

Senator Erpenbach  
Senator Taylor  
Representative Taylor  
Representative Hintz

HEALTH SERVICES -- MEDICAL ASSISTANCE -- LONG-TERM CARE

Omnibus Medical Assistance Long-Term Care

Motion:

Move the following provisions:

1. *Long-Term Care Changes [Paper # 356]*. Adopt Alternative 5 to delete all of the Governor's proposed changes to the state's long-term care programs. Restore \$14,336,900 (\$6,000,000 GPR and \$8,336,900 FED) in 2016-17.

2. *Aging and Disability Resource Centers (ADRCs) and Long-Term Care Advisory Councils [Paper #357]*. Adopt Alternatives A4, B4, and C3 to delete all of the Governor's recommendations related to ADRCs, ADRC governing boards, and long-term care advisory committees.

3. *Statewide Expansion of Family Care and IRIS [Paper #358]*. Delete all of the Governor's recommendations relating to the statewide expansion of Family Care and IRIS, but retain 3.0 ombudsman specialist positions in the Board on Aging and Long-Term Care, and the funding associated with these positions.

4. *Children's Community Options Program [Paper #359]*. Adopt modifications 1a, b, c, d, e, f, and h. and a modification of Alternative 1g, to adopt the Governor's recommendations with the following changes:

a. Add to the definition of "child" under s. 46.272 of the statutes that a child is considered someone who is not eligible to receive services in or be on a waitlist for adult long-term care programs;

b. Add to the definition of "disability" under s. 46.272 of the statutes that the limitation on the ability to function should be equivalent to a nursing home, hospital, or institution for mental disease level of care;

c. Under s. 46.272(2)(b) of the statutes, replace "hospitals, and other institutional settings" with "programs that provide community-based services to children or families, other publicly funded programs, the social services, mental health, and developmental disabilities programs under ss. 46.495, 51.42, and 51.437; the independent living center program under s. 46.96; and the Medical Assistance program under subch. IV of chapter 49 of the statutes";

d. Modify s. 46.272(4)(b)1. of the statutes to read "A description of the proposed program operations";

e. Under s. 46.272(4)(b)4. of the statutes, replace "mental impairments" with "developmental disabilities";

f. Replace s. 46.272(4)(b)8.(c) of the statutes with "The county department shall submit the proposed program plan to the department upon approval by the children's community options program advisory committee.";

g. Replace s. 46.272(5) of the statutes with "POWERS AND DUTIES OF A PRIVATE NONPROFIT AGENCY. The Department may contract with a private nonprofit agency for services under this section in a county that chooses not to administer the program. The agency shall have the powers and duties under this section of a county department designated to administer the program."

h. Under s. 46.272(6) of the statutes, replace "administering agency" with "county or agency described under sub. (5)."

5. *Dementia Care Specialists [Paper #360]*. Adopt Alternative 4 to increase funding in the bill by \$376,000 (\$320,000 GPR and \$56,000 FED) in 2016-17 to fund 16 grants for dementia care specialists in 2016-17, and to provide the funding on an ongoing, rather than one-time, basis.

6. *Children's Long-Term Care Services [Paper #361]*. Adopt Alternatives A1, B1, and C4 to do the following: (a) adopt the Governor's recommendation to provide a 3% annual increase to the CLTS program for autism services; (b) adopt the Governor's recommendation to direct excess funds from school-based services to reduce CLTS waiting lists; and (c) provide \$2,658,900 (\$1,110,400 GPR and \$1,548,500 FED) in 2015-16 and \$2,738,700 (\$1,146,100 GPR and \$1,592,600 FED) in 2016-17 to provide services to approximately 150 children on the CLTS and autism services waitlists, beginning in 2015-16.

7. *MA Reimbursement for Nursing Homes [Paper #362]*. Modify the bill as follows. First, adopt Alternative A3 to increase funding by \$7,160,600 (\$2,990,300 GPR and \$4,170,300 FED) in 2015-16 and \$15,311,000 (\$6,404,500 GPR and \$8,906,500 FED) in 2016-17 to provide a 1% acuity increase to nursing homes in 2015-16 and an additional 1% acuity increase in 2016-17. Second, adopt Alternative B2 to direct the Department to study the labor region methodology, and to propose changes to the labor region methodology, as necessary, such that any proposed labor region methodology results in adjustments to direct care costs that reflect labor costs for nursing homes in each county, no later than July 1, 2016. Third, increase funding for MA benefits by \$14,321,100 (\$5,980,600 GPR and \$8,340,500 FED) in 2015-16 and by \$30,774,300 (\$12,872,700 GPR and \$17,901,600 FED) in 2016-17 to reflect the cost of using revenue of that same amount from the nursing home bed assessment to provide a 2% increase to nursing homes in 2015-16 and an additional 2% increase in 2016-17.

8. *Healthy Aging Grants*. Provide \$200,000 GPR in one-time funding each year of the 2015-17 biennium for a grant to a private, non-profit entity that will use these funds to conduct the

following activities: (a) coordinate the implementation of evidence-based health promotion programs in healthy aging; (b) coordinate with academic and research institutes regarding research on healthy aging; (c) serve as a statewide clearinghouse on evidence-based disease prevention and health promotion programs; (d) provide training and technical assistance to the staff of county departments, administering agencies, and other providers of services to aging populations; (e) collect and disseminate information on disease prevention and health promotion in healthy aging; (f) coordinate public awareness activities related to disease prevention and health promotion in aging; and (g) advise the Department on public policy issues concerning disease prevention and health promotion in aging. Create an annual GPR appropriation, entitled "Healthy aging; evidence-based training and prevention" among the Department's programs for disability and elder services.

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Note:

The attachment summarizes the fiscal effect of the motion, by item.

[Change to Bill: \$37,224,600 GPR and \$50,852,900 FED]

Attachment

**ATTACHMENT**

**Fiscal Effect of Omnibus Motion -- Health Services MA -- Long-Term Care**

**Change to Bill**

| Item # | Title                                       | 2015-16      |              |     |     | 2016-17      |              |     |     |              |
|--------|---|--------------|--------------|-----|-----|--------------|--------------|-----|-----|--------------|
|        |   | GPR          | FED          | PR  | SEG | Total        | GPR          | FED | PR  | SEG          |
| 1      | Long-Term Care Changes                      | \$0          | \$0          | \$0 | \$0 | \$6,000,000  | \$8,336,900  | \$0 | \$0 | \$14,336,900 |
| 2      | ADRCs and Long-Term Care Advisory Councils  | 0            | 0            | 0   | 0   | 0            | 0            | 0   | 0   | 0            |
| 3      | Statewide Expansion of Family Care and IRIS | 0            | 0            | 0   | 0   | 0            | 0            | 0   | 0   | 0            |
| 4      | Children's Community Options Program        | 0            | 0            | 0   | 0   | 0            | 0            | 0   | 0   | 0            |
| 5      | Dementia Care Specialists                   | 0            | 0            | 0   | 0   | 320,000      | 56,000       | 0   | 0   | 376,000      |
| 6      | Children's Long-Term Care Services          | 1,110,400    | 1,548,500    | 0   | 0   | 1,146,100    | 1,592,600    | 0   | 0   | 2,738,700    |
| 7      | MA Reimbursement for Nursing Homes          | 2,990,300    | 4,170,300    | 0   | 0   | 7,160,600    | 8,906,500    | 0   | 0   | 15,311,000   |
|        | 1%/1% Acuity Increase                       | 5,980,600    | 8,340,500    | 0   | 0   | 14,321,100   | 17,901,600   | 0   | 0   | 30,774,300   |
|        | 2%/2% General Rate Increase                 | 200,000      | 0            | 0   | 0   | 200,000      | 0            | 0   | 0   | 200,000      |
| 8      | Health Aging Grants                         |              |              |     |     |              |              |     |     |              |
|        | <b>Total</b>                                | \$10,281,300 | \$14,059,300 | \$0 | \$0 | \$24,340,600 | \$36,793,600 | \$0 | \$0 | \$63,736,900 |