

## State of Misconsin LEGISLATIVE REFERENCE BUREAU

# RESEARCH APPENDIX PLEASE DO NOT REMOVE FROM DRAFTING FILE

Date Transfer Requested: 01/28/2015

(Per: CMH & TJD)

## © Compile Draft – Appendix A ... Part I

**Appendix A** ■ The 2015 drafting file for LRB-0972

**Appendix B** <sup>□</sup> The <u>2015</u> drafting file for LRB–1035

**Appendix C** <sup>™</sup> The <u>2015</u> drafting file for LRB–1130

**Appendix D** ™ The 2015 drafting file for LRB-1255

has been copied/added to the drafting file for

**2015** LRB-1461

### 2015 DRAFTING REQUEST

Bill

Received: 12/17/2014		R	eceived By:	tdodge			
Wanted	Wanted: As time permits		Sa	ame as LRB:			
For:	or: Administration-Budget 6-2214			В	y/Representing:	Dombrowski	
May C	ontact:			D	rafter:	tdodge	
Subject: Medical Assistance			A	ddl. Drafters:			
				E	xtra Copies:		
Reque	t via email: ster's email: n copy (CC) to:	sarah.	a.dodge@leg walkenhorst tlanguage@v	barber@legi	is.wisconsin.gov		·
Pre To	opic:			-		:	
DOA:	Dombrowsl	ki, BB0315 -					
Topic	:						
Statew	vide model for	Family Care an	d other chang	es to Family	Care		
Instru	ections:						
See at	tached						
Draft	ing History:					-	
Vers.	<u>Drafted</u>	Reviewed	Typed	Proofed	Submitted	Jacketed	Required
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/P1	tdodge 1/19/2015		·		lparisi 1/9/2015		State S&L
/P2	tdodge	csicilia	jmurphy		sbasford		· State

#### **LRB-0972** 1/27/2015 **8**:16:53 PM Page 2

Vers.	<u>Drafted</u> 1/26/2015	Reviewed 1/22/2015	<u>Typed</u> 1/22/2015	Proofed	<u>Submitted</u> 1/22/2015	Jacketed	Required S&L
/P3	tdodge 1/27/2015	kfollett 1/26/2015	jmurphy 1/26/2015		mbarman 1/26/2015		State S&L
/P4	tdodge 1/27/2015	jdyer 1/27/2015	jfrantze 1/27/2015		srose 1/27/2015		State S&L
/P5		wjackson 1/27/2015	jmurphy 1/27/2015		srose 1/27/2015		State S&L

FE Sent For:

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#### 2015 DRAFTING REQUEST

Bill								
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For:	Administration-Budget 6-2214			F	By/Representing:	Dombrowski		
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Instru	ections:							
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#### **LRB-0972** 1/27/2015 6:38:14 PM Page 2

Vers.	<u>Drafted</u> 1/26/2015	<u>Reviewed</u> 1/22/2015	Typed 1/22/2015	Proofed	<u>Submitted</u> 1/22/2015	<u>Jacketed</u>	Required S&L
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## 2015 DRAFTING REQUEST

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## LRB-0972 1/26/2015 3:45:06 PM Page 2

Vers.	<u>Drafted</u> 1/26/2015	<u>Reviewed</u> 1/22/2015	<u>Typed</u> 1/22/2015	<u>Proofed</u>	<u>Submitted</u> 1/22/2015	<u>Jacketed</u>	Required S&L
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## 2015 DRAFTING REQUEST

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#### 2015 DRAFTING REQUEST

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Subject: Medical Assistance				Addl. Drafters:				
						Extra Copies:		
Submit via email:  Requester's email: Carbon copy (CC) to:  tamara.dodge@legis.wisconsin.gov sarah.walkenhorstbarber@legis.wisconsin.gov sbostatlanguage@webapps.wi.gov								
Pre T	_	browski, BB0	)315 -					
Topic Statev		el for Family	Care and	other change	es to Famil	y Care		
Instru	uctions:							
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lparisi 1/9/2015

### 2015 DRAFTING REQUEST

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For:	Administration-Budget 6-2214			By/Representing:	Dombrowski		
May Contact:				Drafter:	tdodge		
Subject: Medical Assistance				Addl. Drafters:			
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Submit via er Requester's er Carbon copy	mail:	YES tamara.dodge@ sarah.walkenhor sbostatlanguage	rstbarber@le	egis.wisconsin.gov			
Pre Topic:							
DOA:Doi	nbrowski, BB0	315 -					
Topic:							
Statewide mo	del for Family	Care and other cha	nges to Famil	y Care			
Instructions:							
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#### Dodge, Tamara

From:

Hanaman, Cathlene

Sent: To:

Wednesday, December 17, 2014 1:20 PM Dodge, Tamara; Walkenhorst Barber, Sarah

Subject:

FW: Statutory Language Drafting Request - BB0315

Attachments:

FC Intent.docx

From: Cynthia.Dombrowski@Wisconsin.gov [mailto:Cynthia.Dombrowski@Wisconsin.gov]

Sent: Wednesday, December 17, 2014 12:01 PM

To: Hanaman, Cathlene

Cc: Steinmetz, Jana D - DOA; Dombrowski, Cynthia A - DOA; Connor, Christopher B - DOA

Subject: Statutory Language Drafting Request - BB0315

Biennial Budget: 2015-17

Topic: Family Care

Tracking Code: BB0315

SBO Team: HSI

SBO Analyst: Dombrowski, Cynthia A - DOA

Phone: (608) 266-2214

E-mail: Cynthia.Dombrowski@Wisconsin.gov

Agency Acronym: DHS

Agency Number: 435

Priority: High

Intent:

Transition Family Care to a new model in which MCOs operating statewide would offer long-term care, primary care, and acute care services to members. The state would sunset the IRIS program and instead allow members to self-direct long term care services within the MCO.

See attached for detailed instruction.

Attachments: True

Please send completed drafts to SBOStatlanguage@webapps.wi.gov

Intent: Transition Family Care to a new model in which MCOs operating statewide would offer long-term care, primary care, and acute care services to members. The state would sunset the IRIS program and instead allow members to self-direct long term care services within the MCO.

Please make the following changes:

Amend s. 46.2895 to prohibit any new long-term care districts from forming and require all existing districts to dissolve per current law procedures under 46.2895(12) by June 30, 2017, or later date specified by the Department of Health Services. Sunset 46.2895 by June 30, 2018.

Revise the definition of Family Care Benefit under 46.2805(4) to allow the Department of Health Services to decide what Medicaid services are included in the managed care benefit.

Under current law, MCO's are selected through competitive procurement. Instead allow the Department of Health Services to certify any MCO that meets the requirements under 46.284 (3)(a) and (b) and any other applicable requirements under the statutes and administrative rules. Further, unless waived by the Department of Health Services, MCOs must provide services in all areas of the state and serve all eligible individuals who choose to enroll in the MCO.

Amend the statutes that members may change MCOs only during an open enrollment period, which will be determined by the Department of Health Services, unless the member meets an exception specified by the Department of Health Services.

Require Family Care implementation in all counties in Wisconsin by January 2016, or a later date specified by the Department of Health Services. Eliminate the Joint Committee on Finance approval process with the effective date of the budget.

Sunset the current law insurance regulations for Family Care requiring the establishment of a reserve fund and other provisions effective June 30, 2018.

All of these changes are conditioned on federal approvals of changes to the Family Care waiver.



## State of Misconsin 2015 - 2016 LEGISLATURE



In: 1/2/15

DOA:.....Dombrowski, BB0315 – Statewide model for Family Care and other changes to Family Care

#### FOR 2015-2017 BUDGET — NOT READY FOR INTRODUCTION

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AN ACT ...; relating to: the budget.

#### Analysis by the Legislative Reference Bureau

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

## The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

**SECTION 1.** 13.94 (4) (a) 1. of the statutes is amended to read:

13.94 (4) (a) 1. Every state department, board, examining board, affiliated credentialing board, commission, independent agency, council or office in the executive branch of state government; all bodies created by the legislature in the legislative or judicial branch of state government; any public body corporate and politic created by the legislature including specifically the Fox River Navigational

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System Authority, the Lower Fox River Remediation Authority, the Wisconsin Aerospace Authority, the Wisconsin Economic Development Corporation, a professional baseball park district, a local professional football stadium district, and a local cultural arts district and a long-term care district under s. 46.2895; every Wisconsin works agency under subch. III of ch. 49; every provider of medical assistance under subch. IV of ch. 49; technical college district boards; every county department under s. 51.42 or 51.437; every nonprofit corporation or cooperative or unincorporated cooperative association to which moneys are specifically appropriated by state law; and every corporation, institution, association or other organization which receives more than 50% of its annual budget from appropriations made by state law, including subgrantee or subcontractor recipients of such funds.

History: 1971 c. 270 s. 104; 1971 c. 307; 1973 c. 334; 1975 c. 39, 199, 224, 421; 1977 c. 26, 29; 1977 c. 196 s. 131; 1977 c. 418; 1979 c. 34, 314, 324; 1981 c. 20, 335; 1983 a. 27, 36, 96, 381; 1985 a. 29, 57, 120, 176; 1987 a. 27, 119, 186, 320, 328, 354, 399, 403; 1989 a. 31, 122; 1991 a. 39, 269, 316; 1993 a. 16, 27, 107, 263, 399, 491; 1995 a. 27 ss. 43g to 47n, 9116 (5); 1995 a. 56, 216, 225, 274, 289; 1997 a. 27, 252; 1999 a. 9, 65, 105, 167, 197; 2001 a. 16, 105; 2003 a. 33, 111; 2005 a. 25, 74, 142, 335, 441; 2007 a. 1, 20, 96, 125, 126; 2009 a. 2, 28; 2011 a. 7, 10, 32, 166; 2013 a. 8, 20, 166, 203, 332.

**Section 2.** 13.94 (4) (b) of the statutes is amended to read:

13.94 (4) (b) In performing audits of long—term care districts under s. 46.2895, Wisconsin works agencies under subch. III of ch. 49, providers of medical assistance under subch. IV of ch. 49, corporations, institutions, associations, or other organizations, and their subgrantees or subcontractors, the legislative audit bureau shall audit only the records and operations of such providers and organizations which pertain to the receipt, disbursement or other handling of appropriations made by state law.

History: 1971 c. 270 s. 104; 1971 c. 307; 1973 c. 334; 1975 c. 39, 199, 224, 421; 1977 c. 26, 29; 1977 c. 196 s. 131; 1977 c. 418; 1979 c. 34, 314, 324; 1981 c. 20, 335; 1983 a. 27, 36, 96, 381; 1985 a. 29, 57, 120, 176; 1987 a. 27, 119, 186, 320, 328, 354, 399, 403; 1989 a. 31, 122; 1991 a. 39, 269, 316; 1993 a. 16, 27, 107, 263, 399, 491; 1995 a. 27 ss. 43g to 47n, 9116 (5); 1995 a. 56, 216, 225, 274, 289; 1997 a. 27, 252; 1999 a. 9, 65, 105, 167, 197; 2001 a. 16, 105; 2003 a. 33, 111; 2005 a. 25, 74, 142, 335, 441; 2007 a. 1, 20, 96, 125, 126; 2009 a. 2, 28; 2011 a. 7, 10, 32, 166; 2013 a. 8, 20, 166, 203, 332.

Section 3. 17.15 (5) of the statutes is repealed.

SECTION 4. 17.27 (3m) of the statutes is repealed.

22 Section 5. 19.82 (1) of the statutes is amended to read:

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19.82 (1) "Governmental body" means a state or local agency, board, commission, committee, council, department or public body corporate and politic created by constitution, statute, ordinance, rule or order; a governmental or quasi-governmental corporation except for the Bradley center sports and entertainment corporation; a local exposition district under subch. II of ch. 229; a long-term care district under s. 46.2895; or a formally constituted subunit of any of the foregoing, but excludes any such body or committee or subunit of such body which is formed for or meeting for the purpose of collective bargaining under subch. I, IV, or V of ch. 111.

History: 1975 c. 426; 1977 c. 364, 447; 1985 a. 26, 29, 332; 1987 a. 305; 1993 a. 215, 263, 456, 491; 1995 a. 27, 185; 1997 a. 79; 1999 a. 9; 2007 a. 20, 96; 2009 a. 28; 2011 10

**Section 6.** 20.145 (1) (g) (intro.) of the statutes is amended to read:

20.145 (1) (g) General program operations. (intro.) The amounts in the schedule for general program operations, including organizational support services and oversight of care management organizations, and for transferring to the appropriation account under s. 20.435 (4) (kv) the amount allocated by the commissioner of insurance. Notwithstanding s. 20.001 (3) (a), at the end of each fiscal year, the unencumbered balance in this appropriation account that exceeds 10 percent of that fiscal year's expenditure under this appropriation shall lapse to the

History: 1971 c. 40 s. 93; 1971 c. 125 ss. 51, 52, 53, 54, 55, 522 (1); 1973 c. 117, 333, 336; 1975 c. 37, 39; 1975 c. 147 s. 54; 1975 c. 372 s. 41; 1977 c. 29, 418; 1979 c. 34 ss. 121 to 127, 2102 (26) (a); 1979 c. 109 s. 16; 1979 c. 221, 313; 1981 c. 20 ss. 142m to 145, 2202 (26) (b); 1983 a. 27, 120; 1985 a. 29, 340; 1987 a. 27; 1989 a. 187; 1991 a. 39, 315; 1993 a. 16; 1995 a. 10, 27, 463; 1997 a. 27, 35, 227, 252; 2001 a. 16; 2003 a. 111; 2005 a. 74; 2007 a. 20; 2009 a. 28; 2011 a. 32; 2013 a. 20, 116.

general fund. All of the following shall be credited to this appropriation account:

SECTION 7. 20.145 (1) (g) 3. of the statutes is repealed.

**Section 8.** 20.435 (4) (b) of the statutes is amended to read:

20.435 (4) (b) Medical Assistance program benefits. Biennially, the amounts in the schedule to provide a portion of the state share of Medical Assistance program benefits administered under subch. IV of ch. 49, for a portion of the Badger Care

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health care program under s. 49.665, to provide a portion of the Medical Assistance program benefits administered under subch. IV of ch. 49 that are not also provided under par. (o), to fund the pilot project under s. 46.27 (9) and (10), to provide a portion of the facility payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund services provided by resource centers under s. 46.283, for services under the family care benefit program under s. 46.284 (5), for assisting victims of diseases, as provided in ss. 49.68, 49.683, and 49.685, for distributing grants under s. 146.64, and for reduction of any operating deficits as specified in 2005 Wisconsin Act 15, section 3. Notwithstanding s. 20.002 (1), the department may transfer from this appropriation account to the appropriation account under sub. (5) (kc) funds in the amount of and for the purposes specified in s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or deposit into this appropriation account and may transfer between fiscal years funds that it transfers from the appropriation account under sub. (5) (kc) for the purposes specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the department may transfer from this appropriation account to the appropriation account under sub. (7) (bd) funds in the amount and for the purposes specified in s. 49.45 (6v).

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 20 ss. 106; 1977 c. 213, 233, 337; 1977 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 3565, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 395, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 335 s. 6, 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 535 s. 13, 259; 1985 a. 102; 1987 a. 11, 13, 17 to 37; 1989 a. 162 ss. 13, 259; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 313; 1987 a. 513, 327 ss. 316 ss. 13, 259; 1989 a. 102; 1989 a. 102; 1987 a. 11, 13, 17 to 37; 1989 a. 102; 1987 a. 17, 1989 a. 103; 1995 a. 27, 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 124, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 9, 103, 103; 2003 a. 313, 139, 186, 318, 320, 326, 237; 2005 a. 15, 222; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 222, 246; 38, 406, 434; 2007 a. 20 ss. 331 to 422, 9121 (6) (a); 2007 a. 39, 88, 107, 111, 130; 2009 a. 2, 15; 2009 a. 28 ss. 325 to 470, 485, 488, 490; 2009 a. 76, 180, 190, 219, 274, 276, 279, 318, 334; 2011 a. 32, 70, 257; 2013 a. 20, 92; 2013 a. 116 s. 31; 2013 a. 126, 127, 121, 131, 137; 2013 a. 168 s. 21; 2013 a. 168 s. 21; 2013 a. 165 s. 202 (201) a. 166 s.

\*\*\*\*NOTE: I changed "family care benefit" to "family care program" in this and other DHS appropriations as seems to be a more appropriate reference in the context of the appropriation. Since the statutory reference is actually to the care management organization statute, it would be more appropriate to refer to services provided by care management organizations under s. 46.284 (5) instead of the family care program. Please advise if you would like me to change the language.

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1 20.435 (4) (g) Family care benefit; cost sharing. All moneys received from client 2 cost-sharing requirements under s. 46,286 (2) to be expended for the provision of 3 services under the family care benefit program under s. 46.284 (5).

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 20 ss. 106; 1977 c. 213, 233, 327; 1979 c. 111, 175, 177; 1979 c. 25; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 3566, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 535 ss. 13, 259; 1989 a. 102; 1995 a. 216 ss. 13, 259; 1989 a. 102; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 221, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 15, 222; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 20 ss. 331 to 422, 9121 (6) (a); 2007 a. 39, 88, 107, 111, 130; 2009 a. 2, 15; 2009 a. 28 ss. 325 to 470, 485, 488, 490; 2009 a. 76, 180, 190, 219, 274, 276, 279, 318, 334; 2011 a. 32, 70; 2013 a. 116 s. 31; 2013 a. 126, 127, 129, 131, 132, 137; 2013 a. 166 s. 77; 2013 a. 166 s. 21; 2013 a. 165 s. 21; 2013 a. 16 s. 31; 2013 a. 16 s. 31; 2013 a. 16 s. 31; 2013 a. 16 s. 21; 2013 a. 16 s. 2

**Section 10.** 20.435 (4) (gm) of the statutes is amended to read:

20.435 (4) (gm) Medical assistance; provider refunds and collections. All moneys received from provider refunds, third party liability payments, drug rebates, audit recoveries, and other collections related to expenditures made from pars. (b), (jz), and (w), except for those moneys deposited in the appropriation accounts under par. (im) or (in) regardless of the fiscal year in which the expenditure from par. (b), (jz), or (w) is made, to provide a portion of the state share of Medical Assistance program benefits administered under subch. IV of ch. 49; to provide a portion of the Badger Care health care program under s. 49.665; to provide a portion of the Medical Assistance program benefits administered under subch. IV of ch. 49 that are not also provided under par. (o); to fund the pilot project under s. 46.27 (9) and (10); to fund services provided by resource centers under s. 46.283; to fund services under the family care benefit program under s. 46.284 (5); and to assist victims of diseases, as provided in ss. 49.68, 49.683, and 49.685.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 42, 92; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 20 s. 106; 1977 c. 213, 233, 327; 1977 c. 334 s. 101; 1977 c. 481 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 3565, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186 ; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2020 (20); 1983 a. 192, 199, 245; 1983 a. 335 s. 6; 1983 a. 363, 398, 410 447; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 313, 322; 1993 a. 16, 27, 69, 89, 99, 168, 183, 377, 374, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 96in; 1926 (19); 1995 a. 27 ss. 295 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 222, 264, 388, 406, 434; 2007 a. 20 ss. 331 to 422, 912 (6) (a); 2007 a. 39, 88, 107, 111, 130; 2009 a. 2, 15; 2009 a. 28 ss. 325 to 470, 485, 488, 490; 2009 a. 76, 180, 190, 190, 219, 274, 276, 279, 318, 334; 2011 a. 32, 70, 257; 2013 a. 116 s. 31; 2013 a. 126, 127, 129, 131, 132, 137; 2013 a. 166 s. 77; 2013 a. 168 s. 21; 2013 a. 195, 203, 246; s. 13.92 (2) (

**SECTION 11.** 20.435 (4) (jt) of the statutes is repealed.

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Section 12. 20.435 (4) (kv) of the statutes is repealed.

**Section 13.** 20.435 (7) (b) of the statutes is amended to read:

20.435 (7) (b) Community aids and Medical Assistance payments. The amounts in the schedule for human services under s. 46.40, to fund services provided by resource centers under s. 46.283 (5), for services under the family care benefit program under s. 46.284 (5), for Medical Assistance payment adjustments under s. 49.45 (52) (a) for services described in s. 49.45 (52) (a) 1., for Medical Assistance payments under s. 49.45 (6tw), and for Medical Assistance payments under s. 49.45 (53) for services described in s. 49.45 (53) that are provided before January 1, 2012. Social services disbursements under s. 46.03 (20) (b) may be made from this appropriation. Refunds received relating to payments made under s. 46.03 (20) (b) for the provision of services for which moneys are appropriated under this paragraph shall be returned to this appropriation. Notwithstanding ss. 20,001 (3) (a) and 20.002 (1), the department of health services may transfer funds between fiscal years under this paragraph. The department shall deposit into this appropriation funds it recovers under ss. 46.495 (2) (b) and 51.423 (15), from prior year audit adjustments including those resulting from audits of services under s. 46.26, 1993 stats., or s. 46.27. Except for amounts authorized to be carried forward under s. 46.45, all funds recovered under ss. 46.495 (2) (b) and 51.423 (15) and all funds allocated under s. 46.40 and not spent or encumbered by December 31 of each year shall lapse to the general fund on the succeeding January 1 unless carried forward to the next calendar year by the joint committee on finance.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 20 ss. 106; 1977 c. 213, 233, 337; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 334, 48; 1979 c. 102 s. 327; 1979 c. 111, 175, 1779; c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 353, 398, 410, 427; 1983 a. 455 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 102; 1898 a. 107 ss. 11, 13, 17 to 37; 1989 a. 102, 122, 173, 1920, 22, 318, 336, 359; 1991 a. 6, 39; 189, 269, 275, 290, 315, 322; 1993 a. 16, 237, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16,

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69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 15, 22; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 20 ss. 331 to 422, 9121 (6) (a); 2007 a. 39, 88, 107, 111, 130; 2009 a. 2, 15; 2009 a. 28 ss. 325 to 470, 485, 488, 490; 2009 a. 76, 180, 190, 219, 274, 276, 279, 318, 334; 2011 a. 32, 70, 257; 2013 a. 20, 92; 2013 a. 116 s. 31; 2013 a. 126, 127, 129, 131, 132, 137; 2013 a. 166 s. 77; 2013 a. 168 s. 21; 2013 a. 195, 203, 246; s. 13.92 (2) (i). SECTION 14. 20.435 (7) (bd) of the statutes is amended to read:

20.435 (7) (bd) Long-term care programs. The amounts in the schedule for assessments, case planning, services, administration and risk reserve escrow accounts under s. 46.27, for pilot projects under s. 46.271 (1), to fund services provided by resource centers under s. 46.283 (5), for services under the family care benefit program under s. 46.284 (5), for services and supports under s. 46.2803 (2), and for the payment of premiums under s. 49.472 (5). If the department transfers funds to this appropriation from the appropriation account under sub. (4) (b), the amounts in the schedule for the fiscal year for which the transfer is made are increased by the amount of the transfer for the purposes specified in s. 49.45 (6v). Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department may under this paragraph transfer moneys between fiscal years. Except for moneys authorized for transfer under this appropriation or under s. 46.27 (7) (fm) or (g), all moneys under this appropriation that are allocated under s. 46.27 and are not spent or encumbered by counties or by the department by December 31 of each year shall lapse to the general fund on the succeeding January 1 unless transferred to the next calendar year by the joint committee on finance.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 245; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 21; 1975 c. 42 0 ss. 1, 2 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 3566, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 335 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 35, 56 ss. 13, 259; 1989 a. 102; 1989 a. 107; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107; 1989 a. 57, 1989 a. 103; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1987 a. 413; 1989 a. 31, 53; 1986 a. 313; 1986 a. 313; 198, 186; 1987 a. 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961; 1916; 1916; 1926 (19); 1995 a. 77, 98; 1995 a. 26 ss. 26, 276; 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 221, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 103; 2003 a. 33, 139, 186, 318, 320, 326, 327; 2005 a. 15, 322; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 39, 88, 107, 111, 130; 2009 a. 28 ss. 325 to 470, 485, 488, 490; 2009 a. 76, 180, 190, 219, 274, 276, 279, 318, 334; 2011 a. 32, 70, 257; 2013 a. 1

**Section 15.** 20.435 (7) (g) of the statutes is amended to read:

20.435 (7) (g) Long-term care; county contributions. All moneys received from counties as contributions to the family care program under s. 46.2805 to 46.2895 as defined in s. 46.2805 (4m), the program of all-inclusive care for the elderly or Pace

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1	program described under defined in s. 46.2805 (1) (a) (9m), and the Wisconsin Family
2	Care Partnership Program described under s. 46.2805 (1) (b) (4k), to fund services
3	under the family care benefit program under s. 46.284 (5) and services under the
1	Pace and Wisconsin Family Care Partnership programs

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 20 ss. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 153, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 3566, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 447; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538 ss. 1, 359; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 33, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56; ss. 13, 259; 1989 a. 102; 1989 a. 107; ss. 11, 13, 17 to 37; 1989 a. 102, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39; 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 669; 1997 a. 35, 105, 221, 237, 280, 293; 1999 a. 5, 9, 32, 52, 84, 103, 109, 113, 133, 185, 186; 2001 a. 16, 69, 103, 105; 2003 a. 33, 139, 186, 318, 320, 326, 237; 2005 a. 15, 22; 2005 a. 25 ss. 299 to 331, 2498 to 2500, 2510; 2005 a. 74, 107, 199, 228, 264, 388, 406, 434; 2007 a. 30, 88, 310; 2013 a. 20, 92; 2013 a. 216 ss. 21; 2013 a. 126, 217, 191, 131, 132, 137; 2013 a. 209, 202; 2013 a. 116 s. 31; 2013 a. 126, 217, 129, 131, 132, 137; 2013 a. 209; 2013 a. 209; 202 (10) a. 209; 27 (1m) of the statutes is amended to read:

Section 16. 20.927 (1m) of the statutes is amended to read:

20.927 (1m) Except as provided under subs. (2) and (3), no funds of this state or of any county, city, village, or town or long-term care district under s. 46.2895 or of any subdivision or agency of this state, including an authority created in ch. 233, or of any subdivision or agency of any county, city, village or town and no federal funds passing through the state treasury shall be authorized for or paid to a physician or surgeon or a hospital, clinic or other medical facility for the performance of an abortion.

SECTION 17. 20.9275 (1) (b) of the statutes is amended to read:

20.9275 (1) (b) "Local governmental unit" means a city, village, town, or county or long-term care district under s. 46.2895 or an agency or subdivision of a city, village, town, or county.

History: 1997 a. 27, 237; 1999 a. 9; 2003 a. 33; 2007 a. 20 **Section 18.** 25.50 (1) (d) of the statutes is amended to read:

25.50 (1) (d) "Local government" means any county, town, village, city, power district, sewerage district, drainage district, town sanitary district, public inland lake protection and rehabilitation district, local professional baseball park district created under subch. III of ch. 229, long-term care district under s. 46.2895, local

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professional football stadium district created under subch. IV of ch. 229, local
cultural arts district created under subch. V of ch. 229, public library system, school
district or technical college district in this state, any commission, committee, board
or officer of any governmental subdivision of this state, any court of this state, other
than the court of appeals or the supreme court, or any authority created under s.
114.01.001.00.000.00

6 114.61, 231.02, 233.02, or 234.02.

NOTE: NOTE: Par. (d) is shown as amended eff. 1-1-15 by 2013 Wis. Act 20. Prior to 1-1-15 it reads: NOTE:

(d) "Local government" means any county, town, village, city, power district, sewerage district, drainage district, town sanitary district, public inland lake professional perbalilitation district, local professional baseball park district created under subch. III of ch. 229 long-term care district under s. 46.2895, local professional befolial stadium district reated under subch. IV of ch. 229 long-term care district under s. 46.2895, local professional befolial stadium district reated under subch. V of ch. 229, public library system, school district or fechnical college district in this state, any commission, committee, four of original subdivision of this state, any court of this state, other than the court of appeals or the supreme court, or any authority created under s. 114.61, 149.41, 231.02, 233.02 or 234.02.

History: 1975 c. 164; 1977 c. 29, 187; 1979 c. 34 s. 2102 (46) (a); 1979 c. 175 s. 53; 1981 c. 20, 93; 1983 a. 27 s. 2202 (45), (49); 1985 a. 29 s. 3202 (46); 1987 a. 27; 1989 a. 31, 159, 336; 1991 a. 33, 39; 1993 a. 16, 399; 1995 a. 27, 56, 274; 1999 a. 9, 65, 83, 167; 2001 a. 38; 2005 a. 25, 335; 2007 a. 20; 2011 a. 32; 2013 a. 20.

SECTION 19. 40.02 (28) of the statutes is amended to read:

40.02 (28) "Employer" means the state, including each state agency, any county, city, village, town, school district, other governmental unit or instrumentality of 2 or more units of government now existing or hereafter created within the state, any federated public library system established under s. 43.19 whose territory lies within a single county with a population of 500,000 or more, and a local exposition district created under subch. II of ch. 229, and a long-term care district created under s. 46.2895, except as provided under ss. 40.51 (7) and 40.61 (3). "Employer" does not include a local cultural arts district created under subch. V of ch. 229. Each employer shall be a separate legal jurisdiction for OASDHI purposes.

History: 1981 c. 96, 187, 250, 274, 386; 1983 a. 9, 27; 1983 a. 81 s. 11; 1983 a. 83 s. 20; 1983 a. 106, 140; 1983 a. 141 ss. 1 to 3, 20; 1983 a. 191 ss. 1, 6; 1983 a. 192 s. 304; 1983 a. 255 s. 6; 1983 a. 275, 290, 368; 1983 a. 435 s. 7; 1985 a. 29, 225; 1985 a. 332 ss. 52, 251 (1); 1987 a. 27, 62, 83, 107, 309, 340, 356, 363, 372, 399; 1987 a. 403 ss. 43 to 45, 256; 1989 a. 13, 14, 31; 1989 a. 56 s. 259; 1989 a. 166, 182, 189, 218, 230, 240, 323, 327, 336, 357, 359; 1991 a. 32, 39, 113, 152, 229, 269, 315; 1993 a. 16, 263, 383, 490, 491; 1995 a. 27, ss. 1946 to 1953, 9130 (4); 1995 a. 21, 382, 383, 490, 491; 1995 a. 27, ss. 1946 to 1953, 9130 (4); 1995 a. 81, 88, 89, 216, 240, 302, 381, 417; 1997 a. 3, 27, 39, 69, 110, 162, 237, 238; 1999 a. 9, 11, 42, 63, 65, 83; 2001 a. 16, 38, 103, 104, 109; 2003 a. 33; 2005 a. 153, 335; 2007 a. 20, 131, 226; 2009 a. 15, 28; 2011 a. 7, 10, 32, 116, 229; 2013 a. 20 ss. 699 to 709c, 2365m, 9448; 2013 a. 168 s. 21; 2013 a. 214

**Section 20.** 40.02 (36) of the statutes is amended to read:

40.02 (36) "Governing body" means the legislature or the head of each state agency with respect to employees of that agency for the state, the common council in cities, the village board in villages, the town board in towns, the county board in

counties, the school board in school districts, or the board, commission or other governing body having the final authority for any other unit of government, for any agency or instrumentality of 2 or more units of government, for any federated public library system established under s. 43.19 whose territory lies within a single county with a population of 500,000 or more, or for a local exposition district created under subch. II of ch. 229 or for a long—term care district created under s. 46.2895, but does not include a local cultural arts district created under subch. V of ch. 229.

History: 1981 c. 96, 187, 250, 274, 386; 1983 a. 9, 27; 1983 a. 81 s. 11; 1983 a. 83 s. 20; 1983 a. 106, 140; 1983 a. 141 ss. 1 to 3, 20; 1983 a. 191 ss. 1, 6; 1983 a. 192 s. 304; 1983 a. 255 s. 6; 1983 a. 275, 290, 368; 1983 a. 435 s. 7; 1985 a. 29, 225; 1985 a. 332 ss. 52, 251 (1); 1987 a. 27, 62, 83, 107, 309, 340, 356, 363, 372, 399; 1987 a. 403 ss. 43 to 45, 256; 1989 a. 13, 14, 31; 1989 a. 56 s. 259; 1989 a. 166, 182, 189, 218, 230, 240, 323, 327, 336, 355, 357, 359; 1991 a. 32, 39, 113, 152, 229, 269, 315; 1993 a. 16, 263, 383, 490, 491; 1995 a. 27, ss. 1946 to 1953, 9130 (4); 1995 a. 81, 88, 89, 216, 240, 302, 381, 417; 1997 a. 3, 27, 39, 69, 110, 162, 237, 238; 1999 a. 9, 11, 42, 63, 65, 83; 2001 a. 16, 38, 103, 104, 109; 2003 a. 33; 2005 a. 153, 335; 2007 a. 20, 131, 226; 2009 a. 15, 28; 2011 a. 7, 10, 32, 116, 229; 2013 a. 20 ss. 699 to 709c, 2365m, 9448; 2013 a. 168 s. 21; 2013 a. 214.

SECTION 21. 46.21 (2m) (c) of the statutes is amended to read:

46.21 (2m) (c) Exchange of information. Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), and 253.07 (3) (c), a subunit of a county department of human services or tribal agency acting under this subsection may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of human services or tribal agency, with a resource center, or a care management organization, or a long-term care district, with an elder-adult-at-risk agency, an adult-at-risk agency, or any agency to which referral for investigation is made under s. 46.90 (5) (a) 1. or 55.043 (1r) (a) 1g., or with a person providing services to the client under a purchase of services contract with the county department of human services or tribal agency or with a resource center, or a care management organization, or a long-term care district, if necessary to enable an employee or service provider to perform his or her duties, or to enable the county department of human services or tribal agency to coordinate the delivery of services to the client.

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An agency that releases information under this paragraph shall document that a request for information was received and what information was provided.

History: 1973 c. 136, 153, 262; 1975 c. 224; 1975 c. 243 s. 18; 1977 c. 271, 272, 449; 1979 c. 34; 1981 c. 217, 329, 391; 1983 a. 27, 239, 368, 524; 1985 a. 29 s. 3202 (23); 1985 a. 120, 176, 332; 1987 a. 399; 1989 a. 31, 112, 319; 1991 a. 274; 1993 a. 27, 186, 213, 446; 1995 a. 27, 77, 201; 1997 a. 27, 79, 164, 237, 283; 1999 a. 9; 2005 a. 264, 388, 443; 2007 a. 20, 45; 2009 a. 28, 180; 2011 a. 32; 2013 a. 20, 203.

**Section 22.** 46.215 (1m) of the statutes is amended to read:

46.215 (1m) Exchange of information; long-term care. Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a), a subunit of a county department of social services or tribal agency acting under this section may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of social services or tribal agency, with a resource center, or a care management organization, or a long-term care district, with an elder-adult-at-risk agency, an adult-at-risk agency, or any agency to which referral for investigation is made under s. 46.90 (5) (a) 1. or 55.043 (1r) (a) 1g., or with a person providing services to the client under a purchase of services contract with the county department of social services or tribal agency or with a resource center, or a care management organization, or a long-term care district, if necessary to enable an employee or service provider to perform his or her duties, or to enable the county department of social services or tribal agency to coordinate the delivery of services to the client. An agency that releases information under this subsection shall document that a request for information was received and what information was provided.

History: 1971 c. 218; 1973 c. 90, 147, 333, 336; 1975 c. 39, 307, 421; 1977 c. 29, 271, 418; 1979 c. 34; 1981 c. 20 ss. 867m to 870, 2202 (20) (j); 1981 c. 81, 329; 1983 a. 27 ss. 1080, 2202 (20); 1983 a. 190 s. 7; 1983 a. 193; 1985 a. 29, 120; 1985 a. 176 ss. 322 to 332; Stats. 1985 s. 46, 215; 1987 a. 27; 1987 a. 403 s. 256; 1989 a. 31, 107, 336, 339; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2063 to 2076, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 225, 289, 352, 404, 417; 1997 a. 3, 27, 35, 252; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 25, 264, 388, 406; 2007 a. 20, ss. 848 to 856, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 15, 28, 180, 334; 2011 a. 32; 2013 a. 20.

SECTION 23. 46.215 (1p) of the statutes is amended to read:

46.215 (1p) Exchange of information; statewide automated child welfare INFORMATION SYSTEM. Notwithstanding ss. 46.2895 (9), 48.396 (1) and (2) (a), 48.78

- 1 (2) (a), 48.981 (7), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7),
- 2 252.15, 253.07 (3) (c), 938.396 (1) (a) and (2), and 938.78 (2) (a), a county department
- 3 under this section may enter the content of any record kept or information received
- 4 by that county department into the statewide automated child welfare information
  - system established under s. 48.47 (7g).

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History: 1971 c. 218; 1973 c. 90, 147, 333, 336; 1975 c. 39, 307, 421; 1977 c. 29, 271, 418; 1979 c. 34; 1981 c. 20 ss. 867m to 870, 2202 (20) (j); 1981 c. 81, 329; 1983 a. 27 ss. 1080, 2202 (20); 1983 a. 190 s. 7; 1983 a. 193; 1985 a. 29, 120; 1985 a. 176 ss. 322 to 332; Stats. 1985 s. 46, 215; 1987 a. 403 s. 256; 1989 a. 31; 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2063 to 2076, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 225, 289, 352, 404, 417; 1997 a. 3, 27, 35, 252; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 25, 264, 388, 406; 2007 a. 20 ss. 848 to 856, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 15, 28, 180, 334; 2011 a. 32; 2013 a. 20.

SECTION 24. 46.22 (1) (dm) of the statutes is amended to read:

46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a), a subunit of a county department of social services or tribal agency acting under this subsection may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of social services or tribal agency, with a resource center, or a care management organization, or a long—term care district, with an elder—adult—at—risk agency, an adult—at—risk agency, or any agency to which referral for investigation is made under s. 46.90 (5) (a) 1. or 55.043 (1r) (a) 1g., or with a person providing services to the client under a purchase of services contract with the county department of social services or tribal agency or with a resource center, or a care management organization, or a long—term care district, if necessary to enable an employee or service provider to perform his or her duties, or to enable the county department of social services or tribal agency to coordinate the delivery of services to the client. An agency that releases information under this paragraph

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shall document that a request for information was received and what information was provided.

SECTION 25. 46.22 (1) (dp) of the statutes is amended to read:

4 46.22 (1) (dp) Exchange of information; statewide automated child welfare information system. Notwithstanding ss. 46.2895 (9), 48.396 (1) and (2) (a), 48.78 (2) (a), 48.981 (7), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 252.15, 253.07 (3) (c), 938.396 (1) (a) and (2), and 938.78 (2) (a), a county department under this section may enter the content of any record kept or information received by that county department into the statewide automated child welfare information system established under s. 48.47 (7g).

History: 1971 c. 164, 218; 1973 c. 90 ss. 226, 560 (3); 1973 c. 147, 333; 1975 c. 39; 1975 c. 189 s. 99 (1), (2); 1975 c. 224 ss. 52p, 146m; 1975 c. 307, 422; 1975 c. 430 s. 78; 1977 c. 29 ss. 560, 1656 (18); 1977 c. 83 s. 26; 1977 c. 418, 449; 1979 c. 34, 221; 1981 c. 20 ss. 759 to 763m, 2202 (20) (j); 1981 c. 329; 1981 c. 390 s. 252; 1983 a. 27 s. 2202 (20); 1983 a. 190 s. 7; 1983 a. 192, 193, 447; 1985 a. 29, 120; 1985 a. 176 ss. 28, 30, 59 to 105; 1985 a. 332; 1987 a. 5, 27; 1989 a. 31, 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2077 to 2111, 9126 (19), 9130 (4); 1995 a. 64, 77; 201, 289, 352, 404, 417; 1993 a. 37, 35; 252; 1999 a. 9, 83; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 264, 344, 388, 406; 2007 a. 20 ss. 857 to 877, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.

Section 26. 46.23 (3) (e) of the statutes is amended to read:

46.23 (3) (e) Exchange of information; long-term care. Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a), a subunit of a county department of human services or tribal agency acting under this section may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of human services or tribal agency, with a resource center, or a care management organization, or a long-term care district, with an elder-adult-at-risk agency, an adult-at-risk agency, or any agency to which referral for investigation is made under s. 46.90 (5) (a) 1. or 55.043 (1r) (a) 1g., or with a person providing services to the client under a purchase of services contract with the county department of human services or tribal agency or with a resource center.

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1	or a care management organization, or a long-term care district, if necessary to
2	enable an employee or service provider to perform his or her duties, or to enable the
3	county department of human services or tribal agency to coordinate the delivery of
4	services to the client. An agency that releases information under this paragraph
5	shall document that a request for information was received and what information
6	was provided.

History: 1975 c. 39, 224; 1977 c. 29; 1981 c. 20, 93, 291; 1981 c. 329 s. 31; 1983 a. 27 ss. 962, 2202 (20); 1985 a. 29 ss. 844m to 860, 3200 (56) (a); 1985 a. 120, 176, 332; 1987 a. 186; 1987 a. 403 s. 256; 1989 a. 56, 359; 1991 a. 274; 1993 a. 16, 27, 83, 445, 491; 1995 a. 27 ss. 2112 to 2127, 9126 (19), 9130 (4); 1995 a. 64, 201, 352, 417; 1997 a. 3, 164, 268, 283; 1999 a. 9; 2005 a. 264, 388, 406; 2007 a. 20 ss. 878 to 891, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180; 2011 a. 32.

SECTION 27. 46.23 (3) (ed) of the statutes is amended to read:

46.23 (3) (ed) Exchange of information; statewide automated child welfare information system. Notwithstanding ss. 46.2895 (9), 48.396 (1) and (2) (a), 48.78 (2) (a), 48.981 (7), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 252.15, 253.07 (3) (c), 938.396 (1) (a) and (2), and 938.78 (2) (a), a county department under this section may enter the content of any record kept or information received by that county department into the statewide automated child welfare information system established under s. 48.47 (7g).

History: 1975 c. 39, 224; 1977 c. 29; 1981 c. 20, 93, 291; 1981 c. 329 s. 31; 1983 a. 27 ss. 962, 2202 (20); 1985 a. 29 ss. 844m to 860, 3200 (56) (a); 1985 a. 120, 176, 332; 1987 a. 186; 1987 a. 403 s. 256; 1989 a. 56, 359; 1991 a. 274; 1993 a. 16, 27, 83, 445, 491; 1995 a. 27 ss. 2112 to 2127, 9126 (19), 9130 (4); 1995 a. 64, 201, 352, 417; 1997 a. 3, 164, 268, 283; 1999 a. 9; 2005 a. 264, 388, 406; 2007 a. 20 ss. 878 to 891, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180; 2011 a. 32.

SECTION 28. 46.2803 (1) of the statutes is amended to read:

46.2803 (1) In order to facilitate the transition to the long—term care system specified in ss. family care program as defined in s. 46.2805 to 46.2895 (4m), within the limits of applicable federal statutes and regulations and if the secretary of health services finds it necessary, he or she may grant a county limited waivers to or exemptions from ss. 46.27 (3) (e) (intro.), 1. and 2. and (f), (5) (d) and (e), (6) (a) 1., 2. and 3. and (b) (intro.), 1. and 2., (6r) (c), (7) (b), (cj) and (cm) and (11) (c) 5m. (intro.)

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and 6. and 46.277 (3) (a), (4) (a) and (5) (d) 1m., 1n. and 2. and rules promulgated under those provisions.

History: 1999 a. 9; 2007 a. 20 ss. 934, 1019, 1020, 9121 (6) (a).

**Section 29.** 46.2804 of the statutes is repealed.

\*\*\*\*NOTE: As far as I understand s. 46.2804, it required a self-directed services option in Family Care. If that is correct, this provision is duplicated at s. 46.284 (4) (e) and I clarify in this draft that this is the self-directed services option. Therefore, I recommend repealing s. 46.2804 to eliminate confusion.

4 Section 30. 46.2805 (intro.) of the statutes is amended to read:

**46.2805 Definitions; long-term care.** (intro.) In ss. 46.2805 to 46.2895

6 <u>46.288</u>:

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History: 1999 a. 9, 185; 2003 a. 33; 2007 a. 20, 141; 2009 a. 247.

SECTION 31. 46.2805 (1) (intro.) of the statutes renumbered 46.2805 (1) and

8 amended to read:

46.2805 (1) (intro.) "Care management organization" means an entity that is certified as meeting the requirements for a care management organization under s. 46.284 (3) and that has a contract under s. 46.284 (2). "Care management organization" does not mean an entity that contracts with the department to operate

History: 1999 a. 9, 185; 2003 a. 33; 2007 a. 20, 141; 2009 a. 247.

one of the following:

\*\*\*\*NOTE: I believe the existing definition for "care management organization" (CMO) is problematic and an improper definition. Under the current definition a CMO may only operate family care, and an entity that operates Pace or Family Care partnership or a combination of those programs and family care is, by definition, not a CMO. Arguably the current statutes then do not apply to an entity that operates family care and either Pace or Family Care Partnership. It seems that current CMOs often operate more than one program, so this draft repeals the exception in the current definition. If further clarification is needed that certain statutes only apply to the operation of family care, I can add that clarification.

SECTION 32. 46.2805 (1) (a) of the statutes is repealed.

**Section 33.** 46.2805(1)(b) of the statutes is repealed.

**Section 34.** 46.2805 (4) of the statutes is amended to read:

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1	46.2805 (4) "Family care benefit" means financial assistance for long-term
2	care and support items for an enrollee and any financial assistance, as specified by
3	the department, for primary and acute care services for an enrollee.
4	History: 1999 a. 9, 185; 2003 a. 33; 2007 a. 20, 141; 2009 a. 241. SECTION 35. 46.2805 (4k) of the statutes is created to read:
5	46.2805 (4k) "Family Care Partnership Program" means an integrated health
6	and long-term care program operated under an amendment to the state Medical
7	Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 1396n(c).
8	SECTION 36. 46.2805 (4m) of the statutes is created to read:
9	46.2805 (4m) "Family care program" means the program under s. 46.2805 to
10	46.2895 that provides the family care benefit.
11	Section 37. 46.2805 (4m) of the statutes, as created by 2015 Wisconsin Act
12	(this act), is amended to read:
13	46.2805 (4m) "Family care program" means the program under s. 46.2805 to
14	$46.2895  ext{ } \underline{46.288}$ that provides the family care benefit.
15	Section 38. 46.2805 (9m) of the statutes is created to read:
16	46.2805 (9m) "Program of all-inclusive care for the elderly" means an
17	integrated health and long-term care program operated under 42 USC 1395eee or
18	1396u–4.
19	Section 39. 46.2805 (10m) of the statutes is amended to read:
20	46.2805 (10m) "Self-directed services option" means the option in the family
21	care program that is operated under a waiver from the secretary of the federal
22	department of health and human services under 42 USC 1396n (c) in which an
23	enrolled individual selects his or her own services and service providers.
24	History: 1999 a. 9, 185; 2003 a. 33; 2007 a. 20, 141; 2009 a. 247.  SECTION 40. 46. 281 (1d) of the statutes is amended to read:

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

SECTION 41. 46.281 (1g) (a) of the statutes is renumbered 46.281 (1g) and

amended to read:

(and care management actions

46.281 (1g) Subject to par. (b), the The department may contract with entities

as provided under s. 46.283 (2) to provide the services under s. 46.283 (3) and (4) as

resource centers in any geographic area in the state, and may contract with entities

as provided under s. 46.284 (2) to administer the family care benefit as care

management organizations in any geographic area in the state.

History: 1999 a. 9; 2001 a. 103; 2005 a. 25, 386; 2007 a. 20; 2009 a. 28, 247; 2011 a. 32, 127.

Section 42. 46.281 (1g) (b) of the statutes is repealed.

**SECTION 43.** 46.281 (1n) (b) 3. of the statutes is amended to read:

46.281 (1n) (b) 3. Conduct ongoing evaluations of managed care programs for provision of long-term care services that are funded by medical assistance, as defined in s. 46.278 (1m) (b), as to client access to services, the availability of client choice of living and service options, quality of care, and cost-effectiveness. In evaluating the availability of client choice, the department shall evaluate the opportunity for a client to arrange for, manage, and monitor his or her family care

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1	benefit directly or with assistance, self-directed services option as specified in s.
2	46.284 (4) (e).
3	History: 1999 a. 9; 2001 a. 103; 2005 a. 25, 386; 2007 a. 20; 2009 a. 28, 247; 2011 a. 32, 127.  SECTION 44. 46.281 (1n) (b) 4. of the statutes is amended to read:
4	46.281 (1n) (b) 4. Require that quality assurance and quality improvement
5	efforts be included throughout the long-term care system specified in ss. 46.2805 to
<b>≯</b> 6	46.2895 family care program.
7	History: 1999 a. 9; 2001 a. 103; 2005 a. 25, 386; 2007 a. 20; 2009 a. 28, 247; 2011 a. 32, 127.  SECTION 45. 46.2825 (2) (a) of the statutes is amended to read:
8	46.2825 (2) (a) Evaluate the performance of care management organizations
9	and entities that operate a the program described under s. 46.2805 (1) (a) or (b) of
10	all-inclusive care for the elderly or the Family Care Partnership Program in the
11	committee's region with respect to responsiveness to recipients of their services,
12	fostering choices for recipients, and other issues affecting recipients; and make
13	recommendations based on the evaluation to the department and to the care
14	management organizations and entities, as appropriate.
15	History: 2007 a. 20 ss. 968, 970, 977.  SECTION 46. 46.2825 (2) (c) of the statutes is amended to read:
16	46.2825 (2) (c) Monitor grievances and appeals made to care management
17	organizations or entities that operate a the program described under s. 46.2805 (1)
18	(a) or (b) of all-inclusive care for the elderly or the Family Care Partnership Program
19	within the committee's region.
20	History: 2007 a. 20 ss. 968, 970, 977.  SECTION 47. 46.283 (1) (a) (intro.) and 1. of the statutes are consolidated,
21	renumbered 46.283 (1) (a) and amended to read:

46.283 (1) (a) A county board of supervisors and, in a county with a county

executive or a county administrator, the county executive or county administrator,

T	may decide <del>all of the following: 1. Whether whether</del> to authorize one or more county
2	departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
3	$\left(1\right)\left(a\right)1.,2.,$ or $3.$ to apply to the department for a contract to operate a resource center
4	and, if so, which to authorize and what client group to serve.
	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32.  ****NOTE: Please note that every budget draft is drafted independently from other budget draft requests. This draft assumes that aging and disability resource centers will operate similar to the way they operate currently and on a regional basis. If this draft and BB0359 will both be included in the budget, they will be reconciled at a later time.
5	<b>Section 48.</b> 46.283 (1) (a) 2. of the statutes is repealed.
6	SECTION 49. 46.283 (2) (b) of the statutes is amended to read:
7	46.283 (2) (b) A county agency or a long-term care district applies for a contract
8	but fails to meet the standards specified in sub. (3).
9	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32. <b>SECTION 50.</b> 46.283 (3) (e) of the statutes is amended to read:
10	46.283 (3) (e) A determination of financial eligibility and of the maximum
11	amount of cost sharing required for a person who is seeking long-term care services
12	or the family care benefit, under standards prescribed by the department.
13	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32. <b>SECTION 51.</b> 46.283 (4) (f) of the statutes is amended to read:
14	46.283 (4) (f) Perform a functional screening and a financial and cost-sharing
15	screening for any resident, as specified in par. (e), who requests a screening and
16	assist any resident who is eligible and chooses to enroll in a care management
17	organization or the self-directed services option to do so.
18	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32. SECTION 52. 46.284 (1) (a) (intro.) and 1. of the statutes are consolidated,
19	renumbered 46.284 (1) (a) and amended to read:
20	46.284 (1) (a) A county board of supervisors and, in a county with a county
21	executive or a county administrator, the county executive or county administrator,

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- may decide all of the following: 1. Whether whether to authorize one or more county departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
- 3 (1) (a) 1. or 2. to apply to the department for a contract to operate a care management
- 4 organization and, if so, which to authorize and what client group to serve.

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114. SECTION 53. 46.284 (1) (a) 2. of the statutes is repealed.

**Section 54.** 46.284 (2) (a) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

SECTION 55. 46.284 (2) (bm) of the statutes is amended to read:

46.284 (2) (bm) The department may contract with counties, long-term care districts, the governing body of a tribe or band or the Great Lakes inter-tribal council, inc., or under a joint application of any of these, or with a private organization that has no significant connection to an entity that operates a resource center. Proposals for contracts under this subdivision shall be solicited under a competitive sealed proposal process under s. 16.75 (2m) and the department shall evaluate the proposals primarily as to the quality of care that is proposed to be provided, certify those The department may contract with any applicants that meet it certifies as meeting the requirements specified in sub. (3) (a), select certified applicants for contract and contract with the selected applicants. The department is

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not required to solicit proposals for contracts to be a care management organization under a competitive sealed proposal process.

1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114. **Section 56.** 46.284 (2) (c) of the statutes is amended to read:

46.284 (2) (c) The department shall require, as a term of any contract with a care management organization under this section, that the care management organization contract for the provision of services that are covered under the family care benefit with any community-based residential facility under s. 50.01 (1g), residential care apartment complex under s. 50.01 (6d), nursing home under s. 50.01 (3), intermediate care facility for persons with an intellectual disability under s. 50.14(1)(b), community rehabilitation program, home health agency under s. 50.49 (1) (a), provider of day services, or provider of personal care, as defined in s. 50.01 (40), that agrees to accept the reimbursement rate that the care management organization pays under contract to similar providers for the same service and that satisfies any applicable quality of care, utilization, or other criteria that the care management organization requires of other providers with which it contracts to provide the same service. If the department chooses to provide primary and acute care services as part of the family care benefit, the department shall require, as a term of any contract with a care management organization under this section, that the care management organization contract for the provision of services that are covered under the family care benefit with a Medical Assistance certified provider that agrees to accept the reimbursement rate that the care management organization pays under contract to similar providers for the same service and that satisfies any applicable quality of care, utilization, or other criteria that the care

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	1	management organization requires of other providers with which it contracts to
	2	provide the same service.
X	3	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.  SECTION 57. 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.
X	7	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.  SECTION 58. 46.284 (3) (b) 11. of the statutes is amended to read:
$\times$	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
N /	10	$\rightarrow$ that are important to the target group that it proposes to serve, including. 11m. If
X	11	the department chooses to make primary and acute health care services part of the
	12	family care benefit, the ability to provide or provide access to primary and acute
	13	health care services as determined by the department.
$\times$	14	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.  SECTION 59. 46.284 (3m) of the statutes is repealed.
X	15	Section 60. 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 <u>self-directed services</u> option. If the

enrollee accepts the option, the care management organization shall monitor the

enrollee's use of a fixed budget for purchase of services or support items from any

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

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History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

\*\*\*\*\*NOTE: Please advise if s. 46.284 (4) (e) is not sufficient to substitute for the current IRIS program.

\*\*\*\*NOTE: Also please note that this draft eliminates the insurance provisions in ch. 648 but retains the funding and risk-sharing provisions in s. 46.284 (5). Please advise if you want those funding and risk-sharing provisions removed or altered.



**Section 61.** 46.284 (6) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

SECTION 62. 46.286 (3g) of the statutes is created to read:

46.286 (3g) Transferring care management organizations. An enrollee may transfer his or her enrollment to a different care management organizations but only during an open enrollment period specified by the department, unless the enrollee meets an exception specified by the department.

**Section 63.** 46.2895 of the statutes is repealed.

**Section 64.** 46.2895 (1) (a) (intro.) of the statutes is amended to read:

46.2895 (1) (a) (intro.) A Except as provided in par. (f), a county, a tribe or band, or any combination of counties or tribes or bands, may create a special purpose district that is termed a "long-term care district", that is a local unit of government, that is separate and distinct from, and independent of, the state and the county or

_ 1	tribe or band that created it, and that has the powers and duties specified in this
2	section, if each county or tribe or band that participates in creating the district does
× × 3	all of the following:
, <b>\ 4</b>	History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10.  SECTION 65. 46.2895 (1) (f) of the statutes is created to read:
5	46.2895 (1) (f) No county, tribe, band, or combination of counties, tribes, or
6	bands, may create a long-term care district after June 30, 2015.
7	Section 66. 46.2895 (4) (intro.) of the statutes is amended to read:
8	46.2895 (4) Powers. (intro.) Subject to sub. subs. (1) (c) and (12m), a long-term
9	care district has all the powers necessary or convenient to carry out the purposes and
10	provisions of the family care program ss. 46.2805 to 46.2895. In addition to all these
11	powers, a long-term care district may do all of the following:
12	History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10.  SECTION 67. 46.2895 (4) (dm) of the statutes is amended to read:
13	46.2895 (4) (dm) Subject to sub. (1) (c), enter into a contract with the
14	department to operate a the program described under s. 46.2805 (1) (a) or (b) of
15	all-inclusive care for the elderly or the Family Care Partnership Program and
16	provide services related to the contracted services.
17	History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10.  SECTION 68. 46.2895 (8) (a) (intro.) of the statutes is amended to read:
18	46.2895 (8) (a) (intro.) A Subject to sub. (12m), a long-term care district board
19	that is created at least in part by a county shall do all of the following:
<b>20</b>	History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10.  SECTION 69. 46.2895 (12m) of the statutes is created to read:
21	5 46.2895 (12m) REQUIRED DISSOLUTION. A long-term care district that exists on
22	June 30, 2014, shall dissolve under the procedures in sub. (13) before June 30, 2017,
23	or before a date established by the department, whichever is later.

$\sqrt{1}$	Section 70. 46.2897 of the statutes is repealed.
× 2	Section 71. 46.2899 (1) of the statutes is repealed.
3	Section 72. 46.2899 (3) of the statutes is amended to read:
4	46.2899 (3) ELIGIBILITY. The department shall consider as eligible for the
5	waiver program described under sub. (2) only individuals who are receiving
6	post-secondary education in a setting that is distinguishable from the institution.
7	The department shall set the financial eligibility requirements and functional
8	eligibility requirements for the waiver program described under sub. (2) the same as
9	the financial eligibility requirements and functional eligibility requirements for the
10	self-directed services option of the family care program, as defined in s. 46.2805
11	(4m), except for the requirement to be an individual who is developmentally disabled
12	and who is receiving post-secondary education on the grounds of a institution.
13	History: 2013 a. 20. SECTION 73. 46.2899 (4) of the statutes is amended to read:
13 14	
	SECTION 73. 46.2899 (4) of the statutes is amended to read:
14	SECTION 73. 46.2899 (4) of the statutes is amended to read: 46.2899 (4) SERVICES AND BENEFITS. The department shall provide the same
14 15 16	SECTION 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) SERVICES AND BENEFITS. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the
14 15 16	Section 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805
14 15 16	Section 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805 (4m). The department shall determine the funding amount for a waiver program
14 15 16 17 9 18	Section 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805 (4m). The department shall determine the funding amount for a waiver program participant under this section.  History: 2013-20.
14 15 16 17 19	Section 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805 (4m). The department shall determine the funding amount for a waiver program participant under this section.  History: 2013-4-20.  Section 74. 48.47 (7g) of the statutes is amended to read:
14 15 16 17 19 19	SECTION 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805 (4m). The department shall determine the funding amount for a waiver program participant under this section.  History: 2013-20.  SECTION 74. 48.47 (7g) of the statutes is amended to read:  48.47 (7g) STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. Establish
14 15 16 17 9 18 19 20 21	Section 73. 46.2899 (4) of the statutes is amended to read:  46.2899 (4) Services and benefits. The department shall provide the same services under the waiver program described in sub. (2) as it provides under the self-directed services option of the family care program, as defined in s. 46.2805 (4m). The department shall determine the funding amount for a waiver program participant under this section.  **Bection 74. 48.47 (7g) of the statutes is amended to read:  48.47 (7g) Statewide automated child welfare information system. Notwithstanding ss.

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

49.475 (1) (e) 2. An enrollee of the family care program, as defined in s. 46.2805 16 (4m).

History: 1991 a. 39; 1999 a. 9; 2007 a. 20 ss. 1610 to 1626, 9121 (6) (a); 2011 a. 189; 2013 a. 20. **SECTION 76.** 49.496 (1) (bk) 2. of the statutes is repealed.

18 Section 77. 50.034 (6) of the statutes is amended to read:

50.034 (6) Funding for supportive, personal or nursing services that a person who resides in a residential care apartment complex receives, other than private or 3rd-party funding, may be provided only under s. 46.27 (11) (c) 7. or 46.277 (5) (e), except if the provider of the services is a certified medical assistance provider

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under s. 49.45 or if the funding is provided as a family care benefit under ss. the

2 family care program as defined in s. 46.2805 to 46.2895 (4m).

History: 1995 a. 27; 1997 a. 13, 252; 1999 a. 9, 63, 185; 2001 a. 16; 2003 a. 33; 2005 a. 22; 2007 a. 20; 2009 a. 28; 2013 a. 165 s. 114

SECTION 78. 51.06 (8) (b) 6. of the statutes is amended to read:

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

History: 1975 c. 430; 1981 c. 20; 1985 a. 29 ss. 1061 to 1064, 3200 (56); 1985 a. 176; 1991 a. 39; 1993 a. 16; 1995 a. 27 s. 9145 (1); 1997 a. 27, 164; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 386; 2007 a. 153; 2009 a. 28; 2011 a. 126, 260; 2013 a. 20.

SECTION 79. 51.42 (3) (e) of the statutes is amended to read:

51.42 (3) (e) Exchange of information. Notwithstanding ss. 46.2895 (9), 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45 (14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c), and 938.78 (2) (a), any subunit of a county department of community programs or tribal agency acting under this section may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of community programs or tribal agency, with a resource center, or a care management organization, or a long-term care district, or with any person providing services to the client under a purchase of services contract with the county department of community programs or tribal agency or with a resource center, or care management organization, or long-term care district, if necessary to enable an employee or service provider to perform his or her duties, or to enable the county department of community programs or tribal agency to coordinate the delivery of services to the client. Any agency releasing information

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under this paragraph shall document that a request was received and what information was provided.

History: 1971 c. 125; 1973 c. 90, 198, 333, 336; 1975 c. 39, 198, 199, 224, 422; 1975 c. 428 s. 16; 1975 c. 430 ss. 24 to 31, 80; 1977 c. 26 ss. 37, 38, 75; 1977 c. 29 ss. 612 to 623p, 1656 (18); 1977 c. 193; 1977 c. 203 s. 106; 1977 c. 272; 1977 c. 354 s. 101; 1977 c. 418, 428, 447; 1979 c. 34, 117, 177, 221, 330, 355; 1981 c. 20 ss. 923 to 942, 2202 (20); 1981 c. 1981 c. 93 ss. 105 to 122, 186; 1981 c. 329; 1983 a. 27 ss. 1106 to 1112, 2202 (20); 1983 a. 189 ss. 44, 329 (5); 1983 a. 192, 239, 365, 375, 524; 1985 a. 29, 120, 176; 1987 a. 3, 27, 199, 339, 366; 1989 a. 31, 122; 1991 a. 39, 274, 315; 1993 a. 14, 445; 1995 a. 27 ss. 3260 to 3262, 9126 (19), 9145 (19), 1995 a. 64, 77, 92, 201, 224, 276, 352, 417; 1997 a. 27, 164, 237, 268; 1999 a. 9; 2001 a. 10, 16, 38; 2003 a. 320; 2005 a. 264, 388, 431, 434; 2007 a. 20 ss. 1819m to 1821, 9121 (6) (a); 2007 a. 45, 27, 2000 a. 8 180 276 334, 2011 a. 3 126, 2013 a. 30, 321 97; 2009 a. 28, 180, 276, 334; 2011 a. 32, 126; 2013 a. 203, 251

SECTION 80. 51.437 (4r) (b) of the statutes is amended to read:

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

History: 1971 c. 307, 322; 1973 c. 90, 333; 1975 c. 39, 199, 430; 1977 c. 26 ss. 39, 75; 1977 c. 29; 1977 c. 354 s. 101; 1977 c. 418; 1977 c. 428 s. 85, 86, 115; 1979 c. 32, 117, 221, 330, 355; 1981 c. 20, 93, 329; 1983 a. 27, 365, 375, 524; 1985 a. 29 ss. 1094 to 1105m, 3200 (56) (a); 1985 a. 120, 176, 307, 332; 1987 a. 27; 1989 a. 31, 56, 107, 262; 1991 a. 32, 274, 315; 1993 a. 16, 83; 1995 a. 27 ss. 3266m, 9116 (5), 9126 (19), 9145 (1); 1995 a. 47, 92, 201, 225, 352, 417; 1997 a. 27, 35, 164, 252; 1999 a. 9; 2001 a. 16, 59; 2003 a. 33; 2005 a. 25, 264, 388; 2007 a. 20 ss. 1822 to 1824b, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.

19 SECTION 81. 66.0301 (1) (a) of the statutes is amended to read:

66.0301 (1) (a) Except as provided in pars. (b) and (c), in this section "municipality" means the state or any department or agency thereof, or any city, village, town, county, school district, public library system, public inland lake

protection and rehabilitation district, sanitary district, farm drainage district, metropolitan sewerage district, sewer utility district, solid waste management system created under s. 59.70 (2), local exposition district created under subch. II of ch. 229, local professional baseball park district created under subch. IV of ch. 229, local professional football stadium district created under subch. IV of ch. 229, local cultural arts district created under subch. V of ch. 229, long—term care district under s. 46.2895, water utility district, mosquito control district, municipal electric company, county or city transit commission, commission created by contract under this section, taxation district, regional planning commission, housing authority created under s. 66.1201, redevelopment authority created under s. 66.1335, or city—county health department.

History: 1999 a. 150 ss. 348, 349, 352, 353; 1999 a. 167 s. 38; 2001 a. 16, 30; 2007 a. 20, 43; 2009 a. 28, 112; 2011 a. 32; 2013 a. 14.

SECTION 82. 66.0601 (1) (b) of the statutes is amended to read:

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

History: 1999 a. 65 s. 14; 1999 a. 150 ss. 89, 90, 92, 94, 165 to 167; 2001 a. 30; 2005 a. 155; 2007 a. 20. SECTION 83. 66.0601(1)(c) of the statutes is amended to read:

66.0601 (1) (c) Payments for abortion-related activity restricted. No city, village, town, long-term care district under s. 46.2895 or agency or subdivision of a city, village or town may authorize payment of funds for a grant, subsidy or other

SECTION 83

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funding involving a pregnancy program, project or service if s. 20.9275 (2) applies to the pregnancy program, project or service.

History: 1999 a. 65 s. 14; 1999 a. 150 ss. 89, 90, 92, 94, 165 to 167; 2001 a. 30; 2005 a. 155; 2007 a. 20. SECTION 84. 70.11 (2) of the statutes is amended to read:

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

History: 1971 c. 152, 154, 312; 1973 c. 90; 1973 c. 333 s. 201m; 1973 c. 335 s. 13; 1975 c. 39; 1975 c. 39 s. 91 (10); 1975 c. 199; 1977 c. 29 ss. 745m, 1646 (3), 1647 (5), (7); 1977 c. 83 s. 26; 1977 c. 273, 282, 391, 418, 447; 1979 c. 34 s. 2102 (39) (g); 1979 c. 221, 225; 1979 c. 310 s. 12; 1981 c. 20; 1983 a. 27 ss. 1177, 1178, 1179f; 1983 a. 189 s. 329 (16); 1983 a. 201, 327; 1985 a. 26, 29, 316, 332; 1987 a. 10, 27, 395; 399; 1987 a. 403 s. 256; 1989 a. 25, 307; 1991 a. 37, 39, 269; 1993 a. 263, 307, 399, 490; 1995 a. 27, 283, 3344 to 3348m, 9126 (19); 1995 a. 201, 327, 247, 365; 1997 a. 27, 357, 134, 147, 164, 184, 237; 1999 a. 19, 32, 63, 65; 1999 a. 150 ss. 624, 672; 1999 a. 167, 185; 2001 a. 16, 38, 59, 103; 2003 a. 195, 291; 2005 a. 4, 22, 70, 74, 335; 2007 a. 19; 2007 a. 20 ss. 1932 to 1934f, 9121 (6) (a); 2009 a. 28, 152, 155; 2011 a. 7, 10, 32, 208; 2011 a. 260 19

**Section 85.** 71.26 (1) (b) of the statutes is amended to read:

20 71.26 (1) (b) Political units. Income received by the United States, the state 21 and all counties, cities, villages, towns, school districts, technical college districts,

LRB-0972/? TJD:...:... **SECTION 85** 

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s. 46.286.

joint local water authorities created under s. 66.0823, long-term care districts under

2 s. 46.2895 or other political units of this state.

History: 1987 a. 312; 1987 a. 411 ss. 22, 124 to 129; 1989 a. 31, 336; 1991 a. 37, 39, 221, 269; 1993 a. 16, 112, 246, 263, 399, 437, 491; 1995 a. 27, 56, 351, 371, 380, 428; 1997 a. 27, 37, 184, 237; 1999 a. 9, 65; 1999 a. 150 s. 672; 1999 a. 167, 194; 2001 a. 16, 38, 106, 109; 2003 a. 33, 85, 99, 135, 255, 326; 2005 a. 25, 74, 335, 361, 362, 479, 483; 2007 a. 20, 96, 97, 151, 226; 2009 a. 2, 28, 161, 165, 180, 183, 205, 265, 269, 295, 332, 344; 2011 a. 3, 5, 7, 10, 32, 212, 232; 2011 a. 260 s. 80; 2013 a. 20, 145; 2013 a. 165 ss. 46, 115.

SECTION 86. 600.01 (1) (b) 10. a. of the statutes is amended to read:

600.01 (1) (b) 10. a. Except as provided in subd. 10. b., long-term care services Services funded by the family care benefit, as defined in s. 46.2805 (4), that are provided by a care management organization that contracts with the department of health services under s. 46.284 and enrolls only individuals who are eligible under

History: 1971 c. 260; 1975 c. 375, 421; 1975 c. 422 s. 163; 1977 c. 203; 1979 c. 89, 102, 177; 1983 a. 358 s. 14; 1989 a. 31; 1989 a. 187 s. 29; 1989 a. 317, 336; 1991 a. 39, 69, 250, 309; 1993 a. 16; 1995 a. 116, 150, 289; 1997 a. 27, 35; 1999 a. 9, 155; 2001 a. 104; 2003 a. 302; 2007 a. 20 s. 9121 (6) (a); 2011 a. 226.

\*\*\*\*NOTE: Under current law, s. 600.01 (1) (b) 10. exempts Family Care from the

insurance statutes except for primary and acute services provided by care management organizations. Since this draft allows expansion of the family care benefit to primary and acute care and eliminates other insurance regulation of family care, I've exempted all family care benefit services, even including primary and acute care, from regulation under the insurance statutes without a delayed effective date. Please consider if this complies with your intent.

9 **Section 87.** 600.01 (1) (b) 10. b. of the statutes is repealed.

 $\times$  10 Section 88. 632.745 (6) (a) 2m. of the statutes is repealed.

 $\times$  11 Section 89. Chapter 648 of the statutes is repealed.

12 **Section 90.** 985.01 (1g) of the statutes is amended to read:

13 985.01 (1g) "Governing body" has the meaning given in s. 345.05 (1) (b) and

includes a long-term care district board under s. 46.2895.

History: 1981 c. 372; 1983 a. 189 ss. 327, 328, 329 (31); 1993 a. 486; 1999 a. 9, 85; 2007 a. 20; 2009 a. 276; 2011 a. 228.

SECTION 91. 985.01 (3) of the statutes is amended to read:

16 985.01 (3) "Municipality" has the meaning in s. 345.05 (1) (c) and includes a

17 long-term care district under s. 46,2895.

History: 1981 c. 372; 1983 a. 189 ss. 327, 328, 329 (31); 1993 a. 486; 1999 a. 9, 85; 2007 a. 20; 2009 a. 276; 2011 a. 228.

SECTION 9118. Nonstatutory provisions; Health Services.

(1) CHANGES TO FAMILY CARE PROGRAM. (a) Definitions. In this subsection:

1	1. "Department" means the department of health services.
2	2. "Family care program" means the program under sections 46.2805 to
3	46.2895 of the statutes that provides the family care benefit as defined in section
4	46.2805 (4) of the statutes. $c \in \mathcal{A}^{(2)}$
5	(b) Waiver request; generally. The department shall request any approval from
6	and shall submit any amendments or waiver requests to the federal department of
7	health and human services that are necessary to implement all of the following
8	changes to the family care program:
9	1. Administration by care management organizations of the family care
10	program statewide instead of by geographic region, unless the department allows the
11	care management organization a waiver to administer the family care benefit in a
12	specific geographic region.
13	2. Addition of any primary and acute care services selected by the department
14	as a benefit under the family care program.
15	3. Selection under section 46.284 (2) (bm) of the statutes as a care management
<b>16</b>	organization any applicant that the department certifies meets the qualifications
17	instead of using the competitive procurement process.
18	4. Requirement under section 46.286 (3g) of the statutes that an enrollee
19	change care management organizations only during an open enrollment period
20	specified by the department.
21	5. Prevention of the creation of new long-term care districts and dissolution of
<b>(22)</b>	existing long-term care districts under \$\(\frac{1}{2}\) 46.2895 of the statutes.
23	6. Elimination of the insurance requirements for care management
24	organizations under chapter 648 of the statutes.
	$\sim$

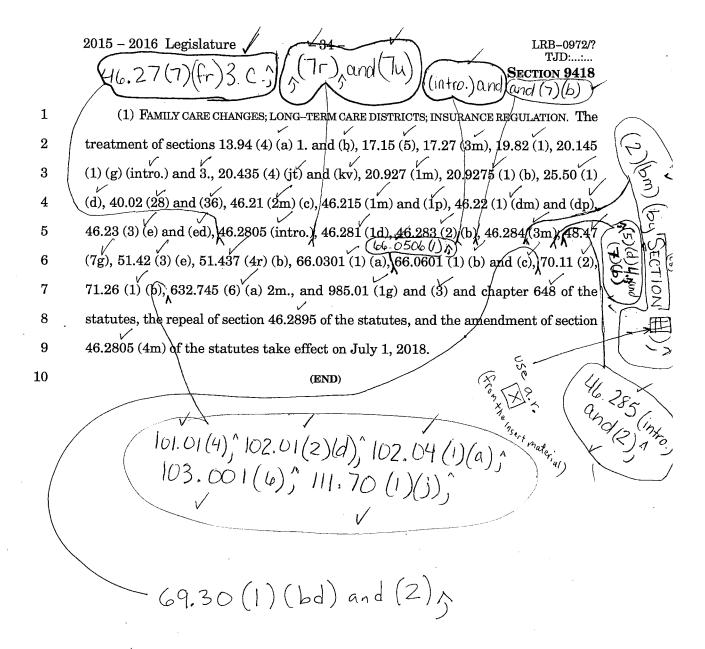
or submit any waiver request necessary to the federal department of health and human services to administer the family care program in every county in the state. If the federal department of health and human services does not disapprove the request, the department shall ensure that the family care program is available to eligible residents of every county in the state by January 1, 2016, or by a date specified by the department, whichever is later. If the department specifies a later date than January 1, 2016, it shall submit a notice of that date to the legislative

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

reference bureau for publication in the Wisconsin Administrative Register.

(e) Other long-term care programs discontinued. If the federal department of health and human services does not disapprove the request to administer the family care program in every county in the state, counties or the department may not enroll participants in or administer any of the programs under sections 46.27, 46.271, 46.275, 46.277, 46.278, or 46.2785 of the statutes after the date that the family care program is available to eligible residents of every county in the state under paragraph (6).

\*\*\*\*NOTE: Paragraph (e) is designed to discontinue the COP, CIP, and CORP programs when Family Care is available in all counties. Please consider whether you want those sections of the statutes repealed in this draft with a delayed effective date or if you want to wait until the next budget bill to repeal those sections.



# LRB-0972/P1ins TJD:...:...

# 2015–2016 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

5K V

	1	INSERT 11-3
/	<b>2</b>	SECTION 1. 46.215 (1) (r) of the statutes is amended to read:
	3	46.215 (1) (r) If authorized under s. 46.283 (1) (a) 1., to apply to the department
	4	of health services to operate a resource center under s. 46.283 and, if the department
	5	contracts with the county under s. 46.283 (2), to operate the resource center.
	6	History: 1971 c. 218; 1973 c. 90, 147, 333, 336; 1975 c. 39, 307, 421; 1977 c. 29, 271, 418; 1979 c. 34; 1981 c. 20 ss. 867m to 870, 2202 (20) (j); 1981 c. 81, 329; 1983 a. 27 ss. 1080, 2202 (20); 1983 a. 190 s. 7; 1983 a. 193; 1985 a. 29, 120; 1985 a. 176 ss. 322 to 332; Stats. 1985 s. 46.215; 1987 a. 27; 1987 a. 403 s. 256; 1989 a. 31, 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2063 to 2076, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 225, 289, 352, 404, 417; 1997 a. 3, 27, 35, 252; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 25, 264, 388, 406; 2007 a. 20 ss. 848 to 856, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 15, 28, 180, 334; 2011 a. 32; 2013 a. 20. SECTION 2. 46.215 (1) (s) of the statutes is amended to read:
,	7	46.215 (1) (s) If authorized under s. 46.284 (1) (a) 1., to apply to the department
	8	of health services to operate a care management organization under s. 46.284 and,
	9	if the department contracts with the county under s. 46.284 (2), to operate the care
	10	management organization and, if appropriate, place funds in a risk reserve.
	11	History: 1971 c. 218; 1973 c. 90, 147, 333, 336; 1975 c. 39, 307, 421; 1977 c. 29, 271, 418; 1979 c. 34; 1981 c. 20 ss. 867m to 870, 2202 (20) (j); 1981 c. 81, 329; 1983 a. 27 ss. 1080, 2202 (20); 1983 a. 190 s. 7; 1983 a. 193; 1985 a. 29, 120; 1985 a. 176 ss. 322 to 332; Stats. 1985 s. 46.215; 1987 a. 27; 1987 a. 403 s. 256; 1989 a. 31, 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2063 to 2076, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 225, 289, 352, 404, 417; 1997 a. 3, 27, 35, 252; 1999 a. 9; 2001 a. 16; 2003 a. 33; 2005 a. 25, 264, 388, 406; 2007 a. 20 ss. 848 to 856, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 15, 28, 180, 334; 2011 a. 32; 2013 a. 20.
	12	INSERT 12-6
	13	SECTION 3. 46.22 (1) (b) 1. j. of the statutes is amended to read:
	14	46.22 (1) (b) 1. j. If authorized under s. 46.283 (1) (a) 1., to apply to the
	15	department of health services to operate a resource center under s. 46.283 and, if the
	16	department contracts with the county under s. 46.283 (2), to operate the resource
	17	center.
	18	History: 1971 c. 164, 218; 1973 c. 90 ss. 226, 560 (3); 1973 c. 147, 333; 1975 c. 39; 1975 c. 189 s. 99 (1), (2); 1975 c. 224 ss. 52p, 146m; 1975 c. 307, 422; 1975 c. 430 s. 78; 1977 c. 29 ss. 560, 1656 (18); 1977 c. 83 s. 26; 1977 c. 418, 449; 1979 c. 34, 221; 1981 c. 20 ss. 759 to 763m, 2202 (20) (j); 1981 c. 329; 1981 c. 390 s. 252; 1983 a. 27 s. 2202 (20); 1983 a. 190 s. 7; 1983 a. 192, 193, 447; 1985 a. 29, 120; 1985 a. 170; 1985 a. 170; 1985 a. 32; 1987 a. 5, 27; 1989 a. 31, 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2077 to 2111, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 289, 352, 404, 417; 1997 a. 3, 27, 35; 252; 1999 a. 9, 83; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 264, 344, 388, 406; 2007 a. 20 ss. 857 to 877, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.  SECTION 4. 46.22 (1) (b) 1. k. of the statutes is amended to read:
	19	46.22 (1) (b) 1. k. If authorized under s. 46.284 (1) (a) 1., to apply to the
	20	department of health services to operate a care management organization under s.

1	46.284 and, if the department contracts with the county under s. 46.284 (2), to
2	operate the care management organization and, if appropriate, place funds in a risk
3	reserve.
4	History: 1971 c. 164, 218; 1973 c. 90 ss. 226, 560 (3); 1973 c. 147, 333; 1975 c. 39; 1975 c. 39; 1975 c. 189 s. 99 (1), (2); 1975 c. 224 ss. 52p, 146m; 1975 c. 307, 422; 1975 c. 430 s. 78; 1977 c. 29 ss. 560, 1656 (18); 1977 c. 83 s. 26; 1977 c. 418, 449; 1979 c. 34, 221; 1981 c. 20 ss. 759 to 763m, 2202 (20) (j); 1981 c. 329; 1981 c. 390 s. 252; 1983 a. 27 ss. 2202 (20); 1983 a. 190 s. 7; 1983 a. 192, 193, 447; 1985 a. 29, 120; 1985 a. 176 ss. 28, 30, 59 to 105; 1985 a. 332; 1987 a. 5, 27; 1989 a. 31, 107, 336, 359; 1991 a. 39, 274; 1993 a. 16; 1995 a. 27 ss. 2077 to 2111, 9126 (19), 9130 (4); 1995 a. 64, 77, 201, 289, 352, 404, 417; 1997 a. 3, 27, 35, 252; 1999 a. 9, 83; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 264, 344, 388, 406; 2007 a. 20 ss. 857 to 877, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.
, 5	INSERT 14-15
6	Section 5. 46.27 (7) (fr) 3. c. of the statutes is repealed.
7	END INSERT 14-15
8	INSERT 15-3
9	Section 6. 46.2803 (2) of the statutes is amended to read:
10	46.2803 (2) Notwithstanding s. 46.27 (7), a county in which a care management
11	organization is operating pursuant to a contract under s. 46.284 (2) or a county in
12	which a program described under s. $46.2805 \frac{(1)(a)(4k)}{(a)(9m)}$ is administered
13	may use funds appropriated under 20.435 (7) (bd) and allocated to the county under
14	s. 46.27 (7) to provide community mental health or substance abuse services and
15	supports for persons with mental illness or persons in need of services or supports
16	for substance abuse and to provide services under the Family Support Program
17	under s. 46.985.
18	History: 1999 a. 9; 2007 a. 20 ss. 934, 1019, 1020, 9121 (6) (a).  END INSERT 15-3
19	INSERT 16-15
20	Section 7. 46.2805 (7r) of the statutes is repealed.
21	SECTION 8. 46 2805 (7u) of the statutes is repealed

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END INSERT 16-15

**INSERT 18-7** 

**SECTION 9.** 46.281 (4) (c) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 103; 2005 a. 25, 386; 2007 a. 20; 2009 a. 28, 247; 2011 a. 32, 127. **END INSERT 18–7** 

#### 10 **INSERT 19-6**

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**Section 10.** 46.283 (2) (intro.) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32. END INSERT 19-6

# **INSERT 19-18**

SECTION 11. 46.283 (6) (a) 2. of the statutes is amended to read:

46.283 (6) (a) 2. At least one-fourth of the members of the governing board shall be individuals who belong to a client group served by the resource center or their family members, guardians, or other advocates. The proportion of these board members who belong to each client group, or their family members, guardians, or

1	advocates, shall be the same, respectively, as the proportion of individuals in this
2	state who receive services under s. 46.2805 to 46.2895 the family care program and
3	belong to each client group.
4	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32 SECTION 12. 46.283 (6) (a) 3. of the statutes is amended to read:
5	46.283 (6) (a) 3. An individual who has a financial interest in, or serves on the
6	governing board of, a care management organization or an organization that
7	administers a program described under s. 46.2805 (1) (a) or (b) of all-inclusive care
8	for the elderly or a Family Care Partnership Program or a managed care program
9	under s. 49.45 for individuals who are eligible to receive supplemental security
10	income under 42 USC 1381 to 1383c, which serves any geographic area also served
11	by a resource center, and the individual's family members, may not serve as members
12	of the governing board of the resource center.
13	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32 SECTION 13. 46.283 (7) (a) of the statutes is amended to read:
14	46.283 (7) (a) A resource center may provide information as required to comply
15	with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer
16	the <u>family care</u> program <del>under ss. 46.2805 to 46.2895</del> .
17	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32 SECTION 14. 46.283 (7) (b) of the statutes is amended to read:
18	46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
19	$(14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) \ and \ 938.78 (2) (a), a \ resource \ center (14) (a), 55.22 (b), 146.82, 252.11 (b), 253.07 (c), 253.07 (d), 253.0$
20	acting under this section may exchange confidential information about a client, as
21	defined in s. 46.287 (1), without the informed consent of the client, under s. 46.21
22	(2m) (c), 46.215 (1m), 46.22 (1) (dm), 46.23 (3) (e), 46.284 (7), 46.2895 (10), 51.42 (3)
23	(e) or 51.437 (4r) (b) in the county of the resource center, if necessary to enable the

1	resource center to perform its duties or to coordinate the delivery of services to the
2	client.
3	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 25, 254, 264, 386, 388; 2007 a. 20 ss. 969, 971 to 973, 976, 978 to 991; 2009 a. 2, 28, 180, 247, 249; 2011 a. 32. <b>END INSERT 19–18</b>
4	INSERT 21-3
5	SECTION 15. 46.284 (2) (bm) of the statutes, as affected by 2015 Wisconsin Act
6	(this act), is amended to read:
7	46.284 (2) (bm) The department may contract with counties, long-term care
8	districts, the governing body of a tribe or band or the Great Lakes inter-tribal
9	council, inc., or under a joint application of any of these, or with a private
10	organization that has no significant connection to an entity that operates a resource
11	center. The department may contract with any applicants that it certifies as meeting
12	the requirements specified in sub. (3) (a). The department is not required to solicit
13	proposals for contracts to be a care management organization under a competitive
14	sealed proposal process.
15	History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114. END INSERT 21-3
16	INSERT 23-3
17	Section 16. 46.284 (5) (d) 4. of the statutes is amended to read:
18	46.284 (5) (d) 4. The requirement that a care management organization place
19	funds in a risk reserve and maintain the risk reserve in an interest-bearing escrow
20	account with a financial institution, as defined in s. 69.30 (1) (b), or invest funds as
21	specified in s. 46.2895 (4) (j) 2. or 3. Moneys in the risk reserve or invested as specified
22	in this subdivision may be expended only for the provision of services under this

section. If a care management organization ceases participation under this section,

the funds in the risk reserve or invested as specified in this subdivision, minus any

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1	contribution of moneys other than those specified in par. (c), shall be returned to the
2	department. The department shall expend the moneys for the payment of
3	outstanding debts to providers of family care benefit services and for the
4	continuation of family care benefit services to enrollees.

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

END INSERT 23-3

# 6 INSERT 23-11

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**SECTION 17.** 46.284 (7) (a) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

SECTION 18. 46.284 (7) (b) of the statutes is amended to read:

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

History: 1999 a. 9; 2001 a. 16, 103; 2003 a. 33; 2005 a. 264, 386; 2007 a. 20; 2009 a. 2, 28; 2011 a. 10, 32, 126; 2013 a. 165 s. 114.

SECTION 19. 46.285 (intro.) of the statutes is amended to read:

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

1 corporation, may not directly operate both a resource center and a care management 2 organization, except as follows: History: 1999 a. 9; 2005 a. 386; 2007 a. 20. 3 **SECTION 20.** 46.285 (2) of the statutes is amended to read: 4 46.285 (2) The department may approve separation of the functions of a 5 resource center from those of a care management organization by a means other than 6 ereating a long-term care district under s. 46.2895 to serve either as a resource 7 center or as a care management organization. History: 1999 a. 9; 2005 a. 386; 2007 a. 20. 8 END INSERT 23-11 9 INSERT 24-4 10 **Section 21.** 46.2895 (1) (a) 1. b. of the statutes is amended to read: 11 46.2895 (1) (a) 1. b. Specifies the long-term care district's primary purpose, 12 which shall be to operate, under contract with the department, a resource center 13 under s. 46.283, a care management organization under s. 46.284, or a program 14 described under s. 46.2805 (1) (a) or (b) of all-inclusive care for the elderly or the 15 Family Care Partnership Program. History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10. SECTION 22. 46.2895 (1) (c) of the statutes is amended to read: 16 46.2895 (1) (c) A long-term care district may not operate a care management 17 18 organization under s. 46.284 or, a program described under s. 46.2805 (1) (a) or (b) 19 of all-inclusive care for the elderly, or the Family Care Partnership Program if the 20 district operates a resource center under s. 46.283. History: 1999 a. 9, 185; 2001 a. 30; 2005 a. 25, 264; 2007 a. 20 ss. 1021 to 1073, 9121 (6) (a); 2009 a. 180; 2011 a. 10. 21 END INSERT 24-4 22 **INSERT 25-19** SECTION 23. 46.82 (3) (a) 19. of the statutes is amended to read: 23

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	History: 1991 a. 235; 1993 a. 213; 1995 a. 27 ss. 2332, 9126 (19); 1997 a. 79; 1999 a. 9; 2007 a. 20 s. 9121 (6) (a).  SECTION 24. 46.82 (3) (a) 20. of the statutes is amended to read:
<b>⁄</b> 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	History: 1991 a. 235; 1993 a. 213; 1995 a. 27 ss. 2332, 9126 (19); 1997 a. 79; 1999 a. 9; 2007 a. 20 s. 9121 (6) (a).  END INSERT 25—19
12	INSERT 27–3
13	SECTION 25. 50.49 (6m) (b) of the statutes is amended to read:
14	50.49 (6m) (b) A program specified in s. $46.2805 \frac{(1)}{(a)} \frac{(9m)}{(9m)}$ .
<b>1</b> 5	History: 1981 c. 93 ss. 162 to 166, 184; 1989 a. 31, 316; 1993 a. 27 s. 279; Stats. 1993 s. 50.49; 1993 a. 482; 1995 a. 225; 1997 a. 27, 237; 1999 a. 9, 83; 2005 a. 187; 2007 a. 20; 2009 a. 28; 2011 a. 161.
	SECTION 26. 50.49 (6m) (c) of the statutes is amended to read:
16	SECTION 26. 50.49 (6m) (c) of the statutes is amended to read:  50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) (b) (4k).
16 17	/
	50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) (b) (4k).  History: 1981 c. 93 ss. 162 to 166, 184; 1989 a. 31, 316; 1993 a. 27 s. 279; Stats. 1993 s. 50.49; 1993 a. 482; 1995 a. 225; 1997 a. 27, 237; 1999 a. 9, 83; 2005 a. 187; 2007 a. 20; 2009 a. 28; 2011 a. 161.
17	50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) (b) (4k).  History: 1981 c. 93 ss. 162 to 166, 184; 1989 a. 31, 316; 1993 a. 27 s. 279; Stats. 1993 s. 50.49; 1993 a. 482; 1995 a. 225; 1997 a. 27, 237; 1999 a. 9, 83; 2005 a. 187; 2007  END INSERT 27–3
17 18	50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) (b) (4k).  History: 1981 c. 93 ss. 162 to 166, 184; 1989 a. 31, 316; 1993 a. 27 s. 279; Stats. 1993 s. 50.49; 1993 a. 482; 1995 a. 225; 1997 a. 27, 237; 1999 a. 9, 83; 2005 a. 187; 2007  END INSERT 27–3  INSERT 27–10
17 18 19	50.49 (6m) (c) A demonstration program specified in s. 46.2805 (1) (b) (4k).  History: 1981 c. 93 ss. 162 to 166, 184; 1989 a. 31, 316; 1993 a. 27 s. 279; Stats. 1993 s. 50.49; 1993 a. 482; 1995 a. 225; 1997 a. 27, 237; 1999 a. 9, 83; 2005 a. 187; 2007  END INSERT 27–3  INSERT 27–10  SECTION 27. 51.42 (3) (ar) 17. of the statutes is amended to read:

History: 1971 c. 125; 1973 c. 90, 198, 333, 336; 1975 c. 39, 198, 199, 224, 422; 1975 c. 428 s. 16; 1975 c. 430 ss. 24 to 31, 80; 1977 c. 26 ss. 37, 38, 75; 1977 c. 29 ss. 612 to 623p, 1656 (18); 1977 c. 193; 1977 c. 203 s. 106; 1977 c. 272; 1977 c. 354 s. 101; 1977 c. 418, 428, 447; 1979 c. 34, 117, 177, 221, 330, 355; 1981 c. 20 ss. 923 to 942, 2202 (20) (d), (n), (q); 1981 c. 93 ss. 105 to 122, 186; 1981 c. 329; 1983 a. 27 ss. 1106 to 1112, 2202 (20); 1983 a. 189 ss. 44, 329 (5); 1983 a. 192, 239, 365, 375, 524; 1985 a. 29,

120, 176; 1987 a. 3, 27, 199, 339, 366; 1989 a. 31, 122; 1991 a. 39, 274, 315; 1993 a. 16, 437, 445; 1995 a. 27 ss. 3260 to 3262, 9126 (19), 9145 (1); 1995 a. 64, 77, 92, 201, 224, 276, 352, 417; 1997 a. 27, 164, 237, 268; 1999 a. 9; 2001 a. 10, 16, 38; 2003 a. 320; 2005 a. 264, 388, 431, 434; 2007 a. 20 ss. 1819m to 1821, 9121 (6) (a); 2007 a. 45, 97; 2009 a. 28, 180, 276, 334; 2011 a. 32, 126; 2013 a. 203, 251.

SECTION 28. 51.42 (3) (ar) 18. of the statutes is amended to read:

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

History: 1971 c. 125; 1973 c. 90, 198, 333, 336; 1975 c. 39, 198, 199, 224, 422; 1975 c. 428 s. 16; 1975 c. 430 ss. 24 to 31, 80; 1977 c. 26 ss. 37, 38, 75; 1977 c. 29 ss. 612 to 623p, 1656 (18); 1977 c. 193; 1977 c. 203 s. 106; 1977 c. 272; 1977 c. 354 s. 101; 1977 c. 418, 428, 447; 1979 c. 34, 117, 177, 221, 330, 355; 1981 c. 20 ss. 923 to 942, 2202 (20) (d), (n), (q); 1981 c. 93 ss. 105 to 122, 186; 1981 c. 329; 1983 a. 27 ss. 1106 to 1112, 2202 (20); 1983 a. 189 ss. 44, 329 (5); 1983 a. 192, 239, 365, 375, 524; 1985 a. 29, 120, 176; 1987 a. 3, 27, 199, 339, 366; 1989 a. 31, 122; 1991 a. 39, 274, 315; 1993 a. 16, 437, 445; 1995 a. 27 ss. 3260 to 3262, 9126 (19), 9145 (1); 1995 a. 64, 77, 92, 201, 224, 276, 352, 417; 1997 a. 27, 164, 237, 268; 1999 a. 9; 2001 a. 10, 16, 38; 2003 a. 320; 2005 a. 264, 388, 431, 434; 2007 a. 20 ss. 1819m to 1821, 9121 (6) (a); 2007 a. 45, 97; 2009 a. 28, 180, 276, 334; 2011 a. 32, 126; 2013 a. 203, 251.

### END INSERT 27-10

## INSERT 28-3

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- 8 Section 29. 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
- 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.

History: 1971 c. 307, 322; 1973 c. 90, 333; 1975 c. 39, 199, 430; 1977 c. 26 ss. 39, 75; 1977 c. 29; 1977 c. 354 s. 101; 1977 c. 418; 1977 c. 428 s. 85, 86, 115; 1979 c. 32, 117, 221, 330, 355; 1981 c. 20, 93, 329; 1983 a. 27, 365, 375, 524; 1985 a. 29 ss. 1094 to 1105m, 3200 (56) (a); 1985 a. 120, 176, 307, 332; 1987 a. 27; 1989 a. 31, 56, 107, 262; 1991 a. 39, 274, 315; 1993 a. 16, 83; 1995 a. 27 ss. 3266m, 9116 (5), 9126 (19), 9145 (1); 1995 a. 64, 77, 92, 201, 225, 352, 417; 1997 a. 27, 35, 164, 252; 1999 a. 9; 2001 a. 16, 59; 2003 a. 33; 2005 a. 25, 264, 388; 2007 a. 20 ss. 1822 to 1824b, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.

Section 30. 51.437 (4m) (p) of the statutes is amended to read:

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

History: 1971 c. 307, 322; 1973 c. 90, 333; 1975 c. 39, 199, 430; 1977 c. 26 ss. 39, 75; 1977 c. 29; 1977 c. 29; 1977 c. 354 s. 101; 1977 c. 418; 1977 c. 428 s. 85, 86, 115; 1979 c. 32, 117, 221, 330, 355; 1981 c. 20, 93, 329; 1983 a. 27, 365, 375, 524; 1985 a. 29 ss. 1094 to 1105m, 3200 (56) (a); 1985 a. 120, 176, 307, 332; 1987 a. 27; 1989 a. 31, 56, 107, 262; 1991 a. 39, 274, 315; 1993 a. 16, 83; 1995 a. 27 ss. 3266m, 9116 (5), 9126 (19), 9145 (1); 1995 a. 64, 77, 92, 201, 225, 352, 417; 1997 a. 27, 35, 164, 252; 1999 a. 9; 2001 a. 16, 59; 2003 a. 33; 2005 a. 25, 264, 388; 2007 a. 20 ss. 1822 to 1824b, 9121 (6) (a); 2007 a. 45, 96; 2009 a. 28, 180, 334; 2011 a. 32, 126.

# 17 END INSERT 28-3

# 18 **INSERT 29–13**

19 **Section 31.** 66.0506 (1) of the statutes 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, or any other political subdivision of the state,
V	4	or instrumentality of one or more political subdivisions of the state.
	5	History: 2011 a. 10, 32; 2013 a. 166.  END INSERT 29–13
	6	INSERT 30-3
X	7	SECTION 32. 69.30 (1) (bd) of the statutes is repealed.
	8	SECTION 33. 69.30 (2) of the statutes is amended to read:
/	9	69.30 (2) A financial institution, state agency, county department, Wisconsin
	10	works agency, or service office or long-term care district or an employee of a financial
	11	institution, state agency, county department, Wisconsin works agency, or service
	12	office or long-term care district is not subject to s. $69.24(1)(a)$ for copying a certified
	13	copy of a vital record for use by the financial institution, state agency, county
	14	department, Wisconsin works agency, or service office or long-term care district,
	15	including use under s. 45.04 (5), if the copy is marked "FOR ADMINISTRATIVE
	16	USE".
	17	History: 1989 a. 313; 1991 a. 221, 269, 315; 1995 a. 27; 1997 a. 27; 1999 a. 9; 2005 a. 22; 2007 a. 20.  END INSERT 30-3
	18	INSERT 31-3
$\sqrt{}$	19	SECTION 34. 101.01 (4) of the statutes is amended to read:
	20	101.01 (4) "Employer" means any person, firm, corporation, state, county,
	21	town, city, village, school district, sewer district, drainage district, long-term care

district and other public or quasi-public corporations as well as any agent, manager,

22

,	1	representative or other person having control or custody of any employment, place
	2	of employment or of any employee.
	3	History: 1971 c. 185 ss. 1, 5; 1971 c. 228 ss. 15, 44; 1975 c. 413, 421; 1977 c. 29; 1983 a. 189 ss. 142, 143, 329 (4); 1985 a. 135 s. 83 (3); 1987 a. 161; 1993 a. 27, 184, 327; 1995 a. 27 ss. 3611 to 3629, 9116 (5); 1997 a. 237; 1999 a. 9; 2001 a. 16; 2007 a. 20; 2011 a. 32, 146.  SECTION 35. 102.01 (2) (d) of the statutes is amended to read:
	4	102.01 (2) (d) "Municipality" includes a county, city, town, village, school
	5	district, sewer district, drainage district and long-term care district and other public
	6	or quasi-public corporations.
V	7	History: 1975 c. 147 ss. 7 to 13, 54; 1975 c. 200; 1979 c. 89, 278; 1981 c. 92; 1983 a. 98, 189; 1985 a. 83; 1987 a. 179; 1989 a. 64; 1995 a. 27 ss. 3737 to 3741, 9130 (4); 1995 a. 117, 417; 1997 a. 3; 1999 a. 9, 14; 2001 a. 37; 2003 a. 139; 2007 a. 20.  SECTION 36. 102.04 (1) (a) of the statutes is amended to read:
	8	102.04 (1) (a) The state, each county, city, town, village, school district, sewer
	9	district, drainage district, long-term care district and other public or quasi-public
	10	corporations therein.
/	11	History: 1975 c. 199; 1983 a. 98; 1989 a. 64; 1993 a. 112; 1997 a. 38; 1999 a. 9; 2001 a. 37; 2005 a. 172; 2007 a. 20; 2009 a. 206.  SECTION 37. 103.001 (6) of the statutes is amended to read:
	12	103.001 (6) "Employer" means any person, firm, corporation, state, county,
	13	town, city, village, school district, sewer district, drainage district, long-term care
	14	district and other public or quasi-public corporations as well as any agent, manager,
	15	representative or other person having control or custody of any employment, place
/	16	of employment or of any employee.
	17	History: 1995 a. 27 ss. 3612, 3613, 3746, 9130 (4); 1997 a. 3; 1999 a. 9; 2007 a. 20.  SECTION 38. 111.70 (1) (j) of the statutes is amended to read:
	18	111.70 (1) (j) "Municipal employer" means any city, county, village, town,
	19	metropolitan sewerage district, school district, <del>long-term care district,</del> local cultural
	20	arts district created under subch. V of ch. 229, or any other political subdivision of
	21	the state, or instrumentality of one or more political subdivisions of the state, that

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

History: 1971 c. 124, 246, 247, 307, 336; 1973 c. 64, 65; 1977 c. 178, 186, 272, 442, 449; 1979 c. 32 s. 92 (15); 1981 c. 20, 112, 187; 1983 a. 189, 192; 1985 a. 182 s. 57; 1985 a. 318; 1987 a. 153, 399; 1991 a. 136; 1993 a. 16, 429, 492; 1995 a. 27, 225, 289; 1997 a. 27, 237; 1999 a. 9, 65; 1999 a. 150 s. 672; 2001 a. 16; 2005 a. 253; 2007 a. 20; 2009 a. 15, 21, 28, 34, 60, 402; 2011 a. 10, 32; 2013 a. 14, 20; 2013 a. 166 ss. 30, 31, 77.

# Dodge, Tamara

From:

Steinmetz, Jana D - DOA < Jana. Steinmetz@wisconsin.gov>

Sent:

Friday, January 16, 2015 1:08 PM

To:

Dodge, Tamara

Cc:

Dombrowski, Cynthia A - DOA

Subject:

Draft 0972

Hi,

Below are comments on the Family Care draft (LRB-0972/P1).

Thanks, Jana

✓ Section 8 note – fine as drafted

✓ Section 35 note – fine as drafted.

Section 37 note - fine as drafted

√Section 40 – recommend adding "...for primary and acute care services <u>under s. 49.46(2)</u> for an enrollee..."

Section 71, 73 - recommend same edit as in section 40

Section 75 – fine as drafted

Section 76 – Since the language is permissive for the department, fine as drafted.

Section 81 - We are not aware of any federally-permissable way for a county to operate both a MCO and resource center, without using a district; paragraph (2) could be eliminated.

Section 9118(b) - We want to make sure that listing the waiver amendments we should seek federal approval for doesn't bar us from seeking approval for any other changes we later determine are needed to implement the Governor's intent. Could we modify the intro to say something like: "....to implement the changes to the family care program in [this act], including:" Note we may need federal approval for changes to Partnership/PACE as

Section 9118(e) — A couple of changes are needed to this paragraph. First, the COP statute, s. 46.27, should not be listed because COP serves non-Family Care populations also. Second, we are a little nervous about a categorical statement that the Department may not enroll anyone in or administer any of the legacy waiver programs once FC implements. In prior Family Care expansions into new counties, there is a period after initial implementation, usually six months, in which waiver participants transition gradually to the MCO. Given the size and complexity of the reforms contemplated here, it is possible that transitions could take longer. In addition, it is possible that tribes may continue to operate legacy waiver programs. Lastly, the legacy waiver programs are not entitlements - the state sets maximum enrollment and funding amounts. Given all these factors, we recommend modifying (e) to provide us more flexibility, to say: "If the federal department...does not disapprove....the department may decide to end enrollment in or administration of any of the programs by dates established by the department..."