



2003 ASSEMBLY BILL 965

March 11, 2004 - Introduced by Representatives BLACK, RICHARDS, BERCEAU, SINICKI, MILLER, PLOUFF, J. LEHMAN and POCAN, cosponsored by Senators RISSER, CARPENTER and CHVALA. Referred to Committee on Rules.

1 **AN ACT** *to renumber and amend* 49.665 (1) (c); *to amend* 20.435 (4) (bc), 20.435
2 (4) (jz), 20.435 (4) (o), 20.435 (4) (p), 49.665 (3), 49.665 (4) (at) 1. a., 49.665 (4)
3 (at) 1. cm., 49.665 (4) (at) 2., 49.665 (5) (a), 49.665 (5) (b) and 49.665 (5) (c); and
4 **to create** 20.435 (4) (bd), 49.665 (1) (c) 2. and 49.665 (4) (ag) of the statutes;
5 **relating to:** health care for low-income child care workers under the Badger
6 Care health care program, granting rule-making authority, and making
7 appropriations.

Analysis by the Legislative Reference Bureau

Under current law, the Badger Care health care program (BadgerCare) provides partially or wholly subsidized health care coverage to eligible families and children. Currently, a child who does not reside with his or her parent or a family may be eligible for health care coverage under BadgerCare if the child's or family's income does not exceed 185% of the federal poverty line and the child or family meets certain nonfinancial criteria. Current law defines "family" as at least one dependent child and his or her custodial parent or parents, all of whom reside in the same household.

This bill expands BadgerCare to provide health care coverage to individuals who are child care workers who meet the current law income and nonfinancial eligibility requirements. Under the bill, child care workers are not required to be parents to qualify for health care coverage.

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For further information see the *state and local* 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:

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

2 20.435 (4) (bc) *Health care for low-income families and children*. As a
3 continuing appropriation, the amounts in the schedule for the badger care to provide
4 health care program for coverage to low-income families and children under the
5 Badger Care health care program under s. 49.665.

6 **SECTION 2.** 20.435 (4) (bd) of the statutes is created to read:

7 20.435 (4) (bd) *Health care for low-income child care workers*. A sum sufficient
8 to provide health care coverage to low-income child care workers under the Badger
9 Care health care program under s. 49.665.

10 **SECTION 3.** 20.435 (4) (jz) of the statutes is amended to read:

11 20.435 (4) (jz) *Badger care Care premiums*. All moneys received from payments
12 under s. 49.665 (5) to be used for the badger care Badger Care health care program
13 for low-income families under s. 49.665.

14 **SECTION 4.** 20.435 (4) (o) of the statutes is amended to read:

15 20.435 (4) (o) *Federal aid; ~~medical assistance~~ Medical Assistance*. All federal
16 moneys received for meeting costs of ~~medical assistance~~ Medical Assistance
17 administered under ss. 46.284 (5), and 49.45 and, to the extent permitted under
18 federal law, under s. 49.665, to be used for those purposes and for transfer to the
19 ~~medical assistance~~ Medical Assistance trust fund, for those purposes.

20 **SECTION 5.** 20.435 (4) (p) of the statutes is amended to read:

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1 20.435 (4) (p) *Federal aid; health care for low-income families and children.*
2 All federal moneys received for the ~~badger care~~ Badger Care health care program for
3 ~~low-income families~~ under s. 49.665, to be used for ~~that~~ the purpose of providing
4 health care coverage to low-income families and children under the Badger Care
5 health care program under s. 49.665.

6 **SECTION 6.** 49.665 (1) (c) of the statutes is renumbered 49.665 (1) (c) (intro.) and
7 amended to read:

8 49.665 (1) (c) (intro.) “Employer-subsidized health care coverage” means any
9 of the following:

10 1. With respect to a family eligible under sub. (4) (a) or a child eligible under
11 sub. (4) (am), family coverage under a group health insurance plan that is offered by
12 an employer and for which the employer pays at least 80% of the cost, excluding any
13 deductibles or copayments that may be required under the plan.

14 **SECTION 7.** 49.665 (1) (c) 2. of the statutes is created to read:

15 49.665 (1) (c) 2. With respect to an individual eligible under sub. (4) (ag),
16 coverage under a group health insurance plan that is offered by an employer and for
17 which the employer pays at least 80% of the cost, excluding any deductibles or
18 copayments that may be required under the plan.

19 **SECTION 8.** 49.665 (3) of the statutes is amended to read:

20 49.665 (3) ADMINISTRATION. The department shall administer a program to
21 provide the health services and benefits described in s. 49.46 (2) to persons that meet
22 the eligibility requirements specified in sub. (4). The department shall promulgate
23 rules setting forth the application procedures and appeal and grievance procedures.
24 The department may promulgate rules limiting access to the program under this
25 section to defined enrollment periods. The department may also promulgate rules

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1 establishing a method by which the department may purchase family coverage
2 offered by the employer of a member of an eligible family or by a member of a child's
3 household, or individual coverage offered by the employer of an eligible child care
4 worker, under circumstances in which the department determines that purchasing
5 that coverage would not be more costly than providing the coverage under this
6 section.

7 **SECTION 9.** 49.665 (4) (ag) of the statutes is created to read:

8 49.665 (4) (ag) An individual is eligible for health care coverage under this
9 section if the individual meets all of the following requirements:

10 1. The individual is employed by a child care provider as a child care worker
11 for at least 30 hours per week.

12 2. The individual's income does not exceed 185% of the poverty line, except as
13 provided in par. (at) and except that an individual who is already receiving health
14 care coverage under this section may have an income that does not exceed 200% of
15 the poverty line. The department shall establish by rule the criteria to be used to
16 determine income.

17 3. The individual does not have access to employer-subsidized health care
18 coverage and has not had access to employer-subsidized health care coverage within
19 the time period established by the department by rule, but not to exceed 18 months,
20 immediately preceding application for health care coverage under this section. The
21 department may establish exceptions to this subdivision by rule.

22 4. The individual meets all other requirements established by the department
23 by rule. The department may not require, as a condition of eligibility for health care
24 under this paragraph, that an individual be a parent.

25 **SECTION 10.** 49.665 (4) (at) 1. a. of the statutes is amended to read:

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1 49.665 (4) (at) 1. a. Except as provided in subd. 1. b., the department shall
2 establish for the initial eligibility determination a lower maximum income level ~~for~~
3 ~~the initial eligibility determination~~ that is the same for all persons who might be
4 eligible under this subsection if funding under s. 20.435 (4) (bc), (jz), (p), and (x) is
5 insufficient to accommodate the projected enrollment levels of families under par. (a)
6 and children under par. (am) for the health care program under this section. The
7 adjustment may not be greater than necessary to ensure sufficient funding.

8 **SECTION 11.** 49.665 (4) (at) 1. cm. of the statutes is amended to read:

9 49.665 (4) (at) 1. cm. Notwithstanding s. 20.001 (3) (b), if, after reviewing the
10 plan submitted under subd. 1. b., the joint committee on finance determines that the
11 amounts appropriated under s. 20.435 (4) (bc), (jz), (p), and (x) are insufficient to
12 accommodate the projected enrollment levels of families under par. (a) and children
13 under par. (am), the committee may transfer appropriated moneys from the general
14 purpose revenue appropriation account of any state agency, as defined in s. 20.001
15 (1), other than a sum sufficient appropriation account, to the appropriation account
16 under s. 20.435 (4) (bc) to supplement the health care program under this section if
17 the committee finds that the transfer will eliminate unnecessary duplication of
18 functions, result in more efficient and effective methods for performing programs, or
19 more effectively carry out legislative intent, and that legislative intent will not be
20 changed by the transfer.

21 **SECTION 12.** 49.665 (4) (at) 2. of the statutes is amended to read:

22 49.665 (4) (at) 2. If, after the department has established a lower maximum
23 income level under subd. 1., projections indicate that funding under s. 20.435 (4) (bc),
24 (jz), (p), and (x) is sufficient to raise the level, the department shall, by state plan
25 amendment, raise the maximum income level for initial eligibility, ~~but not to a level~~

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1 that is the same for all persons who might be eligible under this subsection but that
2 does not exceed 185% of the poverty line.

3 **SECTION 13.** 49.665 (5) (a) of the statutes is amended to read:

4 49.665 (5) (a) Except as provided in pars. (b) and (bm), a family, ~~or a~~ child who
5 does not reside with his or her parent, or an individual who receives health care
6 coverage under this section shall pay a percentage of the cost of that coverage in
7 accordance with a schedule established by the department by rule. If the schedule
8 established by the department requires a family, ~~or a~~ child who does not reside with
9 his or her parent, or an individual to contribute more than 3% of the family's ~~or,~~
10 child's, or individual's income towards the cost of the health care coverage provided
11 under this section, the department shall submit the schedule to the joint committee
12 on finance for review and approval of the schedule. If the cochairpersons of the joint
13 committee on finance do not notify the department within 14 working days after the
14 date of the department's submittal of the schedule that the committee has scheduled
15 a meeting to review the schedule, the department may implement the schedule. If,
16 within 14 days after the date of the department's submittal of the schedule, the
17 cochairpersons of the committee notify the department that the committee has
18 scheduled a meeting to review the schedule, the department may not require a
19 family, ~~or a~~ child who does not reside with his or her parent, or an individual to
20 contribute more than 3% of the family's ~~or,~~ child's, or individual's income unless the
21 joint committee on finance approves the schedule. The joint committee on finance
22 may not approve and the department may not implement a schedule that requires
23 a family ~~or,~~ child, or individual to contribute more than 3.5% of the family's ~~or,~~ child's,
24 or individual's income towards the cost of the health care coverage provided under
25 this section.

