

2019 DRAFTING REQUEST**Assembly Amendment (AA-AB56)**

For: **Legislative Fiscal Bureau** Drafter: **tdodge**
 By: **Dyck** Secondary Drafters:
 Date: **6/6/2019** May Contact:

Same as LRB:

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Pre Topic:

LFB:.....Dyck -

Topic:

Crisis intervention services (Motion 113.A.3)

Instructions:

See attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 6/7/2019	kfollett 6/7/2019			
/P1	tdodge 6/13/2019	csicilia 6/13/2019	dwalker 6/7/2019		
/P2			lparisi 6/13/2019		

FE Sent For:

<END>

HEALTH SERVICES

Medical Assistance, Medicaid Services Administration, Public Health, FoodShare,
Behavioral Health, Departmentwide and Quality Assurance

[LFB Papers #360 thru #371, #385 and #386, #390 thru #395, #415 thru #419]
Omnibus Motion

Motion:

Move to adopt the following.

A. Medical Assistance

1. *Medical Assistance Cost-to-Continue. (Paper #360).* Adopt Alternative 1 to adopt the cost-to-continue reestimate, resulting in an increase base funding for medical assistance (MA) benefits by \$245,771,400 (\$82,691,300 GPR, \$128,506,300 FED, \$27,463,800 PR and \$7,110,000 SEG) in 2019-20 and by \$671,613,300 (\$273,384,600 GPR, \$306,713,400 FED, \$94,862,300 PR and -\$3,347,000 SEG) in 2020-21.

2. *Hospital Supplemental Payments (Paper #361).* Modify the bill as follows:

a. *Disproportionate Share Hospital Payments.* Increase base funding for disproportionate share hospital payments by \$73,889,200 (30,000,000 GPR and \$43,889,200 FED) in 2019-20 and by \$73,900,800 (\$30,000,000 GPR and \$43,900,800 FED) in 2020-21 and require the Department to increase the GPR allocation for DSH payments by \$30,000,000 in 2019-20 and 2020-21. Set the maximum payment in each year of the 2019-21 biennium to any hospital at \$9,200,000, except that the maximum for a free-standing pediatric teaching hospital would be \$12,200,000. The increases to the total distribution and changes to the maximum payment would only apply during the biennium.

b. *Rural Critical Care Hospital Supplement.* Increase base funding by \$4,921,900 (\$2,000,000 GPR and \$2,921,900 FED) in 2019-20 and by \$4,942,100 (\$2,000,000 GPR and \$2,942,100 FED) in 2020-21 for the rural critical care hospital supplement.

3. *Crisis Intervention Services (Paper #362).* Adopt Alternatives A1, B2, and C2 to: (a) approve the Governor's recommendation to have the state pay a portion of the state share of crisis intervention services and increase base funding by \$3,043,000 (\$2,855,500 GPR and \$187,500 FED) in 2019-20 and \$10,353,600 (\$9,242,000 GPR and \$1,111,600 FED) in 2020-21; (b) modify the calculation of county MOE by specifying that the MOE is the annual average of county expenditures in 2016, 2017, and 2018; and (c) delete the Governor's recommendation to provide \$2,500,000 GPR

in 2020-21 for a new grant program for regional crisis stability facilities.

4. *Physician and Behavioral Health Services (Paper #363)*. Increase base funding for provider reimbursement for physician and behavioral health services by \$12,303,100 (\$5,000,000 GPR and \$7,303,100 FED) in 2019-20 and \$12,360,900 (\$5,000,000 GPR and \$7,360,900 FED) in 2020-21, but transfer \$5,000,000 GPR annually to the Committee's program supplements appropriation, which would enable the Department to submit a request under s. 13.10 of the statutes for an appropriation supplement for reimbursement rate increases.

5. *SeniorCare Cost-to-Continue Estimate (Paper #366)*. Adopt the cost-to-continue reestimate modification, resulting in a decrease to base funding of \$4,892,600 (-\$4,436,000 GPR, -\$6,897,700 FED, and \$6,441,100 PR) in 2019-20 and an increase in base funding of \$6,003,700 (-\$837,300 GPR, -\$3,734,200 FED, and \$10,575,200 PR) in 2020-21.

6. *Family Care Direct Care Funding (Paper #368)*. Increase base funding by \$29,527,600 (\$12,000,000 GPR and \$17,527,600 FED) in 2019-20 and \$37,009,800 (\$15,000,000 GPR and \$22,082,800 FED) in 2020-21 to support the Family Care direct care supplement.

7. *Nursing Home Reimbursement (Paper #369)*. Increase base funding by \$36,909,400 (\$15,000,000 GPR and \$21,909,400 FED) in 2019-20 and by \$37,082,800 (\$15,000,000 GPR and \$22,082,800 FED) in 2020-21 to increase the average MA daily reimbursement rate for nursing homes on July 1, 2019.

8. *Personal Care Reimbursement Rate (Paper #370)*. Increase base funding by \$37,647,600 (\$15,300,000 GPR and \$22,347,600 FED) in 2019-20 and \$53,399,300 (\$21,600,000 GPR and \$31,799,300 FED) in 2020-21 to increase the MA personal care reimbursement rates.

9. *Children's Long-Term Care Services (Paper #371)*. Adopt Alternatives A1 to approve the Governor's recommendation to fund intake, application, and screening costs for children's long-term care services, and provide \$1,604,200 (\$444,700 GPR and \$1,159,500 FED) in 2019-20 and \$1,523,000 (\$416,500 GPR and \$1,106,500 FED) in 2020-21. In addition, transfer the GPR funding provided under A1 from the MA benefits appropriations to the Committee's program supplements appropriation, and enable the Department to submit a request under s. 13.10 of the statutes to seek the release of this funding and transfer the FED funding provided to the MA contracts appropriation.

10. *Racine County Nursing Home Labor Region*. Require that the Department shall in the single labor region that is composed of Milwaukee, Ozaukee, Washington, and Waukesha Counties include Racine County and shall adjust payment so that the direct care cost targets of facilities in Milwaukee, Ozaukee, Washington, and Waukesha Counties are not reduced as a result of including facilities in Racine in this labor region.

11. *Telehealth Expansion (LFB Summary #17)*. Adopt the Governor's recommendation, which would modify the definition of telehealth and provide an increase in base funding for telehealth reimbursement of \$2,681,100 (\$1,088,200 GPR and \$1,592,900 FED) in 2019-20 and \$4,170,600 (\$1,692,900 GPR and \$2,477,700 FED) in 2020-21, but transfer the GPR funding to the Committee's program supplements appropriation, which would enable the Department to submit a request under



State of Wisconsin
2019 - 2020 LEGISLATURE

LRBb0276/?

TJD: [Signature]

LFB:.....Dyck - Crisis intervention services (Motion 113.A.3)

**FOR 2019-2021 BUDGET -- NOT READY FOR INTRODUCTION
ASSEMBLY AMENDMENT ,
TO ASSEMBLY BILL 56**

- 1 At the locations indicated, amend the bill as follows:
- 2 **1.** Page 391, line 13: delete lines 13 to 15.
- 3 **2.** Page 542, line 15: delete "75 percent" and substitute "the annual average".
- 4 **3.** Page 542, line 17: delete "year 2017" and substitute "years 2016, 2017, and
- 5 2018".
- 6 **4.** Page 558, line 6: delete lines 6 to 10.

7 (END)

6/13

5276



per Jon - LFB

Should be 75% of annual average
so retain 75% language in bill



State of Wisconsin
2019 - 2020 LEGISLATURE

LRBb0276/P1 *eP2*
TJD:kjf

Spans

In: 6/13

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- 3 2. Page 542, line 15: *change* delete "75 percent" *insert* and substitute "the annual average". *of*
- 4 3. Page 542, line 17: delete "year 2017" and substitute "years 2016, 2017, and
- 5 2018".
- 6 4. Page 558, line 6: delete lines 6 to 10.

Change them to insafter →

7 (END)

