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1	3. Learning.
2	4. Mobility.
3	5. Self-direction.
4	(c) "Hospital" has the meaning provided in s. 50.33 (2).
5	(d) "Institutional setting" means a nursing home, as defined in s. 50.01 (3), a
6	state-operated long-term care facility, or any other residential facility that provides
7	long-term care to children outside of a home.
8	(e) "Residence" means the voluntary concurrence of physical presence with
9	intent to remain in a place of fixed habitation. Physical presence shall be prima facie
10	evidence of intent to remain.
11	(f) "State-operated long-term care facility" means a state center for the
12	developmentally disabled and a Wisconsin veterans home operated by the
13	department of veterans affairs under s. 45.50.
14	(g) "Voluntary" means according to an individual's free choice, if competent, or
15	by choice of his or her parent or guardian, if the individual is adjudicated
16	incompetent or is a minor.
17	(2) DEPARTMENTAL DUTIES. The department shall do all of the following to
18	establish a children's community options program:
19	(a) Review and approve or disapprove the selection of a county department to
20	administer the children's community options program.
21	(b) In consultation with representatives of counties, hospitals, and other
22	institutional settings and with recipients of children's community support services,
23	develop guidelines for implementing the program and criteria for reviewing

community options plans from counties participating in the program under this

The guidelines and criteria shall address cost-effectiveness, scope,

feasibility and impact on the quality and appropriateness of health services an
social services and shall provide counties with maximum flexibility to develo
programs that address local needs.

- (c) Review and approve or disapprove the community options plan of each county participating in the children's community options program.
- (d) Require that a county, by use of a form provided by the department or other appropriate procedure, ensure that persons receiving services under this section meet the eligibility requirements for the children's community options program.
- (e) Periodically monitor the implementation of the children's community options program.
- (f) Review and approve or disapprove the terms of risk reserve escrow accounts created under sub. (13) (f) and approve or disapprove disbursements for administrative or staff costs from the risk reserve escrow accounts.
- (4) DUTIES OF PARTICIPATING COUNTY DEPARTMENTS. Each participating county department shall do all of the following:
- (a) Appoint members to an advisory committee or appoint an existing committee in the service area as the children's community options advisory committee to assist in developing the program plan and to monitor the program. The committee shall include, but need not be limited to, the following members:
- 1. Parents of children with disabilities including, if possible, parents from families that participate in the children's community options program. To the maximum extent possible, the parents shall be representative of the various disability, racial, and ethnic groups in the service area. The members specified under this subdivision shall constitute a majority of the membership of the committee.

community options program.

1	2. Persons from the service area representing the county department under s
2	46.23, 51.42, or 51.437 and the county department under s. 46.215 or 46.22, school
3	districts, and local health departments, as defined in s. 250.01 (4). At least one of the
4	committee members selected under this subdivision shall be a person providing
5	community social services to children with disabilities who are eligible for the
6	program.
7	3. Persons in the service area who provide social or educational services to
8	children who have disabilities other than the providers specified in subd. 2.
9	(b) Cooperate with the committee appointed under par. (a) to prepare a
10	program plan. The program plan shall include all of the following:
11	1. A description of the proposed program.
12	2. The estimated number of families that will be assessed and served.
13	3. A list of specific groups, if any, that will be given priority for available
14	funding.
15	4. A description of the outreach procedures that will be used to ensure that the
16	program will be made available to children with physical, emotional, and mental
17	impairments.
18	5. The procedures that will be used to determine family needs.
19	6. A description of the methods that will be used for the development and
20	monitoring of service plans and for coordinating the provision of services and goods
21	to participating families.
22	7. A description of the methods that will be used to promote the creation of
23	informal support and advocacy systems for families.
24	8. A description of the method that will be used to monitor the children's

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(c) Submit the proposed program plan to the county board of supervisors in each
county in the service area for review. After approval by the county board of
supervisors in each county in which families are eligible to participate in the
program, the county department shall submit the proposed program plan to the
department.
(d) Administer the program or contract with a human service agency in the

- (d) Administer the program or contract with a human service agency in the service area to administer the program within the limits of state and federal funds under subs. (13) and (14).
- (e) In conjunction with the county department under s. 46.215 or 46.22, if any, in the service area and with the administering agency, if it is not the county department under s. 46.23, 51.42, or 51.437, coordinate the administration of the program with the administration of other publicly funded programs that serve children who have disabilities.
 - (f) Submit all information and reports required by the department.
- (5) Powers and duties of a private nonprofit agency with which the department contracts for service under sub. (14) (b) 3. shall have the powers and duties under this section of a county department designated to administer the program.
 - (6) Duties of administering agency shall:
 - (a) Cooperate in the development of the program plan under sub. (4) (b).
- (b) Provide information about the program and other programs for children who have disabilities to families in the service area.
 - (c) Implement the program in accordance with the program plan.
- (d) Designate one of its employees as the coordinator for each participating family.

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- (7) COUNTY DEPARTMENT DUTIES. The county department selected to administer the children's community options program shall:
- (a) Organize assessment activities specified in par. (f) and sub. (8). The county department shall utilize persons for each assessment who can determine the needs of the child being assessed and who know the availability within the county of services. The county department shall coordinate the involvement of representatives from the county departments under ss. 46.215, 46.22, 51.42 and 51.437, and health service providers in the assessment activities specified in sub. (8), as well as the child being assessed and members of the child's family or the child's guardian.
- (b) Within the limits of state and federal funds allocated under sub. (13), arrange service contracts under s. 46.036 and ensure the provision of necessary long-term community support services for each child who meets the criteria for services under the children's community options program.
- (c) Within the limits of state and federal funds allocated under sub. (13), provide for ongoing care management services in accordance with the requirements established under sub. (10) (b) 1., periodic case plan review and follow-up services for any child receiving community support services under the children's community options program.
- (d) Determine, under sub. (9), the fee, if any, for all families or guardians of children who meet the criteria to receive services and are applying for or receiving children's community support services that are funded under sub. (13) or (14).
- (e) In the instances in which a child who is provided community support services under this section for which the child or his or her parent or guardian receives direct funding, serve directly as a fiscal agent or contract with a fiscal

intermediary to serve as a fiscal agent for that child for the purposes of performing
the responsibilities and protecting the interests of the individual under the
unemployment insurance law. The county department may elect to act as a fiscal
agent or contract with a fiscal intermediary to serve as a fiscal agent for a child who
is provided long-term community support services under s. 46.275, 46.277, 46.278,
46.2785, 46.495, 51.42, or 51.437. The fiscal agent under this paragraph is
responsible for remitting any federal unemployment compensation taxes or state
unemployment insurance contributions owed by the child, including any interest
and penalties which are owed by the child; for serving as the representative of the
child in any investigation, meeting, hearing or appeal involving ch. 108 or the federal
unemployment tax act (26 USC 3301 to 3311) in which the child is a party; and for
receiving, reviewing, completing and returning all forms, reports and other
documents required under ch. 108 or the federal unemployment tax act on behalf of
the child. A child may make an informed, knowing and voluntary election to waive
the right to a fiscal agent. The waiver may be as to all or any portion of the fiscal
agent's responsibilities. The waiver may be rescinded in whole or in part at any time.

- (f) Develop assessments and care plans according to uniform criteria established by the department for children in all long-term care programs.
- (8) ASSESSMENTS. Within the limits of state and federal funds allocated under sub. (13) and within the limits of fees collected, an assessment shall be conducted for any child with a disability who is seeking services in the program.
- (9) FINANCIAL ELIGIBILITY AND FEES. (a) The department shall create a sliding scale formula for a fee chargeable for conduct of an assessment under sub. (8), for development of a case plan, and for children's long-term community support services

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that is based on the child's ability to pay, unless prohibited from payment under the
federal Medicaid law.

- (b) The county department selected to administer the program shall require all children or their parents or guardians applying for children's long—term community support services at the time of application and all children receiving the services that are funded under sub. (13) or (14) annually to provide the following information:
 - 1. A declaration of income, on a form prescribed by the department.
- 2. A declaration of costs paid annually for care and services related to the special needs or disability of the child for whom the application is made or services are provided.
- (c) From the information obtained under par. (b), the county department shall determine the amount of the fee for receipt of children's long-term community support services under this section. The county department shall require payment by the child or parent or guardian of the child of 100 percent of the amount calculated under this paragraph.
- (d) The county department shall used funds received under par (c) to pay for long-term community support services for children who are eligible for services under the children's community options program.
- (10) Services; care management requirements. (a) 1. Within the limits of state and federal funds allocated under sub. (13) and within the limits of fees collected, the department shall reimburse, if applicable, and the county department or private nonprofit agency shall provide long-term community support services to eligible children who have a disability.

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2. The department may not reimburse and the county department or private
nonprofit agency may not pay for room and board for children under the children's
community options program.

- (b) The department, after consulting with representatives of counties, hospitals, and individuals who receive services under the children's community options program under this section, shall do all of the following:
- 1. Establish minimum requirements for the provision of care management services, as defined by the department, including standards for care, times for performance of duties, and size of case loads.
- 2. Specify a reasonable schedule for phasing in the requirements established under subd. 1.
- 3. Provide technical consultation and assistance to the administrator of the program with respect to the requirements established under subd. 1.
- (c) The department need not promulgate as rules under ch. 227 the requirements under par. (b) 1. or the schedule under par. (b) 2.
- (11) FISCAL RESPONSIBILITY. Except as provided in s. 51.40, and within the limitations under sub. (13) (a) 2., the fiscal responsibility of a county for an assessment, unless the assessment is performed by an entity under a contract as specified under s. 46.284 (2), case plan, or services provided to a child under this section is as follows:
- (a) For a child seeking admission to or about to be admitted to an institutional setting, the county in which the child has residence is the county of fiscal responsibility.

(b) For a child residing in an institutional setting, except a state-operated
long-term care facility, the county in which the institution is located is the county
of fiscal responsibility.

- (c) For a child living in an institutional setting, except a state-operated long-term care facility, whose legal residence is established in another county, the county in which the legal residence is established is the county of fiscal responsibility.
- (d) For a child residing in a state-operated long-term care facility, or for a person protectively placed under ch. 55, the county in which the child has residence before he or she enters the state-operated long-term care facility or is protectively placed is the county of fiscal responsibility.
- (12) REIMBURSEMENT DISALLOWANCES. The department may disallow reimbursement under this section for services provided to children who do not meet the eligibility requirements for the children's community options program or any other eligibility requirements established by the department.
- (13) Funding. (a) Subject to pars. (b) and (h), from the appropriation under s. 20.435 (4) (bd), the department shall allocate funds to each county or private nonprofit agency with which the department contracts for all of the following purposes:
- 1. To pay assessment and case plan costs not otherwise paid by fee or under s. 49.45 or 49.78 (2). The department shall reimburse multicounty consortia for the cost of assessing children eligible for medical assistance under s. 49.46, 49.468, 49.47, or 49.471 (4) (a) as part of the administrative services of medical assistance, payable under s. 49.45 (3) (a). Counties may use unspent funds allocated under this subdivision to pay the cost of long-term community support services and for a risk reserve under par. (f).

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2. To pay the cost of providing long-term community support services described
under sub. (7) (b) not otherwise paid under s. 49.45 to children eligible for medical
assistance under s. 49.46, 49.47, or 49.471 (4) (a). The county department
administering the program may spend funds received under this paragraph only in
accordance with the case plan and service contract created for each child receiving
long-term community support services. Counties may use unspent funds allocated
under this subdivision from the appropriation under s. 20.435 (4) (bd) for a risk
reserve under par. (f).

- (b) 1. Receipt of funds under this section is subject to s. 46.495 (2).
- 2. The department may not release funds under this subsection before approving the county's community options plan.
- 3. No county may use funds received under par. (a) 2. to pay for long-term community support services provided to any child who resides in a nursing home, unless the department waives this restriction on use of funds and the services are provided in accordance with a discharge plan.
- 4. No county may use funds received under this section to purchase land or construct buildings.
- (c) The department may release funds to counties acting jointly, if the counties sign a contract approved by the secretary that explains the plans for joint sponsorship.
- (d) If the department determines that a county demonstrates a pattern of failure to serve clients whose cost of care significantly exceeds the average cost of care for children's long-term community support services provided under this section, the department may require that county to reserve a portion of funds allocated under this subsection for provision of service to those clients.

(e) The department shall, at the request of a county, carry forward up to 5
percent of the amount allocated under this subsection to the county for a calendar
year if up to 5 percent of the amount so allocated has not been spent or encumbered
by the county by December 31 of that year, for use by the county in the following
calendar year, except that the amount carried forward shall be reduced by the
amount of funds that the county has notified the department that the county wishes
to place in a risk reserve under par. (f). The department may transfer funds within
s. 20.435 (4) (bd) to accomplish this purpose. An allocation under this paragraph does
not affect a county's base allocation under this subsection and shall lapse to the
general fund unless expended within the calendar year to which the funds are
carried forward. A county may not expend funds carried forward under this
paragraph for administrative or staff costs, except administrative or staff costs that
are associated with implementation of the waiver under sub. (14) and approved by
the department.

- (f) 1. Notwithstanding s. 46.036 (3) and (5m), a county may place in a risk reserve funds that are allocated under par. (a) or sub. (14) (b) 1. and are not expended or encumbered for services under this subsection or sub. (14). The county shall notify the department of this decision and of the amount to be placed in the risk reserve. The county shall maintain the risk reserve in an interest-bearing escrow account with a financial institution, as defined in s. 69.30 (1) (b), if the department has approved the terms of the escrow. All interest from the principal shall be reinvested in the escrow account.
- 2. The annual amount of a county's expenditure for a risk reserve, as specified in subd. 1., may not exceed 10 percent of the county's most recent allocation under par. (a) and sub. (14) (b) 1. or \$750,000, whichever is less. The total amount of the

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risk reserve, including interest, may not exceed 15 percent of the county's most recent
allocation under this subsection.

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- 3. A county may expend funds maintained in a risk reserve, as specified in subd. 1., for any of the following purposes:
- a. To defray costs of children's long-term community support services under this section.
- b. If approved by the department, for administrative or staff costs under this section.
- 4. A county that maintains a risk reserve, as specified in subd. 1., shall annually, on a form prescribed by the department, submit to the department a record of the status of the risk reserve, including revenues and disbursements.
- The department may carry forward to the next state fiscal year funds allocated under this subsection and not encumbered by counties by December 31 or carried forward under par. (e). The department may transfer moneys within s. 20.435 (4) (bd) to accomplish this purpose. An allocation under this paragraph shall not affect a county's base allocation for the program. The department may allocate these transferred moneys during the next fiscal year to counties for the improvement or expansion of long-term community support services for clients whose cost of care significantly exceeds the average cost of care provided under this section, including any of the following:
 - 1. Specialized training for providers of services under this section.
 - 2. Start-up costs for developing needed services.
 - 3. Home modifications.
 - 4. Purchase of medical equipment or other specially adapted equipment.

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1	(h) Funds allocated under this subsection may not be used to replace any other
2	state and federal funds or any county funds that are currently being provided under
3	any program to a family whose child is receiving services through the children's
4	community options program.
5	(14) MEDICAL ASSISTANCE WAIVER. (a) The department may request a waiver
6	from the federal department of health and human services authorizing the
7	department to provide as part of the Medical Assistance program services for persons
8	who are eligible for children's long-term support community options program
9	services under sub. (7) (b).
10	(b) 1. Medical assistance reimbursement for services a county or a private
11	nonprofit agency, or with which the department contracts provides under this
12)	subsection shall be made from the appropriations under s. 20.435 (4) and (bd) (o) and
13	(7) (b). Payments made under sub. (13) (a) may be used as the state share for
14	purposes of Medical Assistance reimbursement.
15	3. The department may contract for services under this subsection with a
16	county or a private nonprofit agency.
17	4. No county or private nonprofit agency may use funds received under this
18	subsection to provide residential services in a group home, as defined in s. 48.02 (7),
19	that has more than 5 beds, unless the department approves the provision of services
20	in a group home that has 6 to 8 beds.
21	(c) If a county department or private nonprofit agency providing services under
22	this subsection is certified under s. 49.45 (37) (a), the waiver under s. 49.45 (37), if
23	in effect, applies to plans of care for children receiving services under this subsection.

(15) RIGHT TO HEARING. A child who is denied eligibility for services or whose

services are reduced or terminated under this section may request a hearing from the

...:...:...

. 1	department under s. 227.44, except that lack of adequate funding may not serve as
2	the basis for a request under this subsection.
3	*-0596/P4.9*Section 1539. 46.277 (5g) (b) of the statutes is renumbered
4	46.277 (5g) (b) (intro.) and amended to read:
5	46.277 (5g) (b) (intro.) This section does not apply to the delicensure of a bed
6	of an institution for mental diseases of an individual who is aged 21 to 64, who has
7	a primary diagnosis of mental illness and who otherwise meets any of the following
8	requirements of s. 46.266 (1) (a), (b) or (c).:
9	*-0596/P4.10*Section 1540. 46.277 (5g) (b) 1. and 2. of the statutes are
10	created to read:
11	46.277 (5g) (b) 1. A person who resided in the facility on the date of the finding
12	that a skilled nursing facility or intermediate care facility that provides care to
13	Medical Assistance recipients to be an institution for mental diseases whose care in
14	the facility is disallowed for federal financial participation under Medical
15	Assistance.
16	2. A person who is aged 21 to 64, who has a primary diagnosis of mental illness,
17	who would meet the level of care requirements for Medical Assistance
18	reimbursement in a skilled nursing facility or intermediate care facility but for a
19	finding that the facility is an institution for mental diseases, and for whom services
20	would be provided in place of a person specified in subd. 1. who discontinues services.
21	*-1215/P3.91*Section 1541. 46.28 (1) (a) of the statutes is amended to read:
22	46.28 (1) (a) "Authority" means the Forward Wisconsin Housing and Economic
23	Development Authority created under ch. 234 235.
24	*-1215/P3.92*Section 1542. 46.28 (3) of the statutes is amended to read:

• 1	46.28 (3) The department may authorize the authority to issue revenue bonds
2	under s. 234.61 235.61 to finance any residential facility it approves under sub. (2).
3	*-1215/P3.93*Section 1543. 46.28 (4) of the statutes is amended to read:
4	46.28 (4) The department may charge sponsors for administrative costs and
5	expenses it incurs in exercising its powers and duties under this section and under
6	s. <u>234.61</u> <u>235.61</u> .
7	*-1461/P2.80*Section 1544. 46.2803 (1) of the statutes is amended to read:
8	46.2803 (1) In order to facilitate the transition to the long-term care system
9	specified in ss. family care program as defined in s. 46.2805 to 46.2895 (4m), within
10	the limits of applicable federal statutes and regulations and if the secretary of health
11	services finds it necessary, he or she may grant a county limited waivers to or
12	exemptions from ss. 46.27 (3) (e) (intro.), 1. and 2. and (f), (5) (d) and (e), (6) (a) 1., 2.
13	and 3. and (b) (intro.), 1. and 2., (6r) (c), (7) (b), (cj) and (cm) and (11) (c) 5m. (intro.)
14	and 6. and 46.277 (3) (a), (4) (a) and (5) (d) 1m., 1n. and 2. and rules promulgated
15	under those provisions.
16	*-1461/P2.81*Section 1545. 46.2803 (2) of the statutes is amended to read:
17	46.2803 (2) Notwithstanding s. 46.27 (7), a county in which a care management
18	organization is operating pursuant to a contract under s. 46.284 (2) or a county in
19	which a program described under s. 46.2805 (1) (a) (4k) or (b) (9m) is administered
20	may use funds appropriated under 20.435 (7) (bd) and allocated to the county under
21	s. 46.27 (7) to provide community mental health or substance abuse services and
22	supports for persons with mental illness or persons in need of services or supports
23	for substance abuse and to provide services under the Family Support Program
24	under s. 46.985.

1	*-1461/P2.82*Section 1546. 46.2803 (2) of the statutes, as affected by 2015
2	Wisconsin Act (this act), is amended to read:
3	46.2803 (2) Notwithstanding s. 46.27 (7), a county in which a care management
4	organization is operating pursuant to a contract under s. 46.284 (2) or a county in
5	which a program described under s. 46.2805 (4k) or (9m) is administered may use
6	funds appropriated under 20.435 (7) (bd) and allocated to the county under s. 46.27
7	(7) to provide community mental health or substance abuse services and supports for
8	persons with mental illness or persons in need of services or supports for substance
9	abuse and to provide services under the Family Support Program under s. 46.985.
10	*-1461/P2.83*Section 1547. 46.2804 of the statutes is repealed.
11	*-1461/P2.84*Section 1548. 46.2805 (intro.) of the statutes is amended to
12	read:
13	46.2805 Definitions; long-term care. (intro.) In ss. 46.2805 to 46.2895
14	<u>46.288</u> :
15	*-1461/P2.85*Section 1549. 46.2805 (1) (intro.) of the statutes is amended to
16	read:
L 7	46.2805 (1) (intro.) "Care management organization" means all of the
18	following:
19	(cm) Before January 1, 2017, or the date specified in 2015 Wisconsin Act
20	(this act), section 9118 (9), whichever is later, an entity that is certified as meeting
21	the requirements for a care management organization under s. 46.284 (3) and that
22	has a contract under s. 46.284 (2). "Care management organization" does not mean
23	an entity that contracts with the department to operate one of the following:
24	*-1461/P2.86*Section 1550. 46.2805 (1) (a) of the statutes is repealed.
2ა	*-1461/P2.87*Section 1551. 46.2805 (1) (b) of the statutes is repealed.

1	*-1461/P2.88*Section 1552. 46.2805 (1) (dm) of the statutes is created to
2	read:
3	46.2805 (1) (dm) Beginning on January 1, 2017, or the date specified in 2015
4	Wisconsin Act (this act), section 9118 (9), whichever is later, an insurer that is
5	licensed and in compliance with the applicable provisions of chs. 600 to 646, that is
6	certified as meeting the requirements for a care management organization under s.
7	46.284 (3), and that has a contract under s. 46.284 (2).
8	*-1461/P2.89*Section 1553. 46.2805 (4) of the statutes is amended to read:
9	46.2805 (4) "Family care benefit" means financial assistance for long-term
10	care and support items for an enrollee and any financial assistance, as specified by
11	the department, for primary and acute health care services under s. 49.46 (2) for an
12	<u>enrollee</u> .
13	*-1461/P2.90*Section 1554. 46.2805 (4k) of the statutes is created to read:
14	46.2805 (4k) "Family Care Partnership Program" means an integrated health
15	and long-term care program operated under an amendment to the state Medical
16	Assistance plan under 42 USC 1396u-2 and a waiver under 42 USC 1396n (c).
17	*-1461/P2.91*Section 1555. 46.2805 (4m) of the statutes is created to read:
18	46.2805 (4m) "Family care program" means the program under s. 46.2805 to
19	46.2895 that provides the family care benefit.
20	* $-1461/P2.92*Section 1556. 46.2805 (4m)$ of the statutes, as created by 2015
21	Wisconsin Act (this act), is amended to read:
22	46.2805 (4m) "Family care program" means the program under s. 46.2805 to
23	46.2895 46.288 that provides the family care benefit.
24	*-1461/P2.93*Section 1557. 46.2805 (7r) of the statutes is repealed.
25	*-1461/P2.94*Section 1558. 46.2805 (7u) of the statutes is repealed.

benefit.

1	*-1461/P2.95*Section 1559. 46.2805 (9m) of the statutes is created to read
2	46.2805 (9m) "Program of all-inclusive care for the elderly" means ar
3	integrated health and long-term care program operated under 42 USC 1395eee or
4	1396u-4.
5	*-1461/P2.96*Section 1560. 46.2805 (10) of the statutes is amended to read
6	46.2805 (10) "Resource center" means an entity that meets the standards for
7	operation under s. 46.283 (3) or, if under contract to provide a portion of the services
8	specified under s. 46.283 (3), meets the standards for operation with respect to those
9	services, and fulfills the duties under s. 46.283 (4).
10	*-1461/P2.97*Section 1561. 46.2805 (10m) of the statutes is amended to
11	read:
12	46.2805 (10m) "Self-directed services option" means the option in the family
13	care program that is operated under a waiver from the secretary of the federa
14	department of health and human services under 42 USC 1396n (c) in which are
15	enrolled individual selects his or her own services and service providers.
16	*-1461/P2.98*Section 1562. 46.281 (1d) of the statutes is amended to read
17	46.281 (1d) Waiver request. The department shall request from the secretary
18	of the federal department of health and human services any waivers of federal
19	medicaid laws necessary to permit the use of federal moneys to provide the family
20	care benefit to recipients of medical assistance. The department shall implement
21	any waiver that is approved and that is consistent with ss. 46.2805 to 46.2895 $\underline{46.288}$
22	Regardless of whether a waiver is approved, the department may implement
23	operation of resource centers, care management organizations, and the family care

.1	*-1461/P2.99*Section 1563. 46.281 (1g) (a) of the statutes is renumbered
2	46.281 (1g) and amended to read:
3	46.281 (1g) Contracting for resource centers and care management
4	ORGANIZATIONS. Subject to par. (b), the The department may contract with entities or
5	resource centers as provided under s. 46.283 (2) to provide any of the services under
6	s. 46.283 (3) and (4) as resource centers in any geographic area in the state, and may
7	contract with entities as provided under s. 46.284 (2) to administer the family care
8	benefit as care management organizations in any geographic area in the state.
9	*-1461/P2.100*Section 1564. 46.281 (1g) (b) of the statutes is repealed.
10	*-1461/P2.101*Section 1565. 46.281 (1n) (b) 3. of the statutes is amended to
11	read:
12	46.281 (1n) (b) 3. Conduct ongoing evaluations of managed care programs for
13	provision of long-term care services that are funded by medical assistance, as
14	defined in s. 46.278 (1m) (b), as to client access to services, the availability of client
15	choice of living and service options, quality of care, and cost-effectiveness. In
16	evaluating the availability of client choice, the department shall evaluate the
17	opportunity for a client to arrange for, manage, and monitor his or her family care
18	benefit directly or with assistance, self-directed services option as specified in s.
19	46.284 (4) (e).
20	*-1461/P2.102*Section 1566. 46.281 (1n) (b) 4. of the statutes is amended to
21	read:
22	46.281 (1n) (b) 4. Require that quality assurance and quality improvement
23	efforts be included throughout the long-term care system specified in ss. 46.2805 to
24	46.2895 family care program.

*-1461/P2.103*Section 1567. 46.281 (1n) (d) of the statutes is repealed.

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*-1461/P2.104*Section 1568. 46.281 (1n) (e) of the statutes is amended to read:

46.281 (1n) (e) Contract with a person to provide the advocacy services described under s. 16.009 (2) (p) 1. to 5. to actual or potential recipients of the family care benefit who are under age 60 or to their families or guardians. The department may not contract under this paragraph with a county or with a person who has a contract with the department to provide services under s. 46.283 (3) and (4) as a resource center or other entity or to administer the family care benefit as a care management organization. The contract under this paragraph shall include as a goal that the provider of advocacy services provide one advocate for every 2,500 individuals under age 60 who receive the family care benefit or who participates in the self-directed services option.

*-1461/P2.105*Section 1569. 46.281 (3) of the statutes is amended to read:

46.281 (3) Duty of the Secretary. The secretary shall certify to each county, hospital, nursing home, community—based residential facility, adult family home, and residential care apartment complex the date on which a resource center or other entity under contract under s. 46.283 (2) that serves the area of the county, hospital, nursing home, community—based residential facility, adult family home, or residential care apartment complex is first available to perform functional screenings and financial and cost—sharing screenings. To facilitate phase—in of services of resource centers, the secretary may certify that the resource center or other entity is available for specified groups of eligible individuals or for specified facilities in the county.

*-1461/P2.106*Section 1570. 46.281 (4) (c) of the statutes is amended to read:

T	46.281 (4) (c) Each county in which the department has a contract with an
2	entity to administer the family care benefit, and in which the department had such
3	a contract before January 1, 2006, shall annually either pay the department or agree
4	to reduce the community aids distribution to the county under s. 46.40 (2) by the
5	amount that the county paid the department, or by which the county's community
6	aids distribution was reduced, in calendar year 2006 to fund the family care program
7	under ss. 46.2805 to 46.2895.
8	*-1461/P2.107*Section 1571. 46.281 (4) (d) of the statutes is amended to
9	read:
10	46.281 (4) (d) The department shall deposit payments made by counties under
11	this subsection in the appropriation account under s. $20.435 \frac{(7) (g)}{(4) (h)}$.
12	*-1461/P2.108*Section 1572. 46.2825 of the statutes is repealed.
13	*-1461/P2.109*Section 1573. 46.283 (title) of the statutes is amended to read:
14	46.283 (title) Resource centers; resource functions.
15	*-1461/P2.110*Section 1574. 46.283 (1) (a) (intro.) and 1. of the statutes are
16	consolidated, renumbered 46.283 (1) (a) and amended to read:
17	46.283 (1) (a) A county board of supervisors and, in a county with a county
18	executive or a county administrator, the county executive or county administrator,
19	may decide all of the following: 1. Whether whether to authorize one or more county
20	departments under s. 46.21, 46.215, 46.22 or 46.23 or an aging unit under s. 46.82
21	$\left(1\right)\left(a\right)1.,2.,$ or $3.$ to apply to the department for a contract to operate a resource center
22.	and, if so, which to authorize and what client group to serve.
23	*-1461/P2.111*Section 1575. 46.283 (1) (a) 2. of the statutes is repealed.
24	*-1461/P2.112*Section 1576. 46.283 (2) (intro.) of the statutes is renumbered
25	46.283 (2) and amended to read:

46.283 (2) Exclusive Resource Center Contract; Contract for Certain
FUNCTIONS. 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
entity or 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:. The department may contract with
an entity other than a resource center to perform certain functions of a resource
center.
*-1461/P2.113*Section 1577. 46.283 (2) of the statutes, as affected by 2015
Wisconsin Act (this act), is amended to read:
46.283 (2) Resource center contract; contract for certain functions. 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 entity or
nonprofit organization if the department determines that the organization has no
significant connection to an entity that operates a care management organization.
The department may contract with an entity other than a resource center to perform
certain functions of a resource center.
*-1461/P2.114*Section 1578. 46.283 (2) (a) of the statutes is repealed.
*-1461/P2.115*Section 1579. 46.283 (2) (b) of the statutes is repealed.
*-1461/P2.116*Section 1580. 46.283 (3) (title) of the statutes is repealed and
recreated to read:

46.283 (3) (title) Resource function duties.

1	*-1461/P2.117*Section 1581. 46.283 (3) (intro.) of the statutes is amended to
2	read:
3	46.283 (3) (intro.) The department shall assure that at least all may in a
4	contract with a resource center or other entity specify that the resource center or
5	other entity provide any of the following are available to a person who contacts a
6	resource center for service services or functions:
7	*-1461/P2.118*Section 1582. 46.283 (3) (e) of the statutes is amended to read
8	46.283 (3) (e) A determination of financial eligibility and of the maximum
9	amount of cost sharing required for a person who is seeking long-term care services
10	or the family care benefit, under standards prescribed by the department.
11	*-1461/P2.119*Section 1583. 46.283 (4) (title) of the statutes is amended to
12	read:
13	46.283 (4) (title) Duties: Resource Centers.
14	*-1461/P2.120*Section 1584. 46.283 (4) (a) of the statutes is renumbered
15	46.283 (3) (L) and amended to read:
16	46.283 (3) (L) Provide Provision of services statewide or within the entire
17	geographic area prescribed for the resource center or other entity by the department
18	as specified in the contract.
19	*-1461/P2.121*Section 1585. 46.283 (4) (e) of the statutes is renumbered
20	46.283 (3) (m) and amended to read:
21	46.283 (3) (m) Provide information Information about the services of the
22	resource center or other entity, including the services specified in sub. (3) (d), about
23	assessments under s. 46.284 (4) (b) and care plans under s. 46.284 (4) (c), and about
24	the family care benefit and the self-directed services option to all older persons and
25	adults with a physical or developmental disability who are residents of nursing

homes, community-based residential facilities, adult family homes, and residential
care apartment complexes in the area of the resource center or other entity when the
benefit under s. 46.286 first becomes available in the county where the nursing home,
community-based residential facility, adult family home, or residential care
apartment complex is located.

*-1461/P2.122*Section 1586. 46.283 (4) (f) of the statutes is renumbered 46.283 (3) (n) and amended to read:

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

*-1461/P2.123*SECTION 1587. 46.283 (4) (g) of the statutes is renumbered 46.283 (3) (o) and amended to read:

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

1	admission or about to be admitted for whom a functional screening was performed
2	within the previous 6 months.
3	*-1461/P2.124*Section 1588. 46.283 (4) (j) of the statutes is repealed.
4	*-1461/P2.125*Section 1589. 46.283 (5) of the statutes is amended to read:
5	46.283 (5) Funding. From the appropriation accounts under s. 20.435 (4) (b),
(6)	(bd), (bm), (gm), (pa), and (w) and (7) (b), (bd), and (md), the department may contract
7	with organizations that meet standards under sub. (3) for performance of the duties
8	under sub. (4) (3) and shall distribute funds for services provided by resource centers
9	and other entities.
10	*-1461/P2.126*Section 1590. 46.283 (6) of the statutes is repealed.
11	*-1461/P2.127*Section 1591. 46.283 (7) (intro.) of the statutes is amended to
12	read:
13	46.283 (7) (intro.) No record, as defined in s. 19.32 (2), of a resource center or
14 15	other contracted entity under s. 46.283 (2) that contains personally identifiable
15	information, as defined in s. 19.62 (5), concerning an individual who receives services
16	from the resource center may be disclosed by the resource center without the
17	individual's informed consent, except as follows:
18	*-1461/P2.128*Section 1592. 46.283 (7) (a) of the statutes is amended to read:
19	46.283 (7) (a) A resource center or other contracted entity under sub. (2) may
20	provide information as required to comply with s. 16.009 (2) (p) or 49.45 (4) or as
21	necessary for the department to administer the family care program under ss.
22	46.2805 to 46.2895.
23	*-1461/P2.129*Section 1593. 46.283 (7) (b) of the statutes is amended to read:
24	46.283 (7) (b) Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.83, 51.30, 51.45
25	(14) (a), 55.22 (3), 146.82, 252.11 (7), 253.07 (3) (c) and 938.78 (2) (a), a resource center

or other contracted entity under sub. (2) 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), 46.284 (7), 46.2895 (10), 51.42 (3) (e) or 51.437 (4r) (b) in the county
operating area of the resource center or other entity, if necessary to enable the
resource center or other entity to perform its duties or to coordinate the delivery of
services to the client.

*-1461/P2.130*Section 1594. 46.283 (7) (b) of the statutes, as affected by 2015 Wisconsin Act (this act), is amended to read:

46.283 (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 resource center or other contracted entity under sub. (2) 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), 46.284 (7), 46.2895 (10), 51.42 (3) (e) or 51.437 (4r) (b) in the operating area of the resource center or other entity, if necessary to enable the resource center or other entity to perform its duties or to coordinate the delivery of services to the client.

*-1461/P2.131*Section 1595. 46.284 (1) (a) (intro.) and 1. of the statutes are consolidated, renumbered 46.284 (1) (a) and amended to read:

46.284 (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, 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

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

- *-1461/P2.132*Section 1596. 46.284 (1) (a) 2. of the statutes is repealed.
- *-1461/P2.133*Section 1597. 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.
- *-1461/P2.134*SECTION 1598. 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 not required to solicit proposals for contracts to be a care management organization under a competitive sealed proposal process.
- *-1461/P2.135*SECTION 1599. 46.284 (2) (bm) of the statutes, as affected by 2015 Wisconsin Act (this act), 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. The department may contract with any applicants that it certifies as meeting
the requirements specified in sub. (3) (a). The department is not required to solicit
proposals for contracts to be a care management organization under a competitive
sealed proposal process.
*-1461/P2.136*Section 1600. 46.284 (2) (c) of the statutes is repealed.
*-1461/P2.137*Section 1601. 46.284 (2) (d) of the statutes is repealed.
*-1461/P2.138*SECTION 1602. 46.284 (3) (b) 10. of the statutes is amended to
read:
46.284 (3) (b) 10. Coverage statewide or for a geographic area specified by the
department if the department grants the applicant an exception to statewide
coverage.
*-1461/P2.139*Section 1603. 46.284 (3) (b) 11. of the statutes is amended to
read:
46.284 (3) (b) 11. The ability to develop strong linkages with systems and
services that are not directly within the scope of the applicant's responsibility but
that are important to the target group that it proposes to serve, including.
11m. If the department chooses to make primary and acute health care services
part of the family care benefit, the ability to provide or provide access to primary and
acute health care services under s. 49.46 (2) as determined by the department.

*-1461/P2.140*Section 1604. 46.284 (3m) of the statutes, is repealed.

*-1461/P2.141*Section 1605. 46.284 (4) (e) of the statutes is amended to read:

46.284 (4) (e) Provide, within guidelines established by the department, a
mechanism self-directed services option by which an enrollee may arrange for,
manage, and monitor his or her family care benefit directly or with the assistance of
another person chosen by the enrollee. The care management organization shall
provide each enrollee with a form on which the enrollee shall indicate whether he or
she has been offered the self-directed services option under this paragraph and
whether he or she has accepted or declined the self-directed services 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.

*-1461/P2.142*SECTION 1606. 46.284 (5) (a) of the statutes is amended to read: 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (bd), (g), (gm), (h), (im), (o), and (w) and (7) (b), (bd), and (g), the department shall provide funding on a capitated payment basis for the provision of services under this section. Notwithstanding s. 46.036 (3) and (5m), a care management organization that is under contract with the department may expend the funds, consistent with this section, including providing payment, on a capitated basis, to providers of services under the family care benefit.

*-1461/P2.143*SECTION 1607. 46.284 (5) (d) 4. of the statutes is amended to read:

46.284 (5) (d) 4. The requirement that a care management organization place funds in a risk reserve and maintain the risk reserve in an interest-bearing escrow account with a financial institution, as defined in s. 69.30 (1) (b), or invest funds as

specified in s. 46.2895 (4) (j) 2. or 3. Moneys in the risk reserve or invested as specified 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 contribution of moneys other than those specified in par. (c), shall be returned to the department. The department shall expend the moneys for the payment of outstanding debts to providers of family care benefit services and for the continuation of family care benefit services to enrollees.

*-1461/P2.144*Section 1608. 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 elient 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.

*-1461/P2.145*Section 1609. 46.284 (7) (a) of the statutes is amended to read: 46.284 (7) (a) A care management organization may provide information as required to comply with s. 16.009 (2) (p) or 49.45 (4) or as necessary for the department to administer the <u>family care</u> program under ss. 46.2805 to 46.2895.

*-1461/P2.146*Section 1610. 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

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1	(7), 46.2895 (10), 51.42 (3) (e) or 51.437 (4r) (b) in the county of the care management
2	organization, if necessary to enable the care management organization to perform
3	its duties or to coordinate the delivery of services to the client.
4	*-1461/P2.147*Section 1611. 46.285 (intro.) and (1) of the statutes are
5	consolidated, renumbered 46.285 and amended to read:
6	46.285 Operation of resource center and care management
7	organization. In order to meet federal requirements and assure federal financial
8	participation in funding of the family care benefit, a county, a tribe or band, -a
9	long-term care district or an organization, including a private, nonprofit
10	corporation, may not directly operate both a resource center and a care management
11	organization, except as follows: (1) For that for an entity with which the department
12	has contracted under s. 46.281 (1) (e) 1., 2005 stats., provision of the services
13	specified under s. 46.283 (3) (b), (e), (f) and (g) shall be structurally separate from the
14	provision of services of the care management organization by January 1, 2001.
15	*-1461/P2.148*Section 1612. 46.285 (2) of the statutes is repealed.
16	*-1461/P2.149*Section 1613. 46.286 (3g) of the statutes is created to read:
17	46.286 (3g) Transferring care management organizations. An enrollee may
18	transfer his or her enrollment to a different care management organization but only
19	during an open enrollment period specified by the department, unless the enrollee
20	meets an exception specified by the department.

*-1461/P2.150*Section 1614. 46.287 (2) (c) of the statutes is amended to read: 46.287 (2) (c) Information regarding the availability of advocacy services and notice of adverse actions taken and appeal rights shall be provided to a client by the resource center or other contracted entity under s. 46.283 (2) or care management organization in a form and manner that is prescribed by the department by rule.

. 1	*-1461/P2.151*Section 1615. 46.2895 of the statutes, as affected by 2015
2	Wisconsin Act (this act), is repealed.
3	*-1461/P2.152*Section 1616. 46.2895 (1) (a) (intro.) of the statutes is
4	amended to read:
5	46.2895 (1) (a) (intro.) A Except as provided in par. (f), a county, a tribe or band,
6	or any combination of counties or tribes or bands, may create a special purpose
7	district that is termed a "long-term care district", that is a local unit of government,
8	that is separate and distinct from, and independent of, the state and the county or
9	tribe or band that created it, and that has the powers and duties specified in this
10	section, if each county or tribe or band that participates in creating the district does
11	all of the following:
12	*-1461/P2.153*Section 1617. 46.2895 (1) (a) 1. b. of the statutes is amended
13	to read:
14	46.2895 (1) (a) 1. b. Specifies the long-term care district's primary purpose,
15	which shall be to operate, under contract with the department, a resource center
16	under s. 46.283, a care management organization under s. 46.284, or a program
17	described under s. 46.2805 (1) (a) or (b) of all-inclusive care for the elderly or the
18	Family Care Partnership Program.
19	*-1461/P2.154*Section 1618. 46.2895 (1) (c) of the statutes is amended to
20	read:
21	46.2895 (1) (c) A long-term care district may not operate a care management
22	organization under s. 46.284 or, a program described under s. 46.2805 (1) (a) or (b)
23	of all-inclusive care for the elderly, or the Family Care Partnership Program if the
24	district operates a resource center under s. 46.283.

*-1461/P2.155*Section 1619. 46.2895 (1) (f) of the statutes is created to read:

1 ·	46.2895 (1) (f) No county, tribe, band, or combination of counties, tribes, or
2	bands, may create a long-term care district after June 30, 2015.
3	*-1461/P2.156*Section 1620. 46.2895 (4) (intro.) of the statutes is amended
4	to read:
5	46.2895 (4) Powers. (intro.) Subject to sub. subs. (1) (c) and (12m), a long-term
6	care district has all the powers necessary or convenient to carry out the purposes and
.7	provisions of the family care program ss. 46.2805 to 46.2895. In addition to all these
8	powers, a long-term care district may do all of the following:
9	*-1461/P2.157*Section 1621. 46.2895 (4) (dm) of the statutes is amended to
10	read:
11	46.2895 (4) (dm) Subject to sub. (1) (c), enter into a contract with the
12	department to operate <u>a</u> the program described under s. 46.2805 (1) (a) or (b) of
13	all-inclusive care for the elderly or the Family Care Partnership Program and
14	provide services related to the contracted services.
15	*-1461/P2.158*Section 1622. 46.2895 (8) (a) (intro.) of the statutes is
16	amended to read:
17	46.2895 (8) (a) (intro.) A Subject to sub. (12m), a long-term care district board
18	that is created at least in part by a county shall do all of the following:
19	*-1461/P2.159*Section 1623. 46.2895 (12m) of the statutes is created to read:
20	46.2895 (12m) REQUIRED DISSOLUTION. A long-term care district that exists on
21	June 30, 2015, shall dissolve under the procedures in sub. (13) before June 30, 2017,
22	or before a date established by the department, whichever is later.
23	*-1150/1.1*Section 1624. 46.2896 of the statutes is created to read:

46.2896 Counting promissory notes as assets. (1) In this section:

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1	(a) "Long-term care program" means the long-term care program under s.
2	46.27, 46.275, 46.277, 46.278, or 46.2785; the family care program providing the
$\begin{pmatrix} 3 \end{pmatrix}$	benefit under s. 46.286; the Family Care Partnership program; or the long-term care
$\overline{\left(4\right)}$	program defined in s. 46.2899 (1).
5	(b) "Promissory note" means a written, unconditional agreement, given in
6	return for goods, money loaned, or services rendered, under which one party
7	promises to pay another party a specified sum of money at a specified time or on
8	demand.
9	(2) When determining or redetermining an individual's financial eligibility for
10	a long-term care program, the department shall include a promissory note as a
11	countable asset if all of the following apply:
12	(a) The individual applying for or receiving benefits under the long-term care
13	program or his or her spouse provided the goods, money loaned, or services rendered
14	for the promissory note.
15	(b) The promissory note was entered into or purchased on or after the effective
16	date of this paragraph [LRB inserts date].
17	(c) The promissory note is negotiable, assignable, and enforceable and does not
18	contain any terms making it unmarketable.
19	(3) A promissory note is presumed to be negotiable and its asset value is the
20	outstanding principal balance at the time the individual applies for the long-term
21	care program or at the time the individual's eligibility for the long-term care
22	program is redetermined, unless the individual shows by credible evidence from a

*-1461/P2.160*Section 1625. 46.2897 of the statutes is repealed.

market value, which will then be considered the asset value.

knowledgeable source that the note is nonnegotiable or has a different current

1	-1401/F2.101 SECTION 1020. 40.2099 (1) of the statutes is repeated.
2	*-1461/P2.162*Section 1627. 46.2899 (3) of the statutes is amended to read:
3	46.2899 (3) ELIGIBILITY. The department shall consider as eligible for the
4	waiver program described under sub. (2) only individuals who are receiving
5	post-secondary education in a setting that is distinguishable from the institution.
6	The department shall set the financial eligibility requirements and functional
7	eligibility requirements for the waiver program described under sub. (2) the same as
8	the financial eligibility requirements and functional eligibility requirements for the
9	self-directed services option of the family care program, as defined in s. 46.2805
10	(4m), except for the requirement to be an individual who is developmentally disabled
11	and who is receiving post-secondary education on the grounds of a institution.
12	*-1461/P2.163*Section 1628. 46.2899 (4) of the statutes is amended to read:
13	46.2899 (4) Services and benefits. The department shall provide the same
14	services under the waiver program described in sub. (2) as it provides under the
15	self-directed services option of the family care program, as defined in s. 46.2805
16	(4m). The department shall determine the funding amount for a waiver program
17	participant under this section.
18	*-1461/P2.164*Section 1629. 46.29 (1) (intro.) of the statutes is amended to
19	read:
20	46.29 (1) (intro.) From the appropriation account under s. 20.435 (7) $\underline{(4)}$ (a), the
21	department shall distribute at least \$16,100 in each fiscal year for operation of the
22	council on physical disabilities. The council on physical disabilities shall do all of the
23	following:

*-1059/9.61*Section 1630. 46.29 (3) (d) of the statutes is amended to read:

1	46.29 (3) (d) The director of the office administrator of the division of state
2	employment relations personnel management in the department of administration.
3	*-0807/P6.202*Section 1631. 46.29 (3) (e) of the statutes is amended to read:
4	46.29 (3) (e) The secretary of safety and professional services financial
5	institutions and professional standards.
6	*-0971/P5.514*Section 1632. 46.29 (3) (g) of the statutes is amended to read:
. 7	46.29 (3) (g) The president of the University of Wisconsin System Authority.
8	*-1461/P2.165*Section 1633. 46.295 (1) of the statutes is amended to read:
9	46.295 (1) The department may, on the request of any hearing-impaired
10	person, city, village, town, or county or private agency, provide funds from the
11	appropriation accounts under s. 20.435 (4) (hs) and (7) (d) and (hs) to reimburse
12	interpreters for hearing-impaired persons for the provision of interpreter services.
13	*-1461/P2.166*Section 1634. 46.40 (1) (a) of the statutes is amended to read:
14	46.40 (1) (a) Within the limits of available federal funds and of the
15	appropriations under s. 20.435 (7) (b) and (o), the department shall distribute funds
16	for community social, mental health, developmental disabilities, and alcohol and
17	other drug abuse services and for services under ss. 46.87, 46.985, and 51.421 to
18	county departments under ss. 46.215, 46.22, 46.23, 51.42, and 51.437 and to county
19	aging units, as provided in subs. (2), (2m), (8) , and (7) to (9).
20	*-1461/P2.167*Section 1635. 46.40 (7) of the statutes is repealed.
21	*-0596/P4.11*Section 1636. 46.40 (7m) of the statutes is created to read:
22	46.40 (7m) State community mental health allocation. For community
23	mental health services, the department shall distribute not less than \$24,348,700 in
24	each fiscal year.
25	*-1461/P2.168*Section 1637. 46.40 (14m) of the statutes is amended to read:

(6) and amended to read:

46.40	(14m) COUNTY COMMUNITY AIDS BUDGETS. Before December 1 of each year,
each count	y department under ss. 46.215 , 46.22 , 46.23 , 51.42 and 51.437 and each
tribal gove	rning body shall submit to the department a proposed budget for the
expenditur	e of funds allocated under this section or carried forward under s. 46.45
(3) (a). T	he proposed budget shall be submitted on a form developed by the
departmen	t and approved by the department of administration.
*-146	51/P2.169*Section 1638. 46.45 (3) (a) of the statutes is amended to read:
46.45	(3) (a) Except as provided in par. (b), at the request of a county, tribal
governing	body, or private nonprofit organization, the department shall carry
forward up	to 3% of the total amount allocated to the county, tribal governing body,
or nonprofi	t organization for a calendar year, not including the amount allocated to
the county	under s. 46.40 (7), which amount may be carried forward as provided in
par. (c).	All funds carried forward for a tribal governing body or nonprofit
organizatio	n and all funds allocated under s. 46.40 (2m) carried forward for a county
shall be use	ed for the purpose for which the funds were originally allocated. Other
funds carri	ed forward under this paragraph may be used for any purpose under s.
20.435 (7) (b), except that a county may not use any funds carried forward under this
paragraph	for administrative or staff costs. An allocation of carried-forward funding
under this	paragraph does not affect a county's base allocations under s. 46.40 (2),
(2m), (8), as	ad (9).
*-146	1/P2.170*Section 1639. 46.45 (3) (c) of the statutes is repealed.
*-146	1/P2.171*Section 1640. 46.45 (6) (a) of the statutes is renumbered 46.45

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

...:...

1	unit services costs above planned levels, and for increased costs due to population
2	shifts. An allocation of carried-forward funding under this paragraph does not affect
3	a county's base allocations under s. 46.40 (2), (2m), (8), and (9).
4	*-1461/P2.172*Section 1641. 46.45 (6) (b) of the statutes is repealed.
5	*-1461/P2.173*Section 1642. 46.56 (3) (a) 4. of the statutes is repealed.
6	*-1461/P2.174*Section 1643. 46.56 (10) of the statutes is repealed.
7	*-1461/P2.175*Section 1644. 46.82 (3) (a) 19. of the statutes is amended to
8	read:
9	46.82 (3) (a) 19. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
10	under s. 46.283 (1) (a) 1., apply to the department to operate a resource center under
11	s. 46.283 and, if the department contracts with the county under s. 46.283 (2), operate
12	the resource center.
13	*-1461/P2.176*Section 1645. 46.82 (3) (a) 20. of the statutes is amended to
14	read:
15	46.82 (3) (a) 20. If an aging unit under sub. (1) (a) 1. or 2. and if authorized
16	under s. 46.284 (1) (a) 1., apply to the department to operate a care management
17	organization under s. 46.284 and, if the department contracts with the county under
18	s. 46.284 (2), operate the care management organization and, if appropriate, place
19	funds in a risk reserve.
20	*-0807/P6.203*Section 1646. 46.90 (5m) (br) 5. of the statutes is amended to
21	read:
22	16.00 (5m) (by) 5. Pofor the cose to the department of refeter and according
	46.90 (5m) (br) 5. Refer the case to the department of safety and professional
23	services <u>financial institutions and professional standards</u> if the financial

1	to be registered under s. 202.13 or 202.14 or to hold a credential, as defined in s.
2	440.01 (2) (a), under chs. 440 to 460.
3	*-0807/P6.204*Section 1647. 46.90 (5m) (br) 5g. of the statutes is repealed.
4	*-0434/P2.5*Section 1648. 46.96 (2) of the statutes is amended to read:
5	46.96 (2) The department shall make grants from the appropriations under s.
6	20.435 (7) (c), (kc), and (na) to independent living centers for nonresidential services
7	to severely disabled individuals.
8	*-1461/P2.177*Section 1649. 46.985 of the statutes is repealed.
9	*-1461/P2.178*Section 1650. 46.99 (4) of the statutes is amended to read:
10	46.99 (4) From the appropriation account under s. 20.435 (4) (o), the
11	department may distribute to counties that provide services under this section the
12	amount of federal moneys received by the state as the federal share of medical
13	assistance for those services, minus the amount transferred to the appropriation
14	account under s. $20.435(7)(4)(im)$ for the department's costs of administering this
15	section. Counties shall use moneys distributed under this section to provide services
16	under this section or s. 51.44.
17	*-0434/P2.6*Section 1651. 47.02 (3m) (p) of the statutes is repealed.
18	* $-0311/P4.1*Section 1652. 48.366 (1)$ of the statutes is renumbered $48.366 (1)$
19	(intro.) and amended to read:
20	48.366 (1) (intro.) APPLICABILITY. This section applies to a person who is a
21	full-time student of a secondary school or its vocational or technical equivalent, for
22	whom an individualized education program under s. 115.787 is in effect, and to whom
23	any of the following applies:
24	(a) The person is placed in a foster home, group home, or residential care center

for children and youth, in the home of a relative other than a parent, or in a

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supervised independent living arrangement under an order under s. 48.355, 48.357,
or 48.365 that terminates as provided in s. 48.355 (4) (b) 1., 2., or 3., 48.357 (6) (a) 1.,
2., or 3., or 48.365 (5) (b) 1., 2., or 3. on or after the person attains 18 years of age or
who.

(b) The person is in the guardianship and custody of an agency specified in s. 48.427 (3m) (a) 1. to 4. or (am) under an order under s. 48.43, who is a full-time student of a secondary school or its vocational or technical equivalent, and for whom an individualized education program under s. 115.787 is in effect that terminates on the date on which the person attains 18 years of age.

*-0311/P4.2*Section 1653. 48.366 (1) (c) of the statutes is created to read:

48.366 (1) (c) The person is placed in a shelter care facility on the date on which an order specified in par. (a) or (b) terminates.

*-0311/P4.3*Section 1654. 48.366 (2) (a) of the statutes is amended to read:

48.366 (2) (a) Not less than 120 days before an order described in sub. (1) (a) or (b) terminates, the agency primarily responsible for providing services under the order shall request the person who is the subject of the order to indicate whether he or she wishes to be discharged from out-of-home care on termination of the order or wishes to continue in out-of-home care under a voluntary agreement under sub. (3). If the person is subject to an order under s. 48.355, 48.357, or 48.365 described in sub. (1) (a), the agency shall also request the person to indicate whether he or she wishes to continue in out-of-home care until the date specified in s. 48.365 (5) (b) 4. under an extension of the order. If the person indicates that he or she wishes to be discharged from out-of-home care on termination of the order, the agency shall request a transition-to-discharge hearing under par. (b). If the person indicates that he or she wishes to continue in out-of-home care under an extension of an order

under s. 48.355, 48.357, or 48.365 described in sub. (1) (a), the agency shall request an extension of the order under s. 48.365. If the person indicates that he or she wishes to continue in out-of-home care under a voluntary agreement under sub. (3), the agency and the person shall enter into such an agreement.

*-0311/P4.4*Section 1655. 48.366 (2) (b) 1. of the statutes is amended to read: 48.366 (2) (b) 1. If the person who is the subject of an order described in sub. (1) (a) or (b) indicates that he or she wishes to be discharged from out-of-home care on termination of the order, the agency primarily responsible for providing services to the person under the order shall request the court to hold a transition-to-discharge hearing and shall cause notice of that request to be provided to that person, the parent, guardian, and legal custodian of that person, any foster parent or other physical custodian described in s. 48.62 (2) of that person, that person's court-appointed special advocate, all parties who are bound by the dispositional order, and, if that person is an Indian child who has been removed from the home of his or her parent or Indian custodian, that person's Indian custodian and tribe.

*-0311/P4.5*Section 1656. 48.366 (2) (b) 3. of the statutes is amended to read: 48.366 (2) (b) 3. At the hearing the court shall review with the person who is the subject of an order described in sub. (1) (a) or (b) the options specified in par. (a) and. If the person is subject to an order under s. 48.355, 48.357, or 48.365 described in sub. (1) (a), the court shall also advise the person that he or she may continue in out-of-home care as provided in par. (a) under an extension of an order under s. 48.355, 48.357, or 48.365 described in sub. (1) (a) or under a voluntary agreement under sub. (3).

*-0311/P4.6*Section 1657. 48.366 (2) (b) 4. of the statutes is amended to read:

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48.366 (2) (b) 4. If the court determines that the person who is the subject of an order described in sub. (1) (a) or (b) understands that he or she may continue in out-of-home care, but wishes to be discharged from that care on termination of the order, the court shall advise the person that he or she may enter into a voluntary agreement under sub. (3) at any time before he or she is granted a high school or high school equivalency diploma or reaches 21 years of age, whichever occurs first, so long as he or she is a full-time student at a secondary school or its vocational or technical equivalent and an individualized education program under s. 115.787 is in effect for If the court determines that the person wishes to continue in out-of-home care under an extension of an order under s. 48.355, 48.357, or 48.365 described in sub. (1) (a), the court shall schedule an extension hearing under s. 48.365. If the court determines that the person wishes to continue in out-of-home care under a voluntary agreement under sub. (3), the court shall order the agency primarily responsible for providing services to the person under the order to provide transition-to-independent-living services for the person under a voluntary agreement under sub. (3).

*-0311/P4.7*Section 1658. 48.366 (3) (a) of the statutes is amended to read: 48.366 (3) (a) On termination of an order described in sub. (1) (a) or (b), the person who is the subject of the order, or the person's guardian on behalf of the person, and the agency primarily responsible for providing services to the person under the order may enter into a transition-to-independent-living agreement under which the person continues in out-of-home care and continues to be a full-time student at a secondary school or its vocational or technical equivalent under an individualized education program under s. 115.787 until the date on which the person reaches 21 years of age, is granted a high school or high school equivalency

1	*-0311/P4.8*Section 1659. 48.366 (3) (am) of the statutes is created to read:
3	to independent living.
2	and the agency provides services to the person to assist him or her in transitioning
l	diploma, or terminates the agreement as provided in par. (b), whichever occurs first,

48.366 (3) (am) 1. The agency primarily responsible for providing services under the agreement shall petition the court for a determination that the person's placement in out—of—home care under the agreement is in the best interests of the person. The request shall contain the name and address of the placement and a statement describing why the placement is in the best interests of the person and shall have a copy of the agreement attached to it. The agency shall cause written notice of the petition to be sent to the person who is the subject of the agreement and the person's guardian.

- 2. On receipt of a petition under subd. 1., the court shall schedule a hearing on the petition. Not less than 3 days before the hearing the agency primarily responsible for providing services under the agreement or the court shall provide notice of the hearing to all persons who are entitled to receive notice under subd. 1. A copy of the petition shall be attached to the notice.
- 3. If the court finds that the person's placement in out-of-home care under the agreement is in the best interests of the person, the court shall grant an order determining that placement in out-of-home care under the agreement is in the best interests of the person.
 - *-0311/P4.9*Section 1660. 48.366 (3) (d) of the statutes is created to read:
- 48.366 (3) (d) If the agency that enters into a voluntary agreement under this subsection is the department or a county department, the voluntary agreement shall also specifically state that the department or the county department has placement

1	and care responsibility for the person who is the subject of the agreement as required
2	under 42 USC 672 (a) (2) and has primary responsibility for providing services to the
3	person.
4	*-0311/P4.10*Section 1661. 48.366 (3g) of the statutes is created to read:
5	48.366 (3g) APPEAL PROCEDURES. (a) Any person who is aggrieved by the failure
6	of an agency to enter into a transition-to-independent-living agreement under sub
7	(3) or by an agency's termination of such an agreement has the right to a contested
8	case hearing under ch. 227.
9	*-0311/P4.11*Section 1662. 48.366 (4) (a) of the statutes is amended to read
10	48.366 (4) (a) Rules permitting a foster home, group home, or residential care
11	center for children and youth to provide care for persons who agree to continue in
12	out-of-home care under an extension of an order described in sub. (1) (a) or a
13	voluntary agreement under sub. (3).
14	*-0311/P4.12*Section 1663. 48.38 (1) (ad) of the statutes is created to read
15	48.38 (1) (ad) "Child" includes a person 18 years of age or over for whom a
16	permanency plan is required under sub. (2).
17	*-0311/P4.13*Section 1664. 48.38 (2) (d) of the statutes is amended to read
18	48.38 (2) (d) The child was placed under a voluntary agreement between the
19	agency and the child's parent under s. 48.63 (1) (a) or (5) (b) or under a voluntary
20	transition-to-independent-living agreement under s. 48.366 (3).
21	*-0311/P4.14*Section 1665. 48.38 (4) (fg) 5. of the statutes is amended to
22	read:
23	48.38 (4) (fg) 5. As provided in par. (fm), placement in some other planned
24	permanent living arrangement that includes an appropriate, enduring relationship

with an	adult,	includ	ing su	ıstaining	care	or lor	g-term	foster	care,	but	not i	inclu	ding
indepen	dent li	ving, o	r the	goal of t	ransit	ionin	g the cl	nild to	indep	<u>ende</u>	nce.		

*-0311/P4.15*Section 1666. 48.38 (4) (fg) 6. of the statutes is repealed.

*-0311/P4.16*Section 1667. 48.38 (4) (fm) of the statutes is amended to read:

48.38 (4) (fm) If the agency determines that there is a compelling reason why it currently would not be in the best interests of the child to return the child to his or her home or to place the child for adoption, with a guardian, or with a fit and willing relative as the permanency goal for the child, the permanency goal of placing the child in some other planned permanent living arrangement or of transitioning the child to independence as described in par. (fg) 5. If the agency makes that determination, the plan shall include the efforts made to achieve that permanency goal, including, if appropriate, through an out-of-state placement, a statement of that compelling reason, and, notwithstanding that compelling reason, a concurrent plan under s. 48.355 (2b) towards achieving a goal under par. (fg) 1. to 4. as a concurrent permanency goal in addition to the permanency goal under par. (fg) 5.

*-0311/P4.17*Section 1668. 48.38 (5) (a) of the statutes is amended to read:

48.38 (5) (a) Except as provided in s. 48.63 (5) (d), the court or a panel appointed under par. (ag) shall review the permanency plan for each child for whom a permanency plan is required under sub. (2) in the manner provided in this subsection not later than 6 months after the date on which the child was first removed from his or her home and every 6 months after a previous review under this subsection for as long as the child is placed outside the home, except that for the review that is required to be conducted not later than 12 months after the child was first removed from his or her home and the reviews that are required to be conducted every 12 months after that review the court shall hold a hearing under sub. (5m) to review the

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1	permanency plan, which hearing may be instead of or in addition to the review under
2	this subsection. The 6-month and 12-month periods referred to in this paragraph
3	include trial reunifications under s. 48.358.
4	*-0311/P4.18*Section 1669. 48.38 (5) (c) 6. d. of the statutes is amended to
5	read:
6	48.38 (5) (c) 6. d. Being placed in some other planned permanent living
7	arrangement that includes an appropriate, enduring relationship with an adult
8	including sustaining care or long-term foster care, but not including independent
9	living, or transitioning to independence.
10	*-0311/P4.19*Section 1670. 48.38 (5) (c) 9. of the statutes is amended to read
11	48.38 (5) (c) 9. If the child is the subject of an order that terminates as provided
12	in s. 48.355 (4) (b) 4., 48.357 (6) (a) 4. or 48.365 (5) (b) 4. or of a voluntary
13	transition-to-independent-living agreement under s. 48.366 (3), the
14	appropriateness of the transition-to-independent-living plan developed under s
15	48.385; the extent of compliance with that plan by the child, the child's guardian, it
16	any, the agency primarily responsible for providing services under that plan, and any
17	other service providers; and the progress of the child toward making the transition
18	to independent living.
19	*-0311/P4.20*Section 1671. 48.38 (5m) (a) of the statutes is amended to read
20	48.38 (5m) (a) The court shall hold a hearing to review the permanency plan

48.38 (5m) (a) The court shall hold a hearing to review the permanency plan and to make the determinations specified in sub. (5) (c) for each child for whom a permanency plan is required under sub. (2) no later than 12 months after the date on which the child was first removed from the home and every 12 months after a previous hearing under this subsection for as long as the child is placed outside the

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home. The 12-month periods referred to in this paragraph include trial reunifications under s. 48.358.

*-0311/P4.21*Section 1672. 48.385 of the statutes is amended to read:

48.385 Plan for transition to independent living. During the 90 days immediately before a child who is placed in a foster home, group home, or residential care center for children and youth, in the home of a relative other than a parent, or in a supervised independent living arrangement attains 18 years of age or, if the child is placed in such a placement under an order under s. 48.355, 48.357, or 48.365 that terminates under s. 48.355 (4) (b) after the child attains 18 years of age or under a voluntary transition-to-independent-living agreement under s. 48.366 (3) that terminates under s. 48.366 (3) (a) after the child attains 18 years of age, during the 90 days immediately before the termination of the order or agreement, the agency primarily responsible for providing services to the child under the order or agreement shall provide the child with assistance and support in developing a plan for making the transition from out-of-home care to independent living. transition plan shall be personalized at the direction of the child, shall be as detailed as the child directs, and shall include specific options for obtaining housing, health care, education, mentoring and continuing support services, and workforce support and employment services.

*-1461/P2.179*Section 1673. 48.47 (7g) of the statutes is amended to read:

48.47 (7g) STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM. Establish a 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), the department may enter the content of any record kept or

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.

*-0407/P3.42*Section 1674. 48.47 (10) of the statutes is created to read:

- 48.47 (10) Delinquent juveniles. Subject to s. 301.03 (9) and (10), execute the laws relating to the detention, reformation, and correction of delinquent juveniles and promote the enforcement of laws for the protection of those juveniles by doing all of the following:
- (a) Cooperating with courts, the department of corrections, county departments, licensed child welfare agencies, and institutions in providing community-based programming, including in-home programming and intensive supervision, for delinquent juveniles.
- (b) Establishing and enforcing standards for the development and delivery of services provided by the department under ch. 938 in regard to juveniles who have been adjudicated delinquent.

*- 0407/P3.43 * S ECTION 1675. 48.	.48(1)	of the	statutes is	amended	to read:
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48.48 (1) To promote the enforcement of the laws relating to nonmarital children, delinquent juveniles, children and juveniles in need of protection or services, including developmentally disabled children, and unborn children in need of protection or services and to take the initiative in all matters involving the interests of those children, juveniles, and unborn children when adequate provision for those interests is not made. This duty shall be discharged in cooperation with the courts, the department of corrections, county departments, licensed child welfare agencies and with, parents, expectant mothers, and other individuals interested in the welfare of children, juveniles, and unborn children.

*-0407/P3.44*Section 1676. 48.48 (4) of the statutes is amended to read:

48.48 (4) In order to discharge more effectively its responsibilities under this chapter and other relevant provisions of the statutes, to study causes and methods of prevention and treatment of problems among children and families, delinquency, and related social problems. The department may utilize all powers provided by the statutes, including the authority to accept grants of money or property from federal, state, or private sources, and enlist the cooperation of other appropriate agencies and state departments.

-0407/P3.45Section 1677. 48.48 (8p) of the statutes is amended to read:

48.48 **(8p)** To reimburse tribes and county departments, from the appropriation under s. 20.437 (1) (kz), for unexpected or unusually high-cost out-of-home care placements of Indian children by tribal courts, other than placements to which sub. (8r) applies, and for subsidized guardianship payments under s. 48.623 (1) or (6) for guardianships of Indian children ordered by tribal courts. In this subsection, "unusually high-cost out-of-home care placements"

	SECTION 1077
1	means the amount by which the cost to a tribe or to a county department of
2	out-of-home care placements of Indian children by tribal courts, other than
3	placements to which sub. (8r) applies, exceeds \$50,000 in a fiscal year.
4	*-1301/P2.2*Section 1678. 48.48 (19) of the statutes is created to read:
5	48.48 (19) To purchase or provide treatment and services for children who are
6	the victims of trafficking, as defined in s. $940.302(1)(d)$, for purposes of a commercial
7	sex act, as defined in s. 940.302 (1) (a). Within the availability of funding under s.

are available to children in all geographic areas of the state, including both urban and rural communities.

20.437 (1) (e), the department shall ensure that that treatment and those services

*-0407/P3.46*SECTION 1679. 48.526 (title) of the statutes is created to read: 48.526 (title) Community youth and family aids.

*-0407/P3.47*Section 1680. 48.526 (1) of the statutes is created to read:

48.526 (1) Procedures. The department shall develop procedures for the implementation of this section and standards for the development and delivery of community-based juvenile delinquency-related services, as defined in s. 46.011 (1c), and shall provide consultation and technical assistance to aid counties in the implementation and delivery of those services. The department shall establish information systems and monitoring and evaluation procedures to report periodically to the governor and legislature on the statewide impact of this section.

*-0209/3.4*Section 1681. 48.526 (7) (h) of the statutes, as affected by 2015 Wisconsin Act (this act), sections * and *, is amended to read:

48.526 (7) (h) For counties that are participating in the corrective sanctions program purchasing community supervision services under s. 938.533 (2), \$1,062,400 in the last 6 months of 2015 2017, \$2,124,800 in 2016 2018, and