February 3, 2020 - Introduced by Representatives EDMING, SINICKI, KULP, ROHRKASTE, CROWLEY, HEBL, STUBBS, C. TAYLOR, VANDERMEER and SUBECK, cosponsored by Senators TIFFANY, MILLER, CARPENTER, FEYEN, HANSEN, SCHACHTNER, L. TAYLOR and BEWLEY. Referred to Committee on Regulatory Licensing Reform.

AN ACT relating to: community-based services grant program and making an appropriation.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to establish for the 2019–21 fiscal biennium a community-based services grant program to distribute awards to provider organizations offering facility-based prevocational and day services who apply to initiate or increase and sustain their provision of community-based services that create pathways to and increase competitive integrated employment for people with disabilities. Under the bill, DHS must award grants to providers who apply, develop a plan, and reach benchmarks they set that are approved by DHS, providing grants to up to 30 providers that submit a proposal to initiate or increase and sustain the organization’s community-based employment or community-based day services. DHS must give preference in awarding grant funds to providers with the most aggressive and achievable benchmarks for increasing competitive integrated employment and meaningful community involvement for people with disabilities. The bill also requires DHS to distribute performance-based awards to providers that achieve specific employment or community-based day outcomes for individuals with intellectual or developmental disabilities.

Under the bill, DHS must also distribute awards for subject matter experts, including those with experience in Wisconsin’s long-term care system, to assist grant recipients with initiating or increasing and sustaining their provision of community-based services consistent with the grant requirements and to assist with
necessary changes in business management practices to ensure financial viability in the provision of community-based services. Finally, the bill allows DHS to transfer the funds specified for the grants between fiscal years such that they can expend the funds until they are gone, even beyond the 2019–21 fiscal biennium.

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

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

**SECTION 1. Nonstatutory provisions.**

(1) **Community-Based Services Grant Program.**

(a) In the 2019–21 fiscal biennium, the department shall establish a grant program to award grants in a total amount not to exceed $5,250,000 to provider organizations offering facility-based prevocational and day services who choose to apply to initiate or increase and sustain their provision of community-based services that create pathways to and increase competitive integrated employment for people with disabilities. The department shall also award no more than $1,500,000 to subject matter experts, including those with experience in Wisconsin’s long-term care system, who apply to help grant recipients under subd. 1. Providers may apply for a grant to participate in strategic planning and technical assistance activities in order to initiate or increase and sustain their community-based employment or community-based day services. In distributing the grants under this section, the department shall do all of the following:

1. Award on a competitive basis a total of $3,000,000 to providers who choose to apply, develop a plan, and reach benchmarks they set and that are approved by the department, providing grants for up to 30 service providers that submit a proposal of the organization’s plan to initiate or increase and sustain the organization’s community-based employment or community-based day services.
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The department shall distribute awards of at least $25,000 per recipient up to a maximum of $150,000 per recipient. Providers may apply for grants that can be implemented over a 24-month period. The department shall give preference in awarding grant funds to providers with the most aggressive and achievable benchmarks for increasing competitive integrated employment and meaningful community involvement for people with disabilities.

2. Distribute $2,250,000 in performance-based awards to providers that achieve specific employment or community-based day outcomes for individuals with intellectual or developmental disabilities. The department will award under this paragraph performance-based payments established in consultation with subject matter experts with experience in Wisconsin’s long-term care system to selected providers that achieve outcomes that the provider identifies and meets that increase community-based services agency-wide over 2 years. A provider may be eligible for an award under this subdivision regardless of whether the provider is a grant recipient under subd. 1. The department shall give preference in awarding grant funds to providers with more aggressive and successful competitive integrated employment outcomes.

3. Distribute $1,500,000 through a competitive solicitation for subject matter experts, including those with experience in Wisconsin’s long-term care system, to provide guidance, consultation, training, and technical assistance to help grant recipients under subd. 1. initiate or increase and sustain their provision of community-based services consistent with the provider’s activities under subd. 7. and assist with necessary changes in business management practices to ensure financial viability in the provision of community-based services.
4. Establish criteria for approving and distributing grants under subds. 1. and 3. and establish criteria, including identifying benchmark outcomes established in consultation with subject matter experts with experience in Wisconsin’s long-term care system, for approving and distributing grants under subd. 2.

5. Review service provider applications at least every 6 months or until all available grant moneys have been awarded.

6. Require each applicant for a grant under subd. 1. to do all of the following and submit information regarding each aspect with the provider’s grant application, along with any other information required by the department:

   a. Develop a workplan and budget with target numbers of program participants.

   b. Outline plans to equip staff and increase capacity.

   c. Identify plans to educate on community-based service options, communicate programmatic changes to program participants and their families, and facilitate changes to individualized plans.

   d. Identify plans to reallocate and restructure resources to support increased individualized community participation by program participants.

   e. Commit to increasing and sustaining community-based, integrated employment or day services.

7. Require recipients of a grant under this subsection to do all of the following:

   a. Implement plans and adhere to commitments made as part of the provider’s grant application under subd. 6.

   b. Participate in required technical assistance activities.

   c. Set and report on quarterly benchmarks to be achieved over the grant period.
d. Report outcomes to the department within 30 days of the end of the 24-month project.

e. Implement strategies to address transportation barriers or develop individualized transportation solutions that can be sustained after the grant period.

(b) Nothing in this subsection shall be construed to limit access to or choice of allowable services, including prevocational services provided in accordance with 42 CFR parts 440 and 441, in the family care program under ss. 46.2805 to 46.2895, the Family Care Partnership program, and the self-directed services option, as defined in s. 46.2899 (1).

SECTION 2. Fiscal changes.

(1) COMMUNITY-BASED SERVICES GRANTS. In the schedule under s. 20.005 (3) for the appropriation to the department of health services under s. 20.435 (4) (b), the dollar amount for fiscal year 2019-20 is increased by $6,750,000 to award grants under SECTION 1 (1) of this act. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department of health services may transfer between fiscal years funds under this subsection for the purposes specified in this subsection.