

## WISCONSIN LEGISLATIVE COUNCIL AMENDMENT MEMO

## **2009 Senate Bill 647**

## Senate Substitute Amendment 1, as Amended

Memo published: April 21, 2010 Contact: Richard Sweet, Senior Staff Attorney (266-2982)

Senate Substitute Amendment 1 to 2009 Senate Bill 647 requires the Department of Health Services (DHS) to develop a proposal to increase Medical Assistance reimbursement to each provider that receives a grant under the statutory provision entitled "Mike Johnson Life Care and Early Intervention Services Grants" if: (1) the provider is recognized by the National Committee on Quality Assurance as a Patient-Centered Medical Home; or (2) the Secretary of DHS determines that the provider performs well with respect to all of 10 enumerated aspects of care.

The DHS's proposal must specify increases in reimbursement rates for those providers and provide for payment of a monthly per-patient care coordination fee to those providers. The increases in reimbursement rates and the monthly per-patient care coordination fee together must provide sufficient incentive for providers to be recognized by the National Committee on Quality Assurance as a Patient-Centered Medical Home or to perform well with respect to all of the 10 enumerated aspects of care. DHS must implement the proposal beginning on January 1, 2011, subject to approval by the U.S. Department of Health and Human Services of any required waiver of federal Medical Assistance law and any required amendment to the state plan for Medical Assistance.

The substitute amendment defines "care coordination" as including "coordination of outpatient medical care, specialty care, inpatient care, dental care, and mental health care and medical case management."

Senate Amendment 1 to Senate Substitute Amendment 1 amends the provisions in the bill that require that the state share of payment for human immunodeficiency virus (HIV)-related care coordination for recipients of Medical Assistance are to be paid from the appropriation for HIV-related services. The amendment specifies that the state share for any increases in reimbursement rates for care coordination for those persons are also to be paid from that appropriation.

## **Legislative History**

The Joint Committee on Finance recommended adoption of Senate Amendment 1 to Senate Substitute Amendment 1, adoption of Senate Substitute Amendment 1, and passage of the bill as amended, all on votes of Ayes, 15; Noes, 0.

RNS:jal:wu