

CR 90-208

STATE OF WISCONSIN)
)
OFFICE OF THE COMMISSIONER OF INSURANCE)

I, Robert D. Haase, Commissioner of Insurance and custodian of the official records of this Office, certify that the attached rule-making order affecting ss. Ins 18.07 and 18.13, Wis. Adm. Code, relating to services for the chronically mentally ill under the Health Insurance Risk Sharing Plan and coverage for expenses not specified in the statutes, was issued by this Office on April 24, 1991.

I further certify that I have compared this copy with the original on file in this Office and that it is a true copy of the whole of the original.

Dated at Madison, Wisconsin, this 24th day of April 1991.

Robert D. Haase
Robert D. Haase
Commissioner of Insurance

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ORDER OF THE OFFICE OF THE COMMISSIONER OF INSURANCE

RENUMBERING AND CREATING A RULE

To renumber Ins 18.07 (3); and to create Ins 18.07 (3) (b) and 18.13 (3m), relating to services for the chronically mentally ill under the health insurance risk sharing plan and coverage for expenses not specified in the statutes.

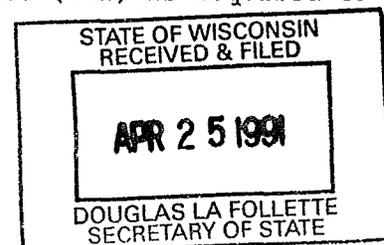
ANALYSIS PREPARED BY THE OFFICE OF THE COMMISSIONER OF INSURANCE

Statutory authority: ss. 601.41 (3) and 619.14 (3) (c) 3, Stats.

Statutes Interpreted: ss. 617.14 (3) (c) 3 and 619.17 (4) (a), Stats.

Under 1989 Wisconsin Act 332, coverage under the health insurance risk sharing plan (HIRSP) must include services for the chronically mentally ill in community support programs operated by county departments of community programs under standards established by the department of health and social services. The coverage is limited by certain maximum amounts specified in the statutes. The office of the commissioner of insurance (OCI) is required to

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promulgate a rule governing the coverage of these services by HIRSP. This rule provides that the services are covered if the case management review system determines that they are medically necessary, appropriate, and cost effective.

OCI has a statutory requirement to establish cost containment provisions for HIRSP. This rule adds a new cost containment provision authorizing HIRSP to cover expenses for a benefit not enumerated as a covered benefit in the statutes, if the case management system determines that the benefit would be more cost effective than a benefit that is statutorily specified.

SECTION 1. Ins 18.07 (3) is renumbered Ins 18.07 (3) (a).

SECTION 2. Ins 18.07 (3) (b) is created to read:

18.07 (3) (b) The plan shall cover services for a chronically mentally ill policyholder in a community support program under s. 619.14 (3) (c) 3, Stats., if the case management review under s. Ins 18.13 (3) (c) determines that the services are medically necessary, appropriate and cost effective.

SECTION 3. Ins 13.18 (3m) is created to read:

Ins 18.13 (3m) ADDITIONAL BENEFITS. The plan may cover expenses for a benefit not specified under s. 619.14 (3), Stats., if it is determined through case management that the provision of the benefit would be more cost effective than the provision of the benefit specified under s. 619.14 (3), Stats.

SECTION 4. EFFECTIVE DATE. This rule will take effect on the first day of the first month after publication, as provided in s. 227.22 (2) (intro.), Stats.

Dated at Madison, Wisconsin, this 24th day of April 1991.



Robert D. Haase
Commissioner of Insurance

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