



State of Wisconsin
2021 - 2022 LEGISLATURE

LRB-0539/P2
JPC:wlj&cjs

DOA:.....Bollhorst, BB0136 - Tribal shared savings

FOR 2021-2023 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Payments to tribes for medical assistance administration

This bill directs DHS to make payments to eligible tribal governing bodies or tribal health care providers for the administration and reimbursement of Medical Assistance services. DHS must determine payment amounts on the basis of the difference between the state share of Medical Assistance payments paid for services rendered to tribal members for whom a care coordination agreement is in place and the state share of Medical Assistance payments that would have been paid for those services absent care coordination agreements. The bill specifies that care coordination agreements must be in compliance with federal requirements.

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

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

SECTION 1. 20.435 (4) (b) of the statutes is amended to read:

20.435 (4) (b) *Medical Assistance program benefits.* Biennially, the amounts in the schedule to provide a portion of the state share of Medical Assistance program benefits administered under subch. IV of ch. 49, for a portion of the Badger Care health care program under s. 49.665, to provide a portion of the Medical Assistance program benefits administered under subch. IV of ch. 49 that are not also provided under par. (o), to provide payments to federally recognized American Indian tribes or bands in this state under and for the administration of s. 49.45 (5g), to provide a portion of the facility payments under [1999 Wisconsin Act 9](#), section [9123 \(9m\)](#), to fund services provided by resource centers under s. 46.283, for services under the family care benefit under s. 46.284 (5), for the community options program under s. 46.27, 2017 stats., for assisting victims of diseases, as provided in ss. 49.68, 49.683, and 49.685, and for reduction of any operating deficits as specified in [2005 Wisconsin Act 15](#), section [3](#). Notwithstanding s. 20.002 (1), the department may transfer from this appropriation account to the appropriation account under sub. (5) (kc) funds in the amount of and for the purposes specified in s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or deposit into this appropriation account and may transfer between fiscal years funds that it transfers from the appropriation account under sub. (5) (kc) for the purposes specified in s. 46.485 (3r).

SECTION 2. 49.45 (5g) of the statutes is created to read:

49.45 (5g) PAYMENTS TO TRIBES. (a) *Tribal care coordination agreements.* A tribal health care provider's care coordination agreement with a nontribal health care provider shall meet federal requirements, including that a service provided by the nontribal health care provider be at the request of the tribal health care provider on behalf of a tribal member who remains in the tribal health care provider's care according to the care coordination agreement; that both the tribal health care

provider and nontribal health care provider are providers, as defined in s. 49.43 (10); that an established relationship exists between the tribal health care provider and the tribal member; and that the care be provided pursuant to a written care coordination agreement.

(b) *Amount and distribution of payments.* 1. From the appropriation account under s. 20.435 (4) (b), the department shall make payments to eligible governing bodies of federally recognized American Indian tribes or bands or tribal health care providers in an amount and manner determined by the department. The department shall determine payment amounts on the basis of the difference between the state share of medical assistance payments paid for services rendered to tribal members for whom a care coordination agreement with nontribal health care providers is in place and the state share of medical assistance payments that would have been paid for those services absent a care coordination agreement with nontribal partners.

2. The department shall withhold from the payments under subd. 1. the state share of administrative costs associated with carrying out this subsection, not to exceed 10 percent of the amounts calculated in subd. 1.

3. Federally recognized American Indian tribes or bands may use funds paid under this subsection for health-related purposes. The department shall consult biennially with tribes to determine the timing and distribution of payments.

(END)