## Fiscal Estimate - 2023 Session

☑ Original ☐ Updated	☐ Corrected ☐	Supplemental			
LRB Number 23-1472/1	Introduction Number	AB-0161			
<b>Description</b> ambulance assessment program supplementa making an appropriation	ll reimbursements, payment of admir	nistrative costs, and			
Fiscal Effect					
Appropriations Rev		es 🛮 No			
Permissive Mandatory Per	5.Types of Log Governmer Affected rmissive ☐ Mandatory crease Revenue ☐ Countie rmissive ☐ Mandatory ☐ School Districts	nt Units  ☑ Village ☑ Cities es ☐ Others ☐ WTCS			
Fund Sources Affected Affected Ch. 20 Appropriations					
☐ GPR ☐ FED ☐ PRO ☐ PRS ☒ SEG ☐ SEGS s. 20.435 4(jw) and 4(wa)					
Agency/Prepared By	Authorized Signature	Date			
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## Fiscal Estimate Narratives DHS 4/25/2023

LRB Number	23-1472/1	Introduction Number	AB-0161	Estimate Type	Original	
<b>Description</b> ambulance assessment program supplemental reimbursements, payment of administrative costs, and making an appropriation						

## Assumptions Used in Arriving at Fiscal Estimate

2021 Wisconsin Act 228 established two Medicaid supplemental reimbursement programs for ambulance service providers: a fee assessment program for private ambulance providers and a certified public expenditures (CPE) program for public ambulance providers.

Act 228 created s. 256.23, which establishes a private ambulance service provider fee assessment. This provision indicates that the provider fee must be no less than 0.25% below the maximum allowed under federal law, currently 6%. Funds generated from the fee assessment, including federal matching funds, must be expended on supplemental payments to qualifying private ambulance providers based on reimbursement for services provided under the Medicaid program.

Additionally, Act 228 creates an ambulance service provider trust fund under s. 25.776 to receive revenues from the private ambulance assessment. Non-statutory provisions of Act 228 require DHS to include a new appropriation in its 2023-25 biennial budget request for the purpose of using fee revenues to make supplemental payments to private ambulance providers. Act 228 non-statutory language also allows the Department to request that the new appropriation include language allowing ambulance service provider trust fund revenues to be spent on administrative costs associated with implementing the provider assessment. The Department did so, and that language is included in 2023 Assembly Bill 43 and Senate Bill 70, the Governor's 2023-25 Biennial Budget.

This bill also creates the new appropriation and related enabling language for receiving and spending the assessment revenue. The provisions are similar to language in AB 43/SB 70.

Under Act 228, DHS must seek CMS approval to claim federal matching funds on supplemental payments to providers from assessment revenues and may not begin collecting fees until federal approval is received. Upon federal approval, the Department will need time to collect revenue data from providers to establish the fee for the ambulance assessment. The initial timeline for payments is also dependent on the timing of federal approval and DHS's ability to complete the systems changes required to implement the approved plan. Unlike language in AB 43/SB 70, this bill requires the Department to make eligible payments within 60 days after receipt of federal approval.

Due to incomplete information on private ambulance service provider costs and revenues outside Medicaid reimbursements, the amount of increased reimbursement providers would receive under the fee assessment program is unknown. The fee assessment program is expected to result in increased Medicaid reimbursement to private ambulance service providers overall.

This bill will have no GPR fiscal effect compared to Act 228. The fiscal effect for SEG revenue and expenditures remains indeterminate for the reasons described above.

## Long-Range Fiscal Implications