

State-Level Safety Net and Human Service Policy Update

BadgerCare/General Medicaid

BadgerCare Waiver: The Department of Health Services has submitted a request to the federal government to require the following for childless adults participating in BadgerCare: \$8 monthly premiums for childless adults with incomes between 51% and 100% of the Federal Poverty Level, members who don't engage in risky health behaviors will have premiums reduced to \$4; Completion of a yearly Health Risk Assessment; Participation in a work or job training program; 48-month enrollment limit for adults who are not working or in job training 80 hours per month; Drug screening/testing; \$8 co-pay for ER visits. The federal government must approve these proposed changes before they can take effect. DHS says they will not implement the changes until at least one year after receiving approval.

Signed into Law (Or Awaiting the Governor's Signature)

Medicaid Reimbursement Rates: Wisconsin is facing a critical shortage of Medicaid providers in several key areas: personal care, mental health and dental care. In an effort to start to address this crisis, the 2017-19 state budget increased Medicaid reimbursement rates for personal care, nursing homes and Family Care providers. In October, Governor Walker directed the Department of Health Services to increase the reimbursement rates for outpatient mental health and substance use disorder services.

Authorizing Services for Medicaid: Representative John Nygren (R-Marinette) and Senator Leah Vukmir (R-Brookfield) authored Assembly Bill 529/Senate Bill 452, which allows health care providers other than physicians to order/authorize Medicaid services including personal care, nursing services, home health services, medical equipment and supplies, prescription and over-the-counter drugs, and many more. This bill was signed into law as 2017 Wisconsin Act 119.

Dental Reimbursement Rates: Representative Kathleen Bernier (R-Lake Hallie) and Senator Terry Moulton (R-Chippewa Falls) introduced Assembly Bill 627/Senate Bill 572, which expands the current law Medicaid dental rate increase pilot program to additional counties chosen by the Department of Health Services (DHS) that have the greatest need for pediatric dental care and emergency dental services. It also requires DHS to begin preparing a biennial report on the program which includes information on the number of Medicaid recipients served by the program, the feasibility of expanding the program, and an analysis of Medicaid recipient populations who received services under the pilot program and populations who may benefit from the pilot project. This bill was passed by both houses of the Legislature and is awaiting the Governor's signature or veto.

Medicaid Care Coordination Pilot Program: Representative Jessie Rodriguez (R-Oak Creek) and Senator Alberta Darling (R-River Hills) introduced Assembly Bill 871/Senate Bill 742, which creates a pilot program within Medicaid aimed at providing care coordination to enrollees with a high number of emergency room visits. The program will reimburse hospitals and health care systems for care coordination services provided to these enrollees. The hospital's care coordination team must have members other than physicians, including social workers, behavioral health specialists and care managers. The team will work with Medicaid members selected to participate in the pilot to provide post-discharge instructions, medication management and referrals to other resources. The bill encourages hospitals to collaborate with managed care organizations, and an amendment adopted on the Assembly floor requires hospitals to share post-discharge information with MCOs. This bill was passed by both houses of the Legislature and is awaiting the Governor's signature or veto.

Health Savings Accounts for Medicaid Enrollees: Representative Robin Vos (R-Rochester) and Senator Chris Kapenga (R-Delafield) introduced Special Session Senate Bill 9/Assembly Bill 9, which requires the Department of Health Services (DHS) to get permission from the federal government to set up Health Savings Accounts for individual Medicaid recipients. Children and individuals who are elderly, blind or have a disability would be exempt from this requirement. This bill was passed by both houses of the legislature and is awaiting the Governor's signature or veto.

Failed to Pass

BadgerCare Buy-In: Representative Eric Genrich (D-Green Bay) and Senator LaTonya Johnson (D-Milwaukee) introduced Assembly Bill 449/Senate Bill 363, which would allow individuals who make too much to qualify for BadgerCare to buy-in to the program for health insurance coverage. No action was taken on this bill.

Medicaid Expansion: Senator John Erpenbach (D-Middleton) introduced Assembly Bill 721/Senate Bill 606, which would expand BadgerCare (Medicaid) eligibility to 133% of the Federal Poverty Level using funding available from the Affordable Care Act. No action was taken on this bill.

Caregiving

Failed to Pass

Family Caregiver Tax Credit: Representative Ken Skowronski (R-Franklin) and Senator Patrick Testin (R-Stevens Point) introduced Assembly Bill 631/Senate Bill 528, which would have created a non-refundable \$1,000 family caregiver tax credit for expenses related to caregiving. Individuals could be reimbursed for up to 50% of their qualified expenses. Qualified expenses include: home modifications, purchasing or leasing equipment; goods or services, or support, to assist the claimant in caring for the qualified family member, including employing a home care aide or personal care attendant, adult day

care, transportation, legal or financial services, or assistive care technology. This bill was passed 12-0 by the Assembly Committee on Mental Health on January 24 but did not advance after that.

Training Hours for CNAs: Representative Warren Petryk (R-Eleva) and Senator Sheila Harsdorf (R-River Falls) introduced Assembly Bill 432/Senate Bill 341, which would lower the minimum required training hours for CNAs in Wisconsin from 120 hours to the federal standard of 75 hours. This bill was passed by the State Assembly, but it was never acted on by the State Senate.

15% Increase for Personal Care Rates: Representative Jonathan Brostoff (D-Milwaukee) introduced Assembly Bill 755, which would have accepted federal Medicaid expansion and increased the personal care reimbursement rate by 15% in each year of the 2017-19 biennium. No action was taken on this bill.

Long-term Care and Mental Health

Wisconsin is currently on track to end the waiting lists for the adult and children's long-term care systems. Family Care and IRIS will be available statewide by the end of 2018. The state budget provided funding to end the waiting list of the children's long-term care system.

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Children's Long Term Care Wait List: The 2017-19 state budget provided funding to end the waiting list for long-term care services for children with significant disabilities. There were over 2,000 children waiting for services.

School Mental Health Aid: The 2017-19 state budget provides \$3 million in 2018-19 to reimburse schools for increased spending on school social workers, creates a new grant program for schools to collaborate with community mental health providers, and provides funding to provide training to school districts and independent charter schools in providing mental health screenings and intervention services.

Complex Rehabilitation Technology: Representative John Jagler (R-Watertown) and Senator Leah Vukmir (R-Brookfield) introduced Assembly Bill 462/Senate Bill 381, which directs the Department of Health Services (DHS) to establish rules outlining the Medicaid coverage of complex rehabilitation technology (specifically, specialized wheelchairs and gait trainers). DHS will have up to 13 months to develop these rules once the bill is officially signed into law. This will was passed by both houses of the legislature and is awaiting the Governor's signature or veto.

Emergency Detention/Warning of Dangerousness: Representative John Jagler (R-Watertown) and Senator Rob Cowles (R-Green Bay) introduced Assembly Bill 538/Senate Bill 445, which prohibits the transfer of an individual from a hospital's emergency department for emergency detention until a hospital employee or medical staff member determines the transfer is medically appropriate. The bill

specifies that a health care provider fulfills any duty to warn by taking any of the following actions: contacting law enforcement or the relevant county department and disclosing knowledge of potential evidence of the individual's substantial probability of harm, approving the emergency detention of the individual if the health care provider is in the position to do so, and taking any other action that a reasonable health care provider would consider as fulfilling the duty to warn a third party of substantial probability of harm. The bill explicitly allows any health care provider and any law enforcement officer to disclose information that an individual poses a substantial probability of serious bodily harm to another person in a good faith effort to prevent or lessen a serious and imminent threat to the health or safety of a person or the public. This bill was signed into law as 2017 Wisconsin Act 140.

Supported Decision Making Agreements: Representative Kathleen Bernier (R-Lake Hallie) and Senator Sheila Harsdorf (R-River Falls) introduced Assembly Bill 655/Senate Bill 552, which creates a formal supported decision-making process in Wisconsin. This will allow older adults and people with disabilities to enter into Supported Decision Making Agreements with people of their choosing. A designated “supporter” could help an individual make decisions about medical care/treatment, financial issues, education and other life decisions. This will be passed by both houses of the legislature and is awaiting the Governor’s signature or veto.

Emergency Outpatient Mental Health Treatment for Minors: Representative Amy Loudbeck (R-Clinton) and Senator Alberta Darling (R-River Hills) introduced Assembly Bill 848/Senate Bill 737, which allows youth to have access to outpatient mental health treatment for up to 30 days in emergency situations without first obtaining parental consent. It has been signed into law as 2017 Wisconsin Act 204.

Failed to Pass

Crisis Intervention Grants: Representative Mark Spreitzer (D-Beloit) and Senator Janis Ringhand (D-Evansville) introduced Assembly Bill 612/Senate Bill 553, which increases funding for mental health crisis intervention team training for law enforcement agencies and correctional officers from \$250,000 per biennium to \$1,000,000 per biennium. No action was taken on this bill.

Tax Credit For Youth Who Lose SSDI Eligibility: Representative Todd Novak (R-Dodgeville) and Senator Luther Olsen (R-Ripon) authored Assembly Bill 239/Senate Bill 208, which would have created a new tax credit for youth who age out of foster care or who lose a social security disability determination when they turn 18. This bill failed to pass this session.

Long Term Care Investment Fund: Representative Dave Murphy (R-Greenville) and Senator Mark Miller (D-Monona) introduced Assembly Bill 596/Senate Bill 758, which creates a long-term care investment program in Wisconsin. Individuals could contribute up to \$5,500 to a long-term care investment account annually (or up to \$8,500 annually if they are over 50) to help pay for any long-term care costs. The state would contract with a manager to perform investment, administration, and promotion functions

for the long-term care investment program similar to how the state's EdVest program currently works. A selection committee made-up of representatives of the state investment board, the Wisconsin Aging Advocacy Network and a disability advocacy organization would choose the manager. The Assembly Committee on Health held a public hearing on AB 596 on February 14, but no further action was taken on the bill.

General Health Care

Signed into Law

Reinsurance/Health Insurance Market Stability: Representative Todd Novak (R-Dodgeville) introduced Assembly Bill 885/Senate Bill 770, which creates a \$200 million state-based reinsurance program administered by the Office of Commissioner of Insurance (OCI). The goal of the program is to stabilize or reduce premiums in the individual health insurance market and increase participation of health insurance companies in the individual market. The reinsurance program will help private health insurance companies cover costs for individuals with claims of more than \$50,000 in a benefit year with a cap of \$250,000. The state will first need to seek federal approval to create the program. The bill also requires OCI to submit a report to the Governor making recommendations about additional waivers that could be requested and any other options to stabilize the individual health care market like creating a high-risk pool or an invisible high-risk pool; funding of consumer health savings accounts; expanding consumer plan choices, including catastrophic plans; and implementing any other approach that will lower consumer costs or stabilize the insurance market. This bill was signed into law as 2017 Wisconsin Act 138.

Community Paramedics: Assembly Bill 151, authored by Representative Amy Loudenberg (R-Clinton) and Senator Terry Moulton (R-Chippewa Falls), was signed into law as 2017 Wisconsin Act 66. The new law creates a community paramedic program in Wisconsin. Community paramedics will be able to provide services such as: working with the local hospital to provide community paramedicine care, chronic disease management, preventive care or post-discharge follow up visits.

Failed to Pass

Grants for Translation Services in Health Care Settings: Representative Nancy VanderMeer (R-Tomah) and Senator Jerry Petrowski (R-Marathon) introduced Assembly Bill 305/Senate Bill 243, which requires the Department of Health Services to create a \$100,000 yearly grant program for language interpretation services provided in medical clinics and hospitals that are located in rural areas or that serve medically underserved populations. This bill failed to pass this session.

Essential Health Benefits: Representative Daniel Riemer (D-Milwaukee) and Senator Jon Erpenbach (D-Middleton) have introduced Assembly Bill 362/Senate Bill 268, which puts Essential Health Benefits requirements into state statute. This would require all health plans offering coverage in Wisconsin to

cover things like maternity care, substance use/mental health, preventive services, etc. No action was taken on this bill this session.

Prohibiting Pre-existing Condition Price Discrimination: Representative Daniel Riemer (D-Milwaukee) and Senator Jon Erpenbach (D-Middleton) introduced Assembly Bill 363/Senate Bill 265, which would prohibit health plans providing coverage in Wisconsin from considering whether an individual, including a dependent, who would be covered under the plan has a preexisting condition when determining premiums or other cost-sharing. No action was taken on this bill this session.

Requires Health Plans to Cover Preventive Services without Cost Sharing: Representative Daniel Riemer (D-Milwaukee) and Senator Jon Erpenbach (D-Middleton) introduced Assembly Bill 364/Senate Bill 267, which requires health plans providing coverage in Wisconsin from charging deductibles, copayments, or coinsurance for key preventive services, such as mammography, colon cancer screening, depression screening and many more. No action was taken on this bill this session.

Pre-Existing Conditions: Representative Daniel Riemer (D-Milwaukee) introduced Assembly Bill 365, which was originally meant to prevent Wisconsin health plans from placing annual or lifetime limits on coverage. However, a substitute amendment adopted to the bill by the State Assembly says that insurance plans cannot prohibit individuals with pre-existing conditions from purchasing insurance but allows health plans to charge people with pre-existing conditions more if they have a gap in coverage. This State Assembly passed this bill 62-35, but it was never acted on by the State Senate.

Wisconsin Health Insurance Exchange: Representative Melissa Sargent (D-Madison) and Senator Kathleen Vinehout (D-Alma) introduced Assembly Bill 445/Senate Bill 359, which creates a state-run health insurance exchange where people could buy health insurance plans (this would take the place of the federal health care exchange in Wisconsin). The exchange would be operated by Badger Health Benefit Authority, which would include the insurance commissioner, state Medicaid director and other health care experts. The Authority would also provide information about Medicaid and help eligible individuals enroll in Medicaid. No action was taken on this bill this session.

Establishing Statewide Councils on Health Care and Safety Net Issues

Failed to Pass

Statewide Palliative Care Council: Representative Patrick Snyder (R-Schofield) and Senator Terry Moulton (R-Chippewa Falls) introduced Assembly Bill 633/Senate Bill 548, which would have created a statewide Palliative Care Council charged with developing a consumer and professional information and education program. The Assembly Committee on Mental Health held public hearing on this bill on December 12 and the Senate Committee on Workforce Development, Military Affairs and Senior Issues held a public hearing on the bill January 10, but it did not advance.

PANDAS and PANS Council: Representative Janel Brandtjen (R- Menomonee Falls) and Senator Alberta Darling (R-River Hills) introduced Assembly Bill 638/Senate Bill 535, which would have created a state advisory council on pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections, commonly referred to as PANDAS, and pediatric acute-onset neuropsychiatric syndrome, commonly referred to as PANS. The bill was passed by the State Assembly in January but was never voted on by the Senate.

Public Assistance Advisory Council: Senator Kathleen Vinehout (D-Alma) and Representative Lisa Subeck (D-Madison) introduced Assembly Bill 1044/Senate Bill 870, which creates a public assistance advisory council to review proposed changes to public assistance programs like Medicaid and FoodShare. No action was taken on this bill this session.

Child Care and Foster Care

Signed into Law

Wisconsin Shares Eligibility: The 2017-19 state budget created an asset limit of \$25,000 for the Wisconsin Shares program, which provides child care subsidies. Under current law, an individual must have an income at or below 185% of the Federal Poverty Level (FPL) to qualify for Wisconsin Shares. The budget created a sliding scale that would allow someone to remain eligible even if they have an income above 200% FPL. An individual's copayment would increase by \$1 for every \$3 by which the family's gross income exceeds 200% FPL. The bill also allows individuals to remain eligible for Wisconsin Shares even if there is a short-term break in their ability to meet program requirements, such as taking a break due to illness, to care for a sick family member or a break from school.

Wisconsin Shares Funding: Representative Mark Born (R-Beaver Dam) and Senator Alberta Darling (R-River Hills) introduced Assembly Bill 924/Senate Bill 793, which increases funding for Wisconsin Shares by \$8 million on January 1, 2019. It also allows the Department of Children and Families to provide larger bonuses to 4 and 5-star providers. This bill was signed into law as 2017 Wisconsin Act 236.

Statewide Network for Referrals to Community-Based Services: Representative David Crowley (D-Milwaukee) and Representative Jessie Rodriguez (R-Oak Creek) introduced Assembly Bill 779/Senate Bill 672, which provides \$210,000 in funding each year for grants to a nonprofit organization for the purpose of operating a website and telephone-based system that provides information on and referrals to community-based services. This bill will help support the United Way's 2-1-1 program. It was signed into law as 2017 Wisconsin Act 250.

Grant for Foster Parent Education and Support: Representative Lisa Subeck (D-Madison) and Senator Luther Olsen (R-Ripon) introduced Assembly Bill 787/Senate Bill 676, which creates a grant program for foster parents and children. The grants may be used for a broad range of activities and expenses,

including for incentives to retain foster parents, enhancing foster parent education, and reimbursing foster parents for foster care-related expenses. This bill was signed into law as 2017 Wisconsin Act 260.

Employment for People with Disabilities

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Community Integrated Employment: Representative James Edming (R-Glen Flora) and Senator Thomas Tiffany (R-Hazelhurst) introduced Assembly Bill 625/Senate Bill 514, which creates a formal Employment First Initiative in state statute. It requires all publicly funded programs that provide services to working age people with disabilities (16 and up) to prioritize competitive integrated employment. In addition, it requires the Department of Workforce Development (DWD), Department of Public Instruction (DPI) and the Department of Health Services (DHS) to collaborate to promote competitive integrated employment and to develop a plan establishing specific performance improvement targets. This bill was signed into law as 2017 Wisconsin Act 178.

Long Term Care Employment: Representative John Macco (R-De Pere) and Senator Dan Feyen (R-Fond du Lac) introduced Assembly Bill 819/Senate Bill 689, which creates a grant program that will be administered by the Board for People with Developmental Disabilities (BPDD) to provide coaching for the hiring of individuals with disabilities enrolled in long-term care programs. The grant program is specific to the Partners with Business model. It is expected that between \$25,000 to \$35,000 would be available for grants with the remaining funding going toward program administration. This bill was passed by both houses of the legislature and can now be signed into law.

FoodShare (Food Stamps)

Signed into Law (Or Awaiting the Governor's Signature)

FoodShare Asset Limit: The 2017-19 state budget created a \$25,000 asset limit for FoodShare (food stamp) recipients.

Proposed Rule for Drug Testing Able-Bodied Adults Participating in FSET: Wisconsin is currently working on an administrative rule to require able-bodied adults participating in the FoodShare Employment and Training (FSET) program to undergo drug screening/testing. All applicants will be required to fill out a controlled substance abuse screening questionnaire. Based on their answers to this questionnaire, they may be required to take a drug test. The plan is to implement the final rule on November 1, 2018.

Increasing Work Requirements for FoodShare Recipients: Representative Robin Vos (R-Rochester) and Senator Chris Kapenga (R-Delafield) introduced Special Session Senate Bill 1/Assembly Bill 1 which increases the required number of work and training hours for able-bodied adults without dependent children enrolled in the FoodShare Employment and Training (FSET) program from 20 hours per week to

30 hours per week. This bill was passed by both houses of the legislature and is awaiting the Governor's signature.

Required Employment and Training for FoodShare Recipients: Representative Robin Vos (R- Rochester) and Senator Chris Kapenga (R-Delafield) introduced Special Session Senate Bill 2/Assembly Bill 2 which requires all able-bodied adults to participate in the FoodShare employment and training (FSET) program in order to remain eligible for FoodShare (food stamps). Adults who are caring for children under 6 years old and students who are enrolled in school at least part-time would be exempt from the work requirements. This bill narrows the circumstances when an FSET participant could qualify for child care subsidies through Wisconsin Shares to only the job search and work experience components of FSET. Currently, any FSET activities count as qualifying activities for Wisconsin Shares. The bill also requests that the Legislative Audit Committee consider requiring an audit of the FSET program in 2019; exempts adults who are the caretakers of a dependent who has a disability from the work requirement; and creates a shared-savings provision that directs the state Department of Health Services to ask the federal government to share at least some of the savings that would result from assisting able-bodied adults in finding employment. This bill was passed by both houses of the legislature and is awaiting the Governor's signature.

Asset Limits for FoodShare, Wisconsin Works and Wisconsin Shares: Representative Robin Vos (R- Rochester) and Senator Chris Kapenga (R-Delafield) introduced Special Session Senate Bill 3 /Assembly Bill 3 which creates additional asset limits for FoodShare (food stamps), Wisconsin Works and Wisconsin Shares. The new requirements would prohibit individuals from accessing these programs if they own a home that is worth more than 200% of the statewide median home value or a personal vehicle worth more than \$20,000. It also requires the Department of Health Services and the Department of Children and Families to check federal databases every three months to see if any public assistance recipients are deceased. This bill was passed by both houses of the legislature and is awaiting the Governor's signature.

Discounts for Buying Healthy Foods with FoodShare: Special Session Assembly Bill 6/Senate Bill 6 was amended to create a pilot program to provide 2,000 FoodShare households with discounts on healthy foods and fresh produce. This bill was passed by both houses of the legislature and is awaiting the Governor's signature.

Failed to Pass

Requirement to Buy Healthy Food: Representative Treig Pronschinske (R-Mondovi) introduced Assembly Bill 530, which would create a pilot program that requires FoodShare benefits to be used for foods, food products, and beverages that have sufficient nutritional value. DHS would restrict/prohibit the use of benefits on foods, beverages and other items that are not nutritious. This bill was passed by the State Assembly but was not voted on by the Senate.

FoodShare Photo ID: Representative Jesse Kremer (R-Kewaskum) introduced Assembly Bill 702 and Special Session Assembly Bill 10/Senate Bill 10, which directed DHS to get permission from the federal government to require FoodShare cards to include a photo of the recipient. The Special Session version of the bill was passed by the Assembly but not passed by the Senate.