2017 DRAFTING REQUEST

For:

Gordon Hintz (608) 266-2254

Drafter:

tdodge

By:

Chris

Secondary Drafters:

Date:

2/12/2018

May Contact:

Jon (LFB)

Kelly (Sen. Erpenbach)

Same as LRB:

Submit via email:

YES

Requester's email: Carbon copy (CC) to: Rep.Hintz@legis.wisconsin.gov

tamara.dodge@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Medicaid expansion; BadgerCare buy-in

Instructions:

See attached

Drafting History:

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WISCONSIN LEGISLATIVE REFERENCE BUREAU

Information Services 608-266-0341—Legal Services 608-266-3561



Accept Medicaid expansion 2017 Badger Cave Bustin AB 4419
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P 1 Com D 1/0/1/10
Badger (are Buy-in AB 4919)
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State of Misconsin 2017 - 2018 LEGISLATURE

LRBa2103/1 TJD:...

January Wi

ASSEMBLY AMENDMENT,

TO ASSEMBLY BILL 885



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At the locations indicated, amend the bill as follows:

1. Page 5, line 6: after that line insert:

"Section 3c. 49.45 (23) (a) of the statutes is amended to read:

49.45 (23) (a) The department shall request a waiver from the secretary of the federal department of health and human services to permit the department to conduct a demonstration project to provide health care coverage to adults who are under the age of 65, who have family incomes not to exceed 100 133 percent of the poverty line before application of the 5 percent income disregard under 42 CFR 435.603 (d), except as provided in s. 49.471 (4g), and who are not otherwise eligible for medical assistance under this subchapter, the Badger Care health care program under s. 49.665, or Medicare under 42 USC 1395 et seq.

SECTION 3d. 49.471 (1) (cr) of the statutes is created to read:

49.471 (1) (cr) "Enhanced federal medical assistance percentage" means a federal medical assistance percentage described under 42 USC 1396d (y) or (z).

SECTION 3e. 49.471 (4) (a) 4. b. of the statutes is amended to read:

49.471 (4) (a) 4. b. The Except as provided in sub. (4g), the individual's family income does not exceed 100 133 percent of the poverty line before application of the 5 percent income disregard under 42 CFR 435.603 (d).

Section 3f. 49.471 (4g) of the statutes is created to read:

49.471 (4g) Medicaid expansion; federal medical assistance percentage. (a) For services provided to individuals described under sub. (4) (a) 4. and s. 49.45 (23), the department shall comply with all federal requirements to qualify for the highest available enhanced federal medical assistance percentage. The department shall submit any amendment to the state medical assistance plan, request for a waiver of federal Medicaid law, or other approval request required by the federal government to provide services to the individuals described under sub. (4) (a) 4. and s. 49.45 (23) and qualify for the highest available enhanced federal medical assistance percentage.

(b) If the department does not qualify for an enhanced federal medical assistance percentage, or if the enhanced federal medical assistance percentage obtained by the department is lower than printed in federal law as of July 1, 2013, for individuals eligible under sub. (4) (a) 4. or s. 49.45 (23), the department shall submit to the joint committee on finance a fiscal analysis comparing the cost to maintain coverage for adults who are not pregnant and not elderly with family incomes up to 133 percent of the poverty line to the cost of limiting eligibility to those adults with family incomes up to 100 percent of the poverty line. The department may reduce income eligibility for adults who are not pregnant and not elderly from

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family incomes of up to 133 percent of the poverty line to family incomes of up to 100 percent of the poverty line only if this reduction in income eligibility levels is approved by the joint committee on finance.

2. Page 14, line 4: after that line insert:

"(2m) Increasing Medical Assistance reimbursement rates. The department of health services shall amend the state Medicaid plan to increase reimbursement rates for providers of medical and long-term care services providers under the Medical Assistance program for dates of service on and after July 1, 2018.".

3. Page 14, line 9: after that line insert:

"(2m) Medicald expansion. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of health services under section 20.435 (4) (b) of the statutes, the dollar amount for fiscal year 2018–19 is decreased by \$203,000,000 to provide Medical Assistance to certain adults with family incomes up to 133 percent of the federal poverty line.

(3m) Medical Assistance reimbursement rates. In the schedule under section 20.005 (3) of the statutes for the appropriation to the department of health services under section 20.435 (4) (b) of the statutes, the dollar amount for fiscal year 2018–19 is increased by \$123,000,000 to provide a purchase option under BadgerCare Plus under section 49.471 (4m) of the statutes.

SECTION 13m. Effective dates. This act takes effect on the day after publication, except as follows:

1 (1) Medicaid expansion. The treatment of sections 49.45 (23) (a) and 49.471 (1)
2 (cr), (4) (a) 4. b., and (4g)/of the statutes and Section 12 (2m) and (3m) of this act take
3 effect on July 1, 2018, or on the day after publication, whichever is later.".
4 (END)

2017-2018 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

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SECTION 3g. 49.471 (4m) of the statutes is created to read:

- 49.471 (4m) Purchase options for BadgerCare Plus and the assistance for childless adults demonstration project. (a) 1. The department shall, if required, request a waiver from or submit amendments to the state Medical Assistance plan to the secretary of the federal department of health and human services to establish a program that allows individuals with income above the maximum income eligibility limit applicable under this section or the assistance for childless adults demonstration project under s. 49.45 (23), and who otherwise meet the eligibility requirements under this section or under s. 49.45 (23), the option of purchasing coverage through this section or through the demonstration project under s. 49.45 (23) instead of purchasing an individual health plan through private insurance. The department shall also include a request for any federal waiver or state Medical Assistance plan amendments necessary to allow an option for small businesses to purchase coverage for their employees under this section as part of the small business health options program through an exchange under 42 USC 18031.
- 2. The department shall seek any federal waiver and state Medical Assistance plan amendments necessary to allow individuals who qualify under subd. 1. to use advanced tax credits and cost-sharing credits, if eligible, to purchase one of the options described under subd. 1.
- (b) 1. The department shall coordinate the administration of the purchase options under this subsection with the programs under this section and s. 49.45 (23) to maximize efficiency and improve the continuity of care, consistent with the

requirements of this section and s. 49.45 (23). The department shall seek to
implement mechanisms to ensure the long-term financial sustainability of the
programs under this section and s. 49.45 (23). These mechanisms must address
issues related to minimizing adverse selection, the state financial risk and
contribution, and negative impacts to premiums in the individual and group
insurance markets.

- 2. The purchase option program shall include, at a minimum, all of the following attributes:
 - a. Establishment of an annual per enrollee premium rate similar to the average rate paid by the state to managed care plan contractors.
 - b. Establishment of a benefit set equal to the benefits covered under this section and s. 49.45 (23).
 - c. Annual enrollment that is limited to the same annual open enrollment periods established for the programs under this section and s. 49.45 (23).
 - d. The ability for the department to adjust the purchase option's actuarial value to a value no lower than 87 percent.
 - e. Reimbursement mechanisms for addressing potential increased costs to the programs under this section and s. 49.45 (23).
 - (c) By March 1, 2019, the department of health services shall submit a report to the appropriate standing committee in each house of the legislature under s. 13.172 (3) that provides information on the status of the request for a federal waiver and the results from actuarial and economic analyses that are necessary for a waiver proposal.
 - (d) If any necessary waiver or amendments to the state plan described under par. (a) 1. are approved, the department shall implement the program. If the

department is authorized to implement the program, and if any waiver or state plan
amendment described under par. (a) 2. is necessary and is approved, or if the
department determines neither a waiver nor state plan amendment is necessary, the
department shall allow the purchase options described under par. (a) 2.

END INSERT 3-4

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