



**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**  
**ASSEMBLY AMENDMENT ,**  
**TO ASSEMBLY SUBSTITUTE AMENDMENT 1,**  
**TO ASSEMBLY BILL 56**

*Insert*

- 1           At the locations indicated, amend the substitute amendment as follows:
- 2           **1.** Page 36, line 5: increase the dollar amount for fiscal year 2019-20 by
- 3           \$127,900 and increase the dollar amount for fiscal year 2020-21 by \$127,900 for the
- 4           purpose of funding 1.07 FTE positions to administer the Wisconsin healthcare
- 5           stability plan.
- 6           **2.** Page 36, line 5: increase the dollar amount for fiscal year 2019-20 by
- 7           \$541,300 and increase the dollar amount for fiscal year 2020-21 by \$541,300 for the
- 8           purpose of funding 5.10 FTE positions to provide health insurance education and
- 9           outreach activities, including assisting individuals with enrolling in the health
- 10          insurance exchange.

1           **3.** Page 134, line 4: increase the dollar amount for fiscal year 2019-20 by  
2           \$172,500 and increase the dollar amount for fiscal year 2020-21 by \$222,900 for the  
3           purpose of lead exposure and poisoning prevention activities.

4           **4.** Page 134, line 12: after that line insert:

5           “(bk) Healthy aging grant program       GPR     A       250,000     250,000”.

6           **5.** Page 135, line 20: increase the dollar amount for fiscal year 2019-20 by  
7           \$489,500 and increase the dollar amount for fiscal year 2020-21 by \$489,500 for the  
8           purpose of increasing the authorized FTE positions for the department of health  
9           services by 4.6 GPR positions, beginning in fiscal year 2019-20, in the division of  
10          public health, to expand dental services to recipients under the Medical Assistance  
11          program, BadgerCare Plus, and other low-income patients.

12          **6.** Page 136, line 10: increase the dollar amount for fiscal year 2019-20 by  
13          \$1,687,100 and increase the dollar amount for fiscal year 2020-21 by \$4,821,500 for  
14          the purpose of lead abatement grants, training, and outreach.

15          **7.** Page 136, line 19: increase the dollar amount for fiscal year 2019-20 by  
16          \$193,600 and increase the dollar amount for fiscal year 2020-21 by \$193,600 for the  
17          purpose of increasing funding for the women’s health block grant program.

18          **8.** Page 137, line 4: increase the dollar amount for fiscal year 2019-20 by  
19          \$3,300,000 and increase the dollar amount for fiscal year 2020-21 by \$3,300,000 for  
20          the purpose of awarding tobacco use control grants.

21          **9.** Page 138, line 18: increase the dollar amount for fiscal year 2019-20 by  
22          \$3,871,700 and increase the dollar amount for fiscal year 2020-21 by \$11,014,200 for  
23          the purpose of lead abatement grants, training, and outreach.

1           **10.** Page 139, line 22: increase the dollar amount for fiscal year 2019-20 by  
2           \$1,076,900 for the purpose of creating a separate admissions unit and increasing  
3           evening and nighttime supervisory staff at Winnebago Mental Health Institute.

4           **11.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
5           \$1,422,800 and increase the dollar amount for fiscal year 2020-21 by \$1,422,800 for  
6           the purpose of increasing pay-for-performance incentives to BadgerCare Plus  
7           health maintenance organizations to conduct blood-lead testing for children.

8           **12.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
9           \$159,473,300 and decrease the dollar amount for fiscal year 2020-21 by  
10          \$165,011,600 for the purpose of expanding eligibility under the Medical Assistance  
11          program under s. 49.471 (4) (a) 4. and 8.

12          **13.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
13          \$5,760,000 and increase the dollar amount for fiscal year 2020-21 by \$12,437,600 for  
14          the purpose of dental access incentive payments under s. 49.45 (24L) beginning  
15          January 1, 2020.

16          **14.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 only  
17          by \$192,000 to provide onetime grants for community-based doulas under SECTION  
18          9119 (8m) and increase the dollar amount for fiscal year 2020-21 by \$426,700 for the  
19          purpose of providing reimbursement for certified doula services provided through  
20          the Medical Assistance program in select counties, beginning in fiscal year 2020-21.

21          **15.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
22          \$1,750,000 and decrease the dollar amount for fiscal year 2020-21 by \$1,750,000 for  
23          the purpose of making payments to rural critical care hospitals.

1           **16.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
2           \$10,000,000 and increase the dollar amount for fiscal year 2020-21 by \$10,000,000  
3           for the purpose of funding a pediatric supplemental hospital payment under s. 49.45  
4           (6xm).

5           **17.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
6           \$7,700,000 and decrease the dollar amount for fiscal year 2020-21 by \$7,700,000 for  
7           the purpose of making hospital access payments and critical access hospital  
8           payments.

9           **18.** Page 140, line 19: increase the dollar amount for fiscal year 2020-21 by  
10          \$22,500,000 for the purpose of providing as a benefit in the Medical Assistance  
11          program nonmedical services that contribute to the determinants of health under s.  
12          49.46 (2) (b) 21.

13          **19.** Page 140, line 19: increase the dollar amount for fiscal year 2020-21 by  
14          \$9,255,000 for the purpose of extending Medical Assistance eligibility for  
15          post-partum women.

16          **20.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
17          \$11,474,100 and decrease the dollar amount for fiscal year 2020-21 by \$7,783,400  
18          for the purpose of reimbursing under the Medical Assistance program direct care to  
19          nursing facilities and intermediate care facilities for persons with an intellectual  
20          disability.

21          **21.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
22          \$13,947,900 and decrease the dollar amount for fiscal year 2020-21 by \$16,150,900  
23          for the purpose of reimbursing personal care services under the Medical Assistance  
24          program.

1           **22.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
2           \$2,454,300 and increase the dollar amount for fiscal year 2020-21 by \$2,454,300 for  
3           the purpose of eliminating copayments for prescription drugs for Medical Assistance  
4           enrollees.

5           **23.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
6           \$8,732,100 and increase the dollar amount for fiscal year 2020-21 by \$18,217,800 for  
7           the purpose of funding an increase of Medical Assistance reimbursement rates for  
8           mental health, behavioral health, and psychiatric services provided by physicians  
9           and medical clinics, effective January 1, 2020.

10          **24.** Page 140, line 19: increase the dollar amount for fiscal year 2020-21 by  
11          \$2,000,000 for the purpose of funding incentive grants to behavioral health providers  
12          that adopt electronic health records systems or participate in the state's health  
13          information exchange.

14          **25.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
15          \$6,613,900 and decrease the dollar amount for fiscal year 2020-21 by \$872,700 for  
16          the purpose of providing the cost to continue Medical Assistance benefits.

17          **26.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
18          \$1,088,200 and increase the dollar amount for fiscal year 2020-21 by \$1,692,900 for  
19          the purpose of telehealth reimbursement under the Medical Assistance program.

20          **27.** Page 140, line 19: increase the dollar amount for fiscal year 2019-20 by  
21          \$406,000 and increase the dollar amount for fiscal year 2020-21 by \$609,000 for the  
22          purpose of providing dental services to Medical Assistance recipients who have  
23          disabilities.

1           **28.** Page 140, line 19: increase the dollar amount for fiscal year 2020-21 by  
2       \$89,900 for the purpose of providing supportive services delivered under the Medical  
3       Assistance medical home health benefit for persons with substance abuse disorders.

4           **29.** Page 140, line 19: decrease the dollar amount for fiscal year 2019-20 by  
5       \$6,000,000 and decrease the dollar amount for fiscal year 2020-21 by \$9,000,000 for  
6       the purpose of funding the direct care and services portion of the capitation rates  
7       provided to care management organizations that administer Family Care in  
8       recognition of the direct caregiver workforce challenges facing the state.

9           **30.** Page 141, line 15: delete lines 15 and 16 and substitute:

10       “(bv) Prescription drug assistance for				20,090,100”
11       elderly; aids	GPR	B	16,491,400	.

12           **31.** Page 142, line 18: delete lines 18 and 19 and substitute:

13       “(j) Prescription drug assistance for				85,887,500”
14       elderly; manufacturer rebates	PR	C	81,753,400	.

15           **32.** Page 144, line 8: increase the dollar amount for fiscal year 2019-20 by  
16       \$2,077,300 and increase the dollar amount for fiscal year 2020-21 by \$2,077,300 for  
17       the purpose of increasing pay-for-performance incentives to BadgerCare Plus  
18       health maintenance organizations to conduct blood-lead testing for children.

19           **33.** Page 144, line 14: delete lines 14 and 15 and substitute:

20       “(pg) Federal aid; prescription drug				17,333,500”
21       assistance for elderly	PR-F	C	14,170,000	.

22           **34.** Page 144, line 16: increase the dollar amount for fiscal year 2019-20 by  
23       \$7,700,000 and increase the dollar amount for fiscal year 2020-21 by \$7,700,000 for

1 the purpose of making hospital access payments and critical access hospital  
2 payments.

3 **35.** Page 144, line 16: decrease the dollar amount for fiscal year 2019-20 by  
4 \$2,316,200 and increase the dollar amount for fiscal year 2020-21 by \$5,359,700 for  
5 the purpose of providing the cost to continue Medical Assistance benefits.

6 **36.** Page 144, line 24: decrease the dollar amount for fiscal year 2019-20 by  
7 \$7,400,000 and decrease the dollar amount for fiscal year 2020-21 by \$7,400,000 for  
8 the purpose of making hospital access payments.

9 **37.** Page 145, line 3: decrease the dollar amount for fiscal year 2019-20 by  
10 \$300,000 and decrease the dollar amount for fiscal year 2020-21 by \$300,000 for the  
11 purpose of making critical access hospital payments.

12 **38.** Page 145, line 16: delete lines 16 and 17 and substitute:

13 “(cf) Crisis program enhancement  
14 grants GPR B 125,000 125,000”.

15 **39.** Page 146, line 4: after that line insert:

16 “(dg) Regional crisis stabilization facil-  
17 ities GPR A -0- 2,500,000”.

18 **40.** Page 149, line 3: increase the dollar amount for fiscal year 2019-20 only  
19 by \$61,600 and increase the dollar amount for fiscal year 2020-21 only by \$78,200  
20 for the purpose of funding a 2-year academic detailing primary care clinic dementia  
21 training pilot program under SECTION 9119 (3g).

22 **41.** Page 149, line 3: increase the dollar amount for fiscal year 2019-20 by  
23 \$1,680,000 and increase the dollar amount for fiscal year 2020-21 by \$1,680,000 for

1 the purpose of grants to aging and disability resource centers and tribes to fund 27  
2 additional dementia care specialists and 3 new tribal dementia care specialists.

3 **42.** Page 149, line 7: increase the dollar amount for fiscal year 2019-20 by  
4 \$1,550,000 and increase the dollar amount for fiscal year 2020-21 by \$7,600,000 for  
5 the purpose of increasing funding for the Birth to 3 Program.

6 **43.** Page 157, line 4: increase the dollar amount for fiscal year 2019-20 by  
7 \$512,500 and increase the dollar amount for fiscal year 2020-21 by \$675,000 for the  
8 purpose of funding services to prevent child abuse or neglect.

9 **44.** Page 231, line 6: decrease the dollar amount for fiscal year 2019-20 by  
10 \$1,088,200 and decrease the dollar amount for fiscal year 2020-21 by \$1,692,900 for  
11 the purpose of telehealth reimbursement under the Medical Assistance program.

12 **45.** Page 231, line 6: decrease the dollar amount for fiscal year 2020-21 by  
13 \$89,900 for the purpose of providing supportive services delivered under the Medical  
14 Assistance medical home health benefit for persons with substance abuse disorders.

15 **46.** Page 249, line 15: after that line insert:

16 **“SECTION 188m.** 20.435 (1) (bk) of the statutes is created to read:

17 20.435 (1) (bk) *Healthy aging grant program.* The amounts in the schedule for  
18 grants to an entity that conducts programs in healthy aging.”.

19 **47.** Page 249, line 16: delete lines 16 to 18 and substitute:

20 **“SECTION 189b.** 20.435 (1) (cr) of the statutes is created to read:

21 20.435 (1) (cr) *Minority health grants.* The amounts in the schedule for the  
22 minority health program under s. 250.20 (3) and (4).”.

23 **48.** Page 249, line 25: delete that line and substitute:

24 **“SECTION 191b.** 20.435 (1) (kb) of the statutes is repealed.”.



1           **49.** Page 255, line 2: after that line insert:

2           “**SECTION 201c.** 20.435 (4) (jw) of the statutes is amended to read:

3           20.435 (4) (jw) *BadgerCare Plus and hospital assessment.* All moneys received  
4 ~~from payment of enrollment fees under the program under s. 49.45 (23),~~ all moneys  
5 transferred under s. 50.38 (9), all moneys transferred from the appropriation account  
6 under par. (jz), and 10 percent of all moneys received from penalty assessments  
7 under s. 49.471 (9) (c), ~~for administration of the program under s. 49.45 (23),~~ to  
8 provide a portion of the state share of administrative costs for the BadgerCare Plus  
9 Medical Assistance program under s. 49.471, and for administration of the hospital  
10 assessment under s. 50.38.”.

11           **50.** Page 255, line 10: delete lines 10 to 14 and substitute:

12           “**SECTION 203b.** 20.435 (5) (cf) of the statutes is amended to read:

13           20.435 (5) (cf) ~~*Mobile crisis team*~~ *Crisis program enhancement grants.*  
14 Biennially, the amounts in the schedule for awarding grants to counties or regions  
15 to establish certified or enhance crisis programs ~~that create mental health mobile~~  
16 ~~crisis teams~~ under s. 46.536.”.

17           **51.** Page 255, line 15: delete lines 15 to 18 and substitute:

18           “**SECTION 204b.** 20.435 (5) (ct) of the statutes is created to read:

19           20.435 (5) (ct) *Mental health consultation program.* The amounts in the  
20 schedule for developing a plan for a mental health consultation program under s.  
21 51.441. No moneys may be encumbered under this paragraph after June 30, 2021.”.

22           **52.** Page 255, line 18: after that line insert:

23           “**SECTION 205c.** 20.435 (5) (dg) of the statutes is created to read:

1           20.435 (5) (dg) *Regional crisis stabilization facilities*. The amounts in the  
2 schedule to provide grants to regional crisis stabilization facilities under s. 51.03  
3 (7).”.

4           **53.** Page 265, line 17: delete that line and substitute:

5           “**SECTION 279b.** 20.505 (8) (hm) 6e. of the statutes is repealed.”.

6           **54.** Page 304, line 10: delete lines 10 to 18 and substitute:

7           “**SECTION 484p.** 46.536 of the statutes is amended to read:

8           **46.536 ~~Mobile crisis team~~ Crisis program enhancement grants.** From  
9 the appropriation under s. 20.435 (5) (cf), the department shall award grants in the  
10 total amount of \$250,000 in each fiscal biennium to counties or regions comprised of  
11 multiple counties to establish certified or enhance crisis programs ~~that create mental~~  
12 ~~health mobile crisis teams~~ to serve individuals having mental health crises in rural  
13 areas. The department shall award a grant under this section in an amount equal  
14 to one-half the amount of money the county or region provides to establish certified  
15 or enhance crisis programs ~~that create mobile crisis teams~~.”.

Insert 10-16

16           **55.** Page 304, line 19: after that line insert:

17           “**SECTION 486m.** 46.854 of the statutes is created to read:

18           **46.854 Healthy aging grant program.** From the appropriation under s.  
19 20.435 (1) (bk), the department shall award in each fiscal year a grant of \$250,000  
20 to an entity that conducts programs in healthy aging.”.

21           **56.** Page 346, line 3: delete lines 3 to 5 and substitute:

22           “(u) *Prevention services.* For services to prevent child abuse or neglect,  
23 \$5,289,600 in each fiscal year \$6,302,100 in fiscal year 2019-20 and \$7,464,600 in  
24 fiscal year 2020-21.”.

1           **57.** Page 348, line 15: after that line insert:

2           “**SECTION 652c.** 49.45 (2p) of the statutes is repealed.”

3           **58.** Page 348, line 21: after that line insert:

4           “**SECTION 654f.** 49.45 (3) (e) 11. of the statutes is amended to read:

5           49.45 (3) (e) 11. The department shall use a portion of the moneys collected  
6 under s. 50.38 (2) (a) to pay for services provided by eligible hospitals, as defined in  
7 s. 50.38 (1), other than critical access hospitals, under the Medical Assistance  
8 Program under this subchapter, including services reimbursed on a fee-for-service  
9 basis and services provided under a managed care system. For state fiscal year  
10 2008-09, total payments required under this subdivision, including both the federal  
11 and state share of Medical Assistance, shall equal the amount collected under s.  
12 50.38 (2) (a) for fiscal year 2008-09 divided by 57.75 percent. For each state fiscal  
13 year after state fiscal year 2008-09, total payments required under this subdivision,  
14 including both the federal and state share of Medical Assistance, shall equal the  
15 amount collected under s. 50.38 (2) (a) for the fiscal year divided by ~~61.68~~ 53.69  
16 percent.

17           **SECTION 654h.** 49.45 (3) (e) 12. of the statutes is amended to read:

18           49.45 (3) (e) 12. The department shall use a portion of the moneys collected  
19 under s. 50.38 (2) (b) to pay for services provided by critical access hospitals under  
20 the Medical Assistance Program under this subchapter, including services  
21 reimbursed on a fee-for-service basis and services provided under a managed care  
22 system. For each state fiscal year, total payments required under this subdivision,  
23 including both the federal and state share of Medical Assistance, shall equal the

1 amount collected under s. 50.38 (2) (b) for the fiscal year divided by ~~61.68~~ 53.69  
2 percent.”.

3 **59.** Page 348, line 21: after that line insert:

4 “**SECTION 657b.** 49.45 (3m) (a) (intro.) of the statutes is amended to read:

5 49.45 (3m) (a) (intro.) Subject to par. (c) and notwithstanding sub. (3) (e), from  
6 the appropriations under s. 20.435 (4) (b) and (o), in each fiscal year, the department  
7 shall pay to hospitals that serve a disproportionate share of low-income patients an  
8 amount equal to the sum of ~~\$27,500,000~~ \$56,500,000, as the state share of payments,  
9 and the matching federal share of payments. The department may make a payment  
10 to a hospital under this subsection under the calculation method described in par. (b)  
11 if the hospital meets all of the following criteria:

12 **SECTION 658b.** 49.45 (3m) (b) 3. a. of the statutes is amended to read:

13 49.45 (3m) (b) 3. a. No single hospital receives more than \$4,600,000  
14 \$9,200,000, except that a hospital that is a free-standing pediatric teaching hospital  
15 located in Wisconsin that has a percentage calculated under subd. 1. a. greater than  
16 50 percent may receive up to \$12,000,000 each fiscal year.”.

17 **60.** Page 348, line 23: delete the material beginning with that line and ending  
18 with page 349, line 11, and substitute:

19 “49.45 (3p) (a) Subject to par. (c) and notwithstanding sub. (3) (e), from the  
20 appropriations under s. 20.435 (4) (b) and (o), in each fiscal year, the department  
21 shall pay to hospitals that ~~would~~ are not eligible for payments under sub. (3m) but  
22 that meet the criteria under sub. (3m) (a) except that the hospitals do not provide  
23 obstetric services 1. and 2. and that, in the most recent year for which information  
24 is available, charged at least 6 percent of overall charges for services to the Medical

1 Assistance program for services provided to Medical Assistance recipients an  
2 amount equal to the sum of \$250,000 \$500,000, as the state share of payments, and  
3 the matching federal share of payments. The department may make a payment to  
4 a hospital under this subsection under a calculation method determined by the  
5 department that provides a fee-for-service supplemental payment that increases as  
6 the hospital's percentage of inpatient days for Medical Assistance recipients at the  
7 hospital the total amount of the hospital's overall charges for services that are  
8 charges to the Medical Assistance program increases."

9 **61.** Page 352, line 22: after that line insert:

10 "SECTION 667b. 49.45 (6xm) of the statutes is created to read:

11 49.45 (6xm) PEDIATRIC INPATIENT SUPPLEMENT. (a) From the appropriations  
12 under s. 20.435 (4) (b), (o), and (w), the department shall, using a method determined  
13 by the department, distribute a total sum of \$2,000,000 each state fiscal year to  
14 hospitals that meet all of the following criteria:

15 1. The hospital is an acute care hospital located in this state.

16 2. During the hospital's fiscal year, the inpatient days in the hospital's acute  
17 care pediatric units and intensive care pediatric units totaled more than 12,000 days,  
18 not including neonatal intensive care units. For purposes of this subsection, the  
19 hospital's fiscal year is the hospital's fiscal year that ended in the 2nd calendar year  
20 preceding the beginning of the state fiscal year.

21 (b) Notwithstanding par. (a), from the appropriations under s. 20.435 (4) (b),  
22 (o), and (w), the department may, using a method determined by the department,  
23 distribute an additional total sum of \$10,000,000 in each state fiscal year to hospitals

1 that are free-standing pediatric teaching hospitals located in Wisconsin that have  
2 a percentage calculated under s. 49.45 (3m) (b) 1. a. greater than 45 percent.

3 **SECTION 672c.** 49.45 (23) of the statutes is repealed.

4 **SECTION 673g.** 49.45 (23) (g) of the statutes is repealed.

5 **SECTION 674g.** 49.45 (23b) of the statutes is repealed.

6 **SECTION 676m.** 49.45 (24L) of the statutes is created to read:

7 **49.45 (24L) CRITICAL ACCESS REIMBURSEMENT PAYMENTS TO DENTAL PROVIDERS.** (a)

8 Based on the criteria in pars. (b) and (c), the department shall increase  
9 reimbursements to dental providers that meet quality of care standards, as  
10 established by the department.

11 (b) In order to be eligible for enhanced reimbursement under this subsection,  
12 the provider must meet one of the following qualifications:

13 1. For a nonprofit or public provider, 50 percent or more of the individuals  
14 served by the provider are individuals who are without dental insurance or are  
15 enrolled in the Medical Assistance program.

16 2. For a for-profit provider, 5 percent or more of the individuals served by the  
17 provider are enrolled in the Medical Assistance program.

18 (c) For dental services rendered on or after January 1, 2020, by a qualified  
19 nonprofit critical access dental provider, the department shall increase  
20 reimbursement by 50 percent above the reimbursement rate that would otherwise  
21 be paid to that provider. For dental services rendered on or after January 1, 2020,  
22 by a qualified for-profit critical access dental provider, the department shall increase  
23 reimbursement by 30 percent above the reimbursement rate that would otherwise  
24 be paid to that provider. For dental providers rendering services to individuals in  
25 managed care under the Medical Assistance program, for services rendered on or

1 after January 1, 2020, the department shall increase reimbursement to pay an  
2 additional amount on the basis of the rate that would have been paid to the dental  
3 provider had the individual not been enrolled in managed care.

4 (d) If a provider has more than one service location, the thresholds described  
5 under par. (b) apply to each location, and payment for each service location would be  
6 determined separately.”.

7 **62.** Page 352, line 24: delete the material beginning with that line and ending  
8 with page 353, line 8, and substitute:

9 “49.45 (29w) (b) 1. b. “Telehealth” is means a service provided from a remote  
10 location using a combination of interactive video, audio, and externally acquired  
11 images through a networking environment between an individual or a provider at  
12 an originating site and a provider at a remote location with the service being of  
13 sufficient audio and visual fidelity and clarity as to be functionally equivalent to  
14 face-to-face contact; or, in circumstances determined by the department, an  
15 asynchronous transmission of digital clinical information through a secure  
16 electronic communications system from one provider to another provider.  
17 “Telehealth” does not include telephone conversations or Internet-based  
18 communications between providers or between providers and individuals.”.

19 **63.** Page 353, line 9: delete that line and substitute:

20 “**SECTION 678b.** 49.45 (29y) (d) of the statutes is repealed.

21 **SECTION 679p.** 49.45 (30y) of the statutes is created to read:

22 49.45 (30y) CERTIFIED DOULA SERVICES; PILOT PROJECT. (a) In this subsection,  
23 “certified doula” means an individual who has received certification from a doula  
24 certifying organization recognized by the department.

1 (b) For purposes of this subsection, services provided by certified doulas include  
2 continuous emotional and physical support during labor and birth of a child and  
3 intermittent services during the prenatal and postpartum periods.

4 (c) Subject to par. (d), the department shall reimburse under the Medical  
5 Assistance program benefits as provided under this subsection for pregnant women  
6 enrolled in the Medical Assistance program who reside in the counties of Brown,  
7 Dane, Milwaukee, Rock, or Sheboygan, or another county as determined by the  
8 department.

9 (d) The department shall request from the secretary of the federal department  
10 of health and human services any approval necessary to allow reimbursement under  
11 the Medical Assistance program for services provided by a certified doula. The  
12 department may not pay reimbursement unless federal approval is not required or  
13 any required federal approval allowing reimbursement under s. 49.46 (2) (b) 12p. is  
14 approved and in effect.”.

15 **64.** Page 353, line 11: delete the material beginning with that line and ending  
16 with page 354, line 17, and substitute:

17 “49.45 (41) ~~MENTAL HEALTH CRISIS~~ CRISIS INTERVENTION SERVICES. (a) In this  
18 subsection, “~~mental health crisis intervention services~~” means crisis intervention  
19 services for the treatment of mental illness, intellectual disability, substance abuse,  
20 and dementia that are provided by a ~~mental health~~ crisis intervention program  
21 operated by, or under contract with, a county, if the county is certified as a medical  
22 assistance provider.

23 (b) If a county elects to become certified as a provider of mental health crisis  
24 intervention services, the county may provide ~~mental health~~ crisis intervention



1 services under this subsection in the county to medical assistance recipients through  
2 the medical assistance program. A county that elects to provide the services shall  
3 pay the amount of the allowable charges for the services under the medical  
4 assistance program that is not provided by the federal government. The department  
5 shall reimburse the county under this subsection only for the amount of the allowable  
6 charges for those services under the medical assistance program that is provided by  
7 the federal government.

8 **SECTION 681b.** 49.45 (41) (c) of the statutes is created to read:

9 49.45 (41) (c) Notwithstanding par. (b), if a county elects to deliver crisis  
10 intervention services under the Medical Assistance program on a regional basis  
11 according to criteria established by the department, all of the following apply:

12 1. After January 1, 2020, the department shall require the county to annually  
13 contribute for the crisis intervention services an amount equal to 75 percent of the  
14 annual average of the county's expenditures for crisis intervention services under  
15 this subsection in calendar years 2016, 2017, and 2018, as determined by the  
16 department.

17 2. The department shall reimburse the provider of crisis intervention services  
18 in the county the amount of allowable charges for those services under the Medical  
19 Assistance program, including both the federal share and nonfederal share of those  
20 charges, that exceeds the amount of the county contribution required under subd. 1.

21 3. If a county submits a certified cost report under s. 49.45 (52) (b) to claim  
22 federal medical assistance funds, the claim based on certified costs made by a county  
23 for amounts under subd. 2. may not include any part of the nonfederal share of the  
24 amount under subd. 2.”.

1           **65.** Page 355, line 6: after that line insert:

2           “**SECTION 685b.** 49.46 (1) (a) 1m. of the statutes is amended to read:

3           49.46 (1) (a) 1m. Any pregnant woman whose income does not exceed the  
4           standard of need under s. 49.19 (11) and whose pregnancy is medically verified.  
5           Eligibility continues to the last day of the month in which the 60th day or, if approved  
6           by the federal government, the 365th day after the last day of the pregnancy falls.”.

7           **66.** Page 355, line 21: after that line insert:

8           “**SECTION 688b.** 49.46 (1) (j) of the statutes is amended to read:

9           49.46 (1) (j) An individual determined to be eligible for benefits under par. (a)  
10          9. remains eligible for benefits under par. (a) 9. for the balance of the pregnancy and  
11          to the last day of the month in which the 60th day or, if approved by the federal  
12          government, the 365th day after the last day of the pregnancy falls without regard  
13          to any change in the individual’s family income.”.

14          **67.** Page 356, line 2: after that line insert:

15          “**SECTION 690p.** 49.46 (2) (b) 12p. of the statutes is created to read:

16          49.46 (2) (b) 12p. Subject to the limitations under s. 49.45 (30y), services  
17          provided by a certified doula.”.

18          **68.** Page 356, line 4: delete lines 4 and 5 and substitute:

19          “49.46 (2) (b) 15. ~~Mental health crisis~~ Crisis intervention services under s.  
20          49.45 (41).”.

21          **69.** Page 356, line 5: after that line insert:

22          “**SECTION 691d.** 49.46 (2) (b) 21. of the statutes is created to read:

23          49.46 (2) (b) 21. Subject to par. (bv), nonmedical services that contribute to the  
24          determinants of health.

1           **SECTION 691g.** 49.46 (2) (bv) of the statutes is created to read:

2           49.46 (2) (bv) The department shall determine those services under par. (b) 21.  
3 that contribute to the determinants of health. The department shall seek any  
4 necessary state plan amendment or request any waiver of federal Medicaid law to  
5 implement this paragraph. The department is not required to provided the services  
6 under this paragraph as a benefit under the Medical Assistance program if the  
7 federal department of health and human services does not provide federal financial  
8 participation for the services under this paragraph.”.

9           **70.** Page 356, line 5: after that line insert:

10           **“SECTION 695b.** 49.47 (4) (ag) 2. of the statutes is amended to read:

11           49.47 (4) (ag) 2. Pregnant and the woman’s pregnancy is medically verified  
12 Eligibility continues to the last day of the month in which the 60th day or, if approved  
13 by the federal government, the 365th day after the last day of the pregnancy falls.”.

14           **71.** Page 356, line 23: after that line insert:

15           **“SECTION 699c.** 49.471 (1) (cr) of the statutes is created to read:

16           49.471 (1) (cr) “Enhanced federal medical assistance percentage” means a  
17 federal medical assistance percentage described under 42 USC 1396d (y) or (z).

18           **SECTION 700c.** 49.471 (4) (a) 4. b. of the statutes is amended to read:

19           49.471 (4) (a) 4. b. The individual’s family income does not exceed ~~100~~ 133  
20 percent of the poverty line ~~before application of the 5 percent income disregard under~~  
21 ~~42-CFR 435.603 (d).~~

22           **SECTION 701c.** 49.471 (4) (a) 8. of the statutes is created to read:

23           49.471 (4) (a) 8. An individual who meets all of the following criteria:

24           a. The individual is an adult under the age of 65.

1           b. The adult has a family income that does not exceed 133 percent of the poverty  
2 line, except as provided in sub. (4g).

3           c. The adult is not otherwise eligible for the Medical Assistance program under  
4 this subchapter or the Medicare program under 42 USC 1395 et seq.

5           **SECTION 702c.** 49.471 (4g) of the statutes is created to read:

6           **49.471 (4g) MEDICAID EXPANSION; FEDERAL MEDICAL ASSISTANCE PERCENTAGE.** For  
7 services provided to individuals described under sub. (4) (a) 8., the department shall  
8 comply with all federal requirements to qualify for the highest available enhanced  
9 federal medical assistance percentage. The department shall submit any  
10 amendment to the state medical assistance plan, request for a waiver of federal  
11 Medicaid law, or other approval request required by the federal government to  
12 provide services to the individuals described under sub. (4) (a) 8. and qualify for the  
13 highest available enhanced federal medical assistance percentage.”.

14           **72.** Page 356, line 23: after that line insert:

15           **“SECTION 703b.** 49.471 (6) (b) of the statutes is amended to read:

16           **49.471 (6) (b)** A pregnant woman who is determined to be eligible for benefits  
17 under sub. (4) remains eligible for benefits under sub. (4) for the balance of the  
18 pregnancy and to the last day of the month in which the 60th day or, if approved by  
19 the federal government, the 365th day after the last day of the pregnancy falls  
20 without regard to any change in the woman’s family income.

21           **SECTION 704b.** 49.471 (6) (L) of the statutes is created to read:

22           **49.471 (6) (L)** The department shall request from the federal department of  
23 health and human services approval of a state plan amendment, a waiver of federal  
24 Medicaid law, or approval of a demonstration project to maintain eligibility for

1 post-partum women to the last day of the month in which the 365th day after the  
2 last day of the pregnancy falls under ss. 49.46 (1) (a) 1m. and 9. and (j), 49.47 (4) (ag)  
3 2., and 49.471 (4) (a) 1g. and 1m., (6) (b), and (7) (b) 1.

4 **SECTION 705b.** 49.471 (7) (b) 1. of the statutes is amended to read:

5 49.471 (7) (b) 1. A pregnant woman whose family income exceeds 300 percent  
6 of the poverty line may become eligible for coverage under this section if the  
7 difference between the pregnant woman's family income and the applicable income  
8 limit under sub. (4) (a) is obligated or expended for any member of the pregnant  
9 woman's family for medical care or any other type of remedial care recognized under  
10 state law or for personal health insurance premiums or for both. Eligibility obtained  
11 under this subdivision continues without regard to any change in family income for  
12 the balance of the pregnancy and to the last day of the month in which the 60th day  
13 or, if approved by the federal government, the 365th day after the last day of the  
14 woman's pregnancy falls. Eligibility obtained by a pregnant woman under this  
15 subdivision extends to all pregnant women in the pregnant woman's family.”

16 **73.** Page 357, line 18: after that line insert:

17 “**SECTION 711c.** 49.686 (3) (d) of the statutes is amended to read:

18 49.686 (3) (d) Has applied for coverage under and has been denied eligibility  
19 for medical assistance within 12 months prior to application for reimbursement  
20 under sub. (2). This paragraph does not apply to an individual who is eligible for  
21 benefits under ~~the demonstration project for childless adults under s. 49.45 (23)~~  
22 BadgerCare Plus under s. 49.471 (4) (a) 8. or to an individual who is eligible for  
23 benefits under BadgerCare Plus under s. 49.471 (11).”.

24 **74.** Page 363, line 8: after that line insert:

1           **“SECTION 746t.** 51.03 (7) of the statutes is created to read:

2           51.03 (7) From the appropriation under s. 20.435 (5) (dg), the department shall  
3 award grants to regional crisis stabilization facilities for adults. The department  
4 shall establish criteria for a regional crisis stabilization facility to receive a grant  
5 under this subsection.”.

6           **75.** Page 364, line 14: delete the material beginning with that line and ending  
7 with page 365, line 8, and substitute:

8           **“SECTION 750b.** 51.422 (1) of the statutes is amended to read:

9           51.422 (1) PROGRAM CREATION. The department shall create 2 or 3 new, regional  
10 comprehensive opioid treatment programs, and in the 2017-19 fiscal biennium,  
11 shall create 2 or 3 additional regional comprehensive opioid and methamphetamine  
12 treatment programs, to provide treatment for opioid and opiate addiction and  
13 methamphetamine addiction in underserved, high-need areas. The department  
14 shall obtain and review proposals for opioid and methamphetamine treatment  
15 programs in accordance with its request-for-proposal procedures. A program under  
16 this section may not offer methadone treatment.

17           **SECTION 751b.** 51.422 (2) of the statutes is amended to read:

18           51.422 (2) PROGRAM COMPONENTS. An opioid or methamphetamine treatment  
19 program created under this section shall offer an assessment to individuals in need  
20 of service to determine what type of treatment is needed. The program shall  
21 transition individuals to a certified residential program, if that level of treatment is  
22 necessary. The program shall provide counseling, medication-assisted treatment,  
23 including both long-acting opioid antagonist and partial agonist medications that  
24 have been approved by the federal food and drug administration if for treating opioid

1 addiction, and abstinence-based treatment. The program shall transition  
2 individuals who have completed treatment to county-based or private  
3 post-treatment care.”.

4 **76.** Page 365, line 9: delete lines 9 to 16 and substitute:

5 “**SECTION 752b.** 51.441 of the statutes is created to read:

6 **51.441 Comprehensive mental health consultation program.** The  
7 department shall convene a statewide group of interested persons, including at least  
8 one representative of the Medical College of Wisconsin, to develop a concept paper,  
9 business plan, and standards for a comprehensive mental health consultation  
10 program that incorporates general psychiatry, geriatric psychiatry, addiction  
11 medicine and psychiatry, a perinatal psychiatry consultation program, and the child  
12 psychiatry consultation program under s. 51.442.”.

13 **77.** Page 433, line 4: after that line insert:

14 “**SECTION 1891b.** 250.048 of the statutes is created to read:

15 **250.048 Prescription drug importation program.** (1) IMPORTATION  
16 PROGRAM REQUIREMENTS. The department, in consultation with persons interested in  
17 the sale and pricing of prescription drugs and appropriate officials and agencies of  
18 the federal government, shall design and implement a prescription drug importation  
19 program for the benefit of residents of this state, that generates savings for residents,  
20 and that satisfies all of the following:

21 (a) The department shall designate a state agency to become a licensed  
22 wholesale distributor or to contract with a licensed wholesale distributor and shall  
23 seek federal certification and approval to import prescription drugs.

1 (b) The prescription drug importation program under this section shall comply  
2 with relevant requirements of 21 USC 384, including safety and cost savings  
3 requirements.

4 (c) The prescription drug importation program under this section shall import  
5 prescription drugs from Canadian suppliers regulated under any appropriate  
6 Canadian or provincial laws.

7 (d) The prescription drug importation program under this section shall have  
8 a process to sample the purity, chemical composition, and potency of imported  
9 prescription drugs.

10 (e) The prescription drug importation program under this section shall import  
11 only those prescription drugs for which importation creates substantial savings for  
12 residents of the state and only those prescription drugs that are not brand-name  
13 drugs and that have fewer than 4 competitor prescription drugs in the United States.

14 (f) The department shall ensure that prescription drugs imported under the  
15 program under this section are not distributed, dispensed, or sold outside of the  
16 state.

17 (g) The prescription drug importation program under this section shall ensure  
18 all of the following:

19 1. Participation by any pharmacy or health care provider in the program is  
20 voluntary.

21 2. Any pharmacy or health care provider participating in the program has the  
22 appropriate license or other credential in this state.

23 3. Any pharmacy or health care provider participating in the program charges  
24 a consumer or health plan the actual acquisition cost of the imported prescription  
25 drug that is dispensed.



1 (h) The prescription drug importation program under this section shall ensure  
2 that a payment by a health plan or health insurance policy for a prescription drug  
3 imported under the program reimburses no more than the actual acquisition cost of  
4 the imported prescription drug that is dispensed.

5 (i) The prescription drug importation program under this section shall ensure  
6 that any health plan or health insurance policy participating in the program does all  
7 of the following:

8 1. Maintains a formulary and claims payment system with current information  
9 on prescription drugs imported under the program.

10 2. Bases cost-sharing amounts for participants or insureds under the plan or  
11 policy on no more than the actual acquisition cost of the prescription drug imported  
12 under the program that is dispensed to the participant or insured.

13 3. Demonstrates to the department or a state agency designated by the  
14 department how premiums under the policy or plan are affected by savings on  
15 prescription drugs imported under the program.

16 (j) Any wholesale distributor importing prescription drugs under the program  
17 under this section shall limit its profit margin to the amount established by the  
18 department or a state agency designated by the department.

19 (k) The prescription drug importation program under this section may not  
20 import any generic prescription drug that would violate federal patent laws on  
21 branded products in this country.

22 (L) The prescription drug importation program under this section shall comply  
23 to the extent practical and feasible before the prescription drug to be imported comes  
24 into possession of the state's wholesale distributor and fully after the prescription

1 drug to be imported is in possession of the state's wholesale distributor with tracking  
2 and tracing requirements of 21 USC 360eee to 360eee-1.

3 (m) The prescription drug importation program under this section shall  
4 establish a fee or other approach to finance the program that does not jeopardize  
5 significant savings to residents of the state.

6 (n) The prescription drug importation program under this section shall have  
7 an audit function that ensures all of the following:

8 1. The department has a sound methodology to determine the most  
9 cost-effective prescription drugs to include in the importation program under this  
10 section.

11 2. The department has a process in place to select Canadian suppliers that are  
12 high quality, high performing, and in full compliance with Canadian laws.

13 3. Prescription drugs imported under the program are pure, unadulterated,  
14 potent, and safe.

15 4. The prescription drug importation program is complying with the  
16 requirements of this subsection.

17 5. The prescription drug importation program under this section is adequately  
18 financed to support administrative functions of the program while generating  
19 significant cost savings to residents of the state.

20 6. The prescription drug importation program under this section does not put  
21 residents of the state at a higher risk than if the program did not exist.

22 7. The prescription drug importation program under this section provides and  
23 is projected to continue to provide substantial cost savings to residents of the state.

1           **(2) ANTICOMPETITIVE BEHAVIOR.** The department, in consultation with the  
2 attorney general, shall identify the potential for and monitor anticompetitive  
3 behavior in industries affected by a prescription drug importation program.

4           **(3) APPROVAL OF PROGRAM DESIGN; CERTIFICATION.** No later than the first day of  
5 the 7th month beginning after the effective date of this subsection ... [LRB inserts  
6 date], the department shall submit to the joint committee on finance a report that  
7 includes the design of the prescription drug importation program in accordance with  
8 this section. The department may not submit the proposed prescription drug  
9 importation program to the federal department of health and human services unless  
10 the joint committee on finance approves the proposed prescription drug  
11 implementation program. Within 14 days of the date of approval by the joint  
12 committee on finance of the proposed prescription drug importation program, the  
13 department shall submit to the federal department of health and human services a  
14 request for certification of the approved prescription drug importation program.

15           **(4) IMPLEMENTATION OF CERTIFIED PROGRAM.** After the federal department of  
16 health and human services certifies the prescription drug importation program  
17 submitted under sub. (3), the department shall begin implementation of the program  
18 and the program shall be fully operational by 180 days after the date of certification  
19 by the federal department of health and human services. The department shall do  
20 all of the following to implement the prescription drug importation program to the  
21 extent the action is in accordance with other state laws and the certification by the  
22 federal department of health and human services:

23           (a) Become a licensed wholesale distributor, designate another state agency to  
24 become a licensed wholesale distributor, or contract with a licensed wholesale  
25 distributor.

1 (b) Contract with one or more Canadian suppliers that meet the criteria in sub.

2 (1) (c).

3 (c) Create an outreach and marketing plan to communicate with and provide  
4 information to health plans and health insurance policies, employers, pharmacies,  
5 health care providers, and residents of the state on participating in the prescription  
6 drug importation program.

7 (d) Develop and implement a registration process for health plans and health  
8 insurance policies, pharmacies, and health care providers interested in participating  
9 in the prescription drug importation program.

10 (e) Create a publicly accessible source for listing prices of prescription drugs  
11 imported under the program.

12 (f) Create, publicize, and implement a method of communication to promptly  
13 answer questions from and address the needs of persons affected by the  
14 implementation of the program before the program is fully operational.

15 (g) Establish the audit functions under sub. (1) (n) with a timeline to complete  
16 each audit function every 2 years.

17 (h) Conduct any other activities determined by the department to be important  
18 to successful implementation of the prescription drug importation program under  
19 this section.

20 **(5) REPORT.** By January 1 and July 1 of each year, the department shall submit  
21 to the joint committee on finance a report including all of the following:

22 (a) A list of prescription drugs included in the importation program under this  
23 section.