



State of Wisconsin  
2011 - 2012 LEGISLATURE



LRB-0582/P3  
FFK:jld:ph

DOA:.....Dombrowski, BB0131 - Family Care, Family Care Partnership,  
PACE, and IRIS enrollment cap

**FOR 2011-13 BUDGET -- NOT READY FOR INTRODUCTION**

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

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*Analysis by the Legislative Reference Bureau*

**HEALTH AND HUMAN SERVICES**

**MEDICAL ASSISTANCE**

Under current law, in certain counties, a person who meets certain functional and financial criteria and who is either a frail elder or an adult with a physical disability or a developmental disability is eligible for community-based services through Family Care, a medical assistance waiver program known as Family Care Partnership, the Program of All-Inclusive Care for the Elderly (PACE), or a self-directed supports options program (known as IRIS). In a county where Family Care, Family Care Partnership, PACE, or IRIS is available, this bill caps enrollment in an available program at the number of participants in that program on a specific date for the 2011-13 biennium.

Family Care is currently available only in certain counties. This bill also prohibits the expansion of Family Care to counties in which the program is not available on July 1, 2011, during the 2011-13 biennium, unless DHS determines that the expansion is cost-effective.

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

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

**SECTION 9121. Nonstatutory provisions; Health Services.**

(1) FAMILY CARE ENROLLMENT. Notwithstanding section 46.286 (3) (a) of the statutes, in a county where the family care benefit, as described in section 46.286 of the statutes, is available on June 20, 2011, or the effective date of this subsection, whichever is later, the department of health services may not enroll more persons in care management organizations, as defined in section 46.2805 (1) of the statutes, to receive the family care benefit than the number of persons receiving the family care benefit in that county on June 20, 2011, or the effective date of this subsection, whichever is later. This subsection does not apply after June 30, 2013.

(2) FAMILY CARE PARTNERSHIP ENROLLMENT.

(a) *Definition.* In this subsection, “family care partnership program” means an integrated health and long-term care program operated under an amendment to the state medical assistance plan, as authorized in [42 USC 1396n](#) (i).

(b) *Enrollment.* In a county where the family care partnership program is available on June 20, 2011, or the effective date of this paragraph, whichever is later, the department of health services may not enroll more persons in the family care partnership program than the number of persons participating in the family care partnership program in that county on June 20, 2011, or the effective date of this paragraph, whichever is later. This paragraph does not apply after June 30, 2013.

(3) PROGRAM FOR ALL-INCLUSIVE CARE FOR THE ELDERLY ENROLLMENT. In a county that administers the program for all-inclusive care for the elderly under [42 USC](#)

1396u-4 on June 20, 2011, or the effective date of this subsection, whichever is later, the department of health services may not enroll more persons in the program for all-inclusive care for the elderly than the number of persons enrolled in that county on June 20, 2011, or the effective date of this subsection, whichever is later. This subsection does not apply after June 30, 2013.

(4) SELF-DIRECTED SERVICES OPTION TO RECEIVE LONG-TERM CARE SERVICES ENROLLMENT.

(a) *Definition.* In this subsection, the “self-directed services option” means the program operated under a waiver from the secretary of the federal department of health and human services under 42 USC 1396n (c) that allows participants to self-manage publicly funded long-term care services.

(b) *Enrollment.* In a county where the self-directed services option is available on June 20, 2011, or the effective date of this paragraph, whichever is later, the department of health services may not enroll more persons in the self-directed services option than the number of persons participating in the self-directed services option in that county on June 20, 2011, or the effective date of this paragraph, whichever is later. This paragraph does not apply after June 30, 2013.

(5) EXPANSION OF FAMILY CARE. Beginning on July 1, 2011, and ending on June 30, 2013, the department of health services may not propose to contract with entities to administer the family care benefit, as described in section 46.286 of the statutes, in a county in which the family care benefit is not available on July 1, 2011, unless the department of health services determines that administering the family care benefit in such a county would be more cost-effective than the county’s current mechanism for delivering long-term care services.

(END)