.94 (4) (a) 1. (by SECTION 2) and (b), 17.15 (5), 17.27 (3m),
20 19.82 (1), 20.145 (1) (g) (intro.) and 3., 20.435 (4) (jt) and (kv), 20.927 (1m) (by SECTION
21 45), 20.9275 (1) (b), 25.50 (1) (d) (by SECTION 47), 40.02 (28) and (36), 46.21 (2m) (c)
22 (by SECTION 52), 46.215 (1m) (by SECTION 56) and (1p), 46.22 (1) (dm) (by SECTION 61)
23 and (dp), 46.23 (3) (e) (by SECTION 64) and (ed), 46.27 (7) (fr) 3. c., 46.2805 (intro.), (7r),
24 and (7u218), 46.281 (1d), 46.283 (2) (by SECTION 113) and (7) (b) (by SECTION 130),
25 46.284 (2) (bm) (by SECTION 135) and (d), (3m), (5) (d) 4., and (7) (b), 46.285 (intro.),

1 (1), and (2), 48.47 (7g), 51.42 (3) (e) (by SECTION 212), 51.437 (4r) (b) (by SECTION 216),
2 66.0301 (1) (a) (by SECTION 217), 66.0506 (1) (by SECTION 218), 66.0601 (1) (b) and (c),
3 69.30 (1) (bd) and (2), 70.11 (2), 71.26 (1) (b), 101.01 (4), 102.01 (2) (d), 102.04 (1) (a),
4 103.001 (6), 111.70 (1) (j) (by SECTION 229), 600.01 (1) (b) 10., 632.745 (6) (a) 2m., and
5 985.01 (1g) and (3) and chapter 648 of the statutes, the repeal of section 46.2895 of
6 the statutes, and the amendment of section 46.2805 (4m) of the statutes take effect
7 on July 1, 2018.

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

13 (END)