

State of Misconsin 2009 - 2010 LEGISLATURE

LRB-2877/1 RLR:wlj:md

2009 SENATE BILL 210

May 20, 2009 – Introduced by JOINT LEGISLATIVE COUNCIL. Referred to Committee on Children and Families and Workforce Development.

AN ACT to repeal 46.56 (1) (i) 1. to 3., 46.56 (1) (k), 46.56 (3) (d) 2. (intro.), 46.56 1 $\mathbf{2}$ (8) (L), 46.56 (8) (p) and (q), 46.56 (14) (c) 2., 46.56 (14) (c) 8. and 46.56 (15) (e); 3 to renumber 46.56 (3) (d) 1. (intro.); to renumber and amend 46.56 (1) (c), 46.56 (1) (f), 46.56 (1) (g), 46.56 (1) (o), 46.56 (3) (d) 1. a. to d., 46.56 (3) (d) 2. a. 4 $\mathbf{5}$ and b., 46.56 (6) (a) 3., 46.56 (6) (a) 4., 48.02 (9s) and 938.02 (9s); to consolidate, 6 *renumber and amend* 46.56 (1) (i) (intro.) and 4.; *to amend* 20.435 (7) (co), 7 38.14 (12), 46.215 (1) (q), 46.22 (1) (b) 1. i., 46.56 (title), 46.56 (1) (a), 46.56 (1) 8 (b), 46.56 (1) (e), 46.56 (1) (h), 46.56 (1) (L), 46.56 (1) (m), 46.56 (1) (n), 46.56 (1) 9 (p), 46.56 (2), 46.56 (3) (a), 46.56 (3) (b) 1., 2., 4., 5. and 7., 46.56 (4) (a) to (e), 10 46.56 (5) (a), (b) and (d) to (i), 46.56 (6) (title), (a) (intro.), 1. and 2., 46.56 (6) (b), 11 46.56 (6) (c), 46.56 (7), 46.56 (8) (title), 46.56 (8) (a) to (g) and (h) (intro.), 2., 3., 4., 5. and 6., 46.56 (8) (i) to (k), 46.56 (8) (m) to (o), 46.56 (8) (r) and (s), 46.56 1213(9), 46.56 (10) to (13), 46.56 (14) (a), 46.56 (14) (b) (intro.), 46.56 (14) (b) 1. and 14 3., 46.56 (14) (c) (intro.) and 1., 46.56 (14) (c) 3. to 5., 46.56 (14) (c) 6. and 7., 46.56

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1	(14) (d), 46.56 (15) (a) and (b) (intro.), 46.56 (15) (b) 2. to 4., 46.56 (15) (c) and
2	(d), $46.56(15)(f)$, $48.33(1)(c)$, $48.345(6m)$, $49.45(25)(bm)2.$, $51.42(3)(ar)14.$,
3	51.437 (4m) (m), 51.437 (4r) (a) 3., 115.817 (5) (c), 116.03 (13m), 120.12 (19),
4	938.33 (1) (c) and 938.34 (6m); <i>to repeal and recreate</i> 59.53 (7); and <i>to create</i>
5	$46.56\ (1)\ (ar),\ 46.56\ (1)\ (bm),\ 46.56\ (1)\ (de),\ (dm)\ and\ (ds),\ 46.56\ (1)\ (nm),\ 46.56\ $
6	(1) (op), 46.56 (1) (q), 46.56 (3) (a) 8., 46.56 (3) (b) 8. to 16., 46.56 (3) (d) 3., 46.56
7	(3) (d) 8. to 12., 46.56 (3) (d) 15., 46.56 (3) (e), 46.56 (5) (j) and (k), 46.56 (6) (cr),
8	46.56 (6) (d), 46.56 (8) (cm), 46.56 (8) (h) 7. and 8., 46.56 (14) (c) 9., 46.56 (15)
9	(b) 1r. and 46.56 (15) (b) 5. of the statutes; relating to: children and their
10	families who are involved in two or more systems of care and making an
11	appropriation.

Analysis by the Legislative Reference Bureau

This bill is explained in the NOTES provided by the Joint Legislative Council in the bill.

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:

PREFATORY NOTE: This bill is prepared for the Joint Legislative Council's Special Committee on Strengthening Wisconsin Families.

 $\label{eq:under current law, s. 46.56, stats., governs the integrated services programs (ISP) for children with severe disabilities. A "child with severe disabilities" is defined as follows:$

An individual who has not attained 18 years of age and whose mental, physical, sensory, behavioral, emotional or developmental disabilities, or whose combination of multiple disabilities meets all of the following conditions:

1. Is severe in degree.

2. Has persisted for at least one year or is expected to persist for at least one year.

3. Causes substantial limitations in the child's ability to function in the family, the school or the community and with the child's ability to cope with the ordinary demands of life.

4. Causes the child to need services from 2 or more service systems.

The ISP began in 1989. As of September 2008, 18 counties operated ISPs. The statute requires a county that operates an ISP to establish a coordinating committee comprised of representatives from multiple systems of care. The coordinating committee must prepare interagency agreements that participating organizations in the ISP agree

to follow in creating and operating the ISP. The interagency agreement's components are also outlined by statute. The ISP must have one or more service coordination agencies. The service coordination agency must identify a service coordinator for each child with severe disabilities who participates in the program. Referrals into the ISP may come from many different types of public agencies or organizations, or from the child or the child's family. A treatment team is developed which includes representatives of all service providers working with the family, as well as the family members and the child.

In 2002, the department of health and family services developed a request for proposals for counties to develop coordinated services team (CST) initiatives. The CST model is based on the ISP model of integrated services for children and families with multiple needs. As of October 1, 2008, 33 counties and 2 tribes operate CST initiatives. This bill makes several changes to s. 46.56. Specifically, the bill does the following:

• Expands the ISP's coverage to children who are involved in 2 or more systems of care, as well as their families, and changes the name of the program to the CST initiative.

• To reflect the expansion of the program's focus, changes the terms "integrated services", "integrated service plan", and "interdisciplinary team" to "coordinated services", "coordinated services plan of care", and "coordinated services team", respectively.

• Includes tribes as entities that may administer the CST initiative.

• Provides funding to begin to phase in the remaining counties and tribes that do not currently operate either an ISP or a CST initiative, to enable these counties and tribes to establish the CST initiative.

• Amends the definition of CST to emphasize the process by which the child's family, service providers, and informal resource persons work together to respond to the needs of the child and family, rather than by describing the characteristics of the individuals on the team.

• Expands the required and optional representatives that serve on the coordinating committee in a county or tribe. The coordinating committee is the entity that:

— Prepares interagency agreements for the creation and operation of a CST initiative.

— Assesses how the CST initiative relates to other service coordination programs operating at the county, tribal, or local level.

— Assists the administering agency in developing the application for CST funding.

— Reviews determinations by the service coordination agency regarding program eligibility, appropriate family resources, and funding of services.

• Expands the duties of the coordinating committee to include:

— Establishing operational policies and procedures.

— Ensuring quality, including adherence to core values as adopted by the state advisory committee.

— Developing a plan for orientation of new coordinating committee members and CST members to the CST process.

Identifying and addressing gaps in services.

- Ensuring client and partner agency satisfaction.

• Creates the role of initiative coordinator, and defines the initiative coordinator's duties, which are to:

— Bring together parents and staff from agencies and organizations to comprise the coordinating committee, and support their activities.

— Work with the coordinating committee to maintain and support agency participation as established in the interagency agreement.

— Work with the coordinating committee and service coordination agency to receive and review referrals.

- Work with the coordinating committee and service coordination agency to

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assure service coordination for all groups working with the child and the child's family. — Guide the development of CSTs working with the child and the child's family
to ensure compliance with the basic principles of the CST initiative's core values. — Review plans of care.
 Assist the coordinating committee and family teams in establishing consistent measures for initiative development, implementation, evaluation, and monitoring of the
project and outcomes.
— Facilitate public education and awareness of issues and programming for families and children.
 Ensure ongoing support and training related to the CST process to families, service coordinators, and providers.
 Provide support to service providers in developing strategies to enhance existing programs, to increase resources, and to establish new resources.
— Ensure that local and state agencies submit data and reports in an accurate and
 timely manner. Increases the annual appropriation to the department of health services to provide grants to counties for CST initiatives by \$1,466,000 in general purpose revenue.
provide grants to counties for CS1 initiatives by \$1,400,000 in general purpose revenue.
SECTION 1. 20.435 (7) (co) of the statutes is amended to read:
20.435 (7) (co) Integrated service programs for children with severe disabilities
<i>Initiatives for coordinated services.</i> The amounts in the schedule to fund county
integrated service programs for children with severe disabilities and tribal
initiatives under s. 46.56 to provide coordinated services.
NOTE: Modifies the integrated service program appropriation to provide funding for coordinated services for both county and tribal initiatives.
SECTION 2. 38.14 (12) of the statutes is amended to read:
38.14 (12) Integrated service programs for children with severe disabilities
INITIATIVES TO PROVIDE COORDINATED SERVICES. If the county board of supervisors
establishes an integrated service program for children with severe disabilities
initiative to provide coordinated services under s. 59.53 (7), the district board may
participate in an integrated service program for children with severe disabilities
under s. 59.53 (7) the initiative and may enter into written interagency agreements
or contracts under the program <u>initiative</u> .
NOTE: Modifies the powers of technical college district boards.

14 **SECTION 3.** 46.215 (1) (q) of the statutes is amended to read:

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1	46.215 (1) (q) If the county board of supervisors establishes an integrated
2	service program for children with severe disabilities initiative to provide coordinated
3	services under s. 59.53 (7), to participate in and administer an integrated service
4	program for children with severe disabilities under s. 59.53 (7) the initiative,
5	including entering into any written interagency agreements or contracts.
	NOTE: Modifies the duties of the county department of social services in Milwaukee County.
6	SECTION 4. 46.22 (1) (b) 1. i. of the statutes is amended to read:
7	46.22 (1) (b) 1. i. If the county board of supervisors establishes an integrated
8	service program for children with severe disabilities initiative to provide coordinated
9	services under s. 59.53 (7), to participate in and administer an integrated service
10	program for children with severe disabilities under s. 59.53 (7) the initiative,
11	including entering into any written interagency agreements or contracts.
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11	NOTE: Modifies the duties of the county department of social services in counties
	NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County.
12	NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read:
12 13	 NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide
12 13 14	NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide coordinated services for children with severe disabilities and families.
12 13 14 15	NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide coordinated services for children with severe disabilities and families. SECTION 6. 46.56 (1) (a) of the statutes is amended to read:
12 13 14 15 16	 NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide coordinated services for children with severe disabilities and families. SECTION 6. 46.56 (1) (a) of the statutes is amended to read: 46.56 (1) (a) "Administering agency" means a county department designated
12 13 14 15 16 17	 NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide coordinated services for children with severe disabilities and families. SECTION 6. 46.56 (1) (a) of the statutes is amended to read: 46.56 (1) (a) "Administering agency" means a county department designated by the <u>a</u> county board of supervisors <u>or by a tribe</u> to administer the program <u>an</u>
12 13 14 15 16 17	 NOTE: Modifies the duties of the county department of social services in counties other than Milwaukee County. SECTION 5. 46.56 (title) of the statutes is amended to read: 46.56 (title) Integrated service programs Initiatives to provide coordinated services for children with severe disabilities and families. SECTION 6. 46.56 (1) (a) of the statutes is amended to read: 46.56 (1) (a) "Administering agency" means a county department designated by the <u>a</u> county board of supervisors <u>or by a tribe</u> to administer the program an <u>initiative</u>.

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1	1. Actively supporting a child who is involved in 2 or more systems of care and
2	his or her family under an initiative to enable their receipt of the full benefits of the
3	initiative by ensuring that the coordinated services team approach to providing
4	services and principles are followed.
5	2. Helping families of a child who is involved in 2 or more systems of care gain
6	access to and a voice in the decision making that establishes the child's and family's
7	plan of care.
8	3. Fostering strong working relationships among families, systems of care, and
9	providers, with the goal of improving the lives of children who are involved in 2 or
10	more systems of care and their families.
	NOTE: Creates a definition of "advocacy".
11	SECTION 8. 46.56 (1) (b) of the statutes is amended to read:
12	46.56 (1) (b) "Agency" means a <u>public, tribal, or</u> private nonprofit organization
13	that provides treatment services for children with severe disabilities and their
14	families services and other resources for children and families.
	NOTE: Modifies the definition of "agency" to include public and tribal organizations and to broaden the description of services and resources provided.
15	SECTION 9. 46.56 (1) (bm) of the statutes is created to read:
16	46.56 (1) (bm) "Child" means an individual under the age of 18.
	NOTE: Creates a definition of "child".
17	SECTION 10. 46.56 (1) (c) of the statutes is renumbered 46.56 (1) (om), and 46.56
18	(1) (om) (intro.), 3. and 4., as renumbered, are amended to read:
19	46.56 (1) (om) (intro.) "Child with severe disabilities Severe disability" means
20	an individual who has not attained 18 years of age and whose a mental, physical,
21	sensory, behavioral, emotional, or developmental disabilities disability, including

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1	severe emotional disturbance, or whose a combination of multiple these disabilities,
2	that meets all of the following conditions:
3	3. Causes substantial limitations in the <u>a</u> child's ability to function in the <u>his</u>
4	<u>or her</u> family, the school, or the community and with the child's <u>his or her</u> ability to
5	cope with the ordinary demands of life.
6	4. Causes the <u>a</u> child to need services <u>or other resources</u> from 2 or more service
7	systems <u>of care</u> .
	NOTE: Modifies the current definition of "child with severe disabilities" to instead define "severe disability".
8	SECTION 11. 46.56 (1) (de), (dm) and (ds) of the statutes are created to read:
9	46.56(1)(de) "Family" means a child's primary caregiver or caregivers and the
10	child's siblings.
11	(dm) "Family resources" means housing, environment, institutions, sources of
12	income, services, education, a child's extended family and community relationships,
13	and other resources families need to raise their children.
14	(ds) "Initiative" means a system that is based on the strengths of children and
15	their families for providing coordinated services to children who are involved in 2 or
16	more systems of care and their families.
	NOTE: Creates definitions of "family", "family resources", and "initiative".
17	SECTION 12. 46.56 (1) (e) of the statutes is amended to read:
18	46.56 (1) (e) "Intake" means the process by which the <u>a</u> service coordination
19	agency or individuals designated by the coordinating committee under sub. (3)
20	initially screens screen a child with severe disabilities who is involved in 2 or more
21	systems of care and the child's his or her family to see if a complete assessment is
22	needed determine eligibility for an initiative and the process by which the service

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1	coordination agency determines the need for a comprehensive clinical mental health
2	assessment.
	NOTE: Modifies the definition of "intake".
3	SECTION 13. 46.56 (1) (f) of the statutes is renumbered 46.56 (1) (ce) and
4	amended to read:
5	46.56 (1) (ce) "Integrated Coordinated services" means treatment, education,
6	care and support, services <u>, and other resources</u> provided, in a coordinated manner,
7	for a child with severe disabilities <u>who is involved in 2 or more systems of care</u> and
8	his or her family.
9	SECTION 14. 46.56 (1) (g) of the statutes is renumbered 46.56 (1) (cm) and
10	amended to read:
11	46.56 (1) (cm) "Integrated service plan Coordinated services plan of care"
12	means the <u>a</u> plan for treatment, education and support services <u>under sub. (8) (h)</u> for
13	an eligible <u>a</u> child with severe disabilities <u>who is involved in 2 or more systems of care</u>
14	and the child's <u>his or her</u> family under sub. (8) (h) .
	NOTE: SECTIONS 13 and 14 modify the current definitions of "integrated services" and "integrated service plan" to instead define "coordinated services" and "coordinated services plan of care" and modify those definitions.
15	SECTION 15. 46.56 (1) (h) of the statutes is amended to read:
16	46.56 (1) (h) "Interagency agreement" means a written document of
17	understanding among service providers and other partner agencies that are
18	represented on a coordinating committee under sub. (3) that identifies mutual
19	responsibilities for implementing integrated coordinated services for children with
20	severe disabilities who are involved in 2 or more systems of care and their families.
	NOTE: Modifies the definition of "interagency agreement".

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1	SECTION 16. 46.56 (1) (i) (intro.) and 4. of the statutes are consolidated,
2	renumbered 46.56 (1) (cs) and amended to read:
3	46.56 (1) (cs) "Interdisciplinary team Coordinated services team" means a
4	group of professionals, assembled by the service coordinator, from various service
5	systems who meet all of the following criteria: 4. Are providing treatment, education
6	or support services to the child with severe disabilities or the child's family, if the
7	child or the child's family is receiving any treatment, education or support services
8	individuals, including family members, service providers, and informal resource
9	persons, who work together to respond to service needs of a child who is involved in
10	2 or more systems of care and his or her family.
	NOTE: Modifies the current definition of "interdisciplinary team" to instead define "coordinated services team" and modifies the definition.
11	SECTION 17. 46.56 (1) (i) 1. to 3. of the statutes are repealed.
	NOTE: Repeals a portion of the definition of "interdisciplinary team".
12	SECTION 18. 46.56 (1) (k) of the statutes is repealed.
	NOTE: Repeals the definition of "program".
13	SECTION 19. 46.56 (1) (L) of the statutes is amended to read:
14	46.56 (1) (L) "Service coordination" means $-a$ case management service that
15	coordinates <u>the coordination of</u> multiple service providers who <u>and family resources</u>
16	<u>that</u> are serving a particular child with severe disabilities <u>who is involved in 2 or</u>
17	more systems of care and the child's his or her family. The term includes
18	arrangement for <u>coordination of the</u> assessment <u>process</u> , development of an
19	integrated service plan <u>a coordinated services plan of care</u> based on the <u>strengths and</u>
20	<u>needs identified in the</u> assessment, advocacy f or the needs of the child and the child's
21	family, monitoring of the child's progress <u>of the child or his or her family</u> , facilitation
22	of periodic reviews of the integrated service plan coordinated services plan of care,

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1	and coordination and maintenance of clear lines of communication among all service
2	<u>family resources</u> providers and, the child, and the child's <u>his or her</u> family.
	NOTE: Modifies the definition of "service coordination".
3	SECTION 20. 46.56 (1) (m) of the statutes is amended to read:
4	46.56(1)(m) "Service coordination agency" means a county department, tribe,
5	agency, school district, cooperative educational service agency, or county children
6	with disabilities education board designated in an interagency agreement by a
7	coordinating committee <u>under sub. (3)</u> to provide intake and service coordination for
8	one or more target groups of eligible children with severe disabilities <u>who are</u>
9	involved in 2 or more systems of care and their families.
	NOTE: Modifies the definition of "service coordination agency".
10	SECTION 21. 46.56 (1) (n) of the statutes is amended to read:
11	46.56 (1) (n) "Service coordinator" means an individual who is qualified by
12	specialized training and clinical experience with children with severe disabilities
13	who are involved in 2 or more systems of care and their families and who is appointed
14	by the service coordination agency to provide service coordination of treatment,
15	education and support services for eligible children with severe disabilities and their
16	families.
	NOTE: Modifies the definition of "service coordinator".
17	SECTION 22. 46.56 (1) (nm) of the statutes is created to read:
18	46.56 (1) (nm) "Service provider" means a professional from a system of care
19	who meets one or more of the following criteria:
20	1. Is skilled in providing treatment services, education, and other family
21	resources for children who are involved in 2 or more systems of care and their
22	families.

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1	2. Conducts comprehensive evaluations of the needs of children who are
2	involved in 2 or more systems of care and their families for family resources.
3	3. Possesses skills appropriate for and knowledge of the specific types of needs
4	or dysfunctions presented by a child who is involved in 2 or more systems of care and
5	is undergoing an assessment.
6	4. Is currently providing treatment, education, or other family resources for a
7	child who is involved in 2 or more systems of care, a family of such a child, or both.
	NOTE: Creates a definition of "service provider".
8	SECTION 23. 46.56 (1) (0) of the statutes is renumbered 46.56 (1) (or) and
9	amended to read:
10	46.56 (1) (or) "Service system System of care" means the <u>a</u> public and <u>or</u> private
11	organizations organization that provide provides specialized services for children
12	with mental, physical, sensory, behavioral, emotional, or developmental disabilities
13	or that provide provides child welfare, juvenile justice, educational, economic
14	support, alcohol or other drug abuse, or health care services for children.
	NOTE: Modifies the current definition of "service system" to instead define "system of care" and modifies the definition.
15	SECTION 24. 46.56 (1) (op) of the statutes is created to read:
16	46.56 (1) (op) "Severely emotionally disturbed child" has the meaning given in
17	s. 49.45 (25) (a).

NOTE: Defines "severely emotionally disturbed child" using the definition for medical assistance case management services. Under that definition, a severely emotionally disturbed child is an individual under 21 years of age who has emotional and behavioral problems that: (a) are severe in degree; (b) are expected to persist for at least one year; (c) substantially interfere with the individual's functioning in his or her family, school or community and with his or her ability to cope with the ordinary demands of life; and (d) cause the individual to need services from 2 or more agencies or organizations that provide social services or services or treatment for mental health, juvenile justice, child welfare, special education or health.

18 **SECTION 25.** 46.56 (1) (p) of the statutes is amended to read:

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1	46.56 (1) (p) "Treatment services" means the individualized social, emotional,
2	behavioral and medical services designed to bring about habilitation, rehabilitation
3	and appropriate developmental growth of a child with severe disabilities.
	NOTE: Modifies the definition of "treatment services".
4	SECTION 26. 46.56 (1) (q) of the statutes is created to read:
5	46.56 (1) (q) "Tribe" means a federally recognized American Indian tribe or
6	band in this state.
	NOTE: Creates a definition of "tribe".
7	SECTION 27. 46.56 (2) of the statutes is amended to read:
8	46.56 (2) Establishment of programs Coordinating committee; administering
9	<u>AGENCY; INITIATIVE FUNDING</u> . If a county board of supervisors establishes -a program
10	an initiative under s. 59.53 (7) , it or if a tribe establishes an initiative, the county
11	board or tribe shall appoint a coordinating committee and designate an
12	administering agency. The program <u>initiative</u> may be funded by the county <u>or tribe</u>
13	or the county board of supervisors <u>or tribe</u> may apply for funding by the state in
14	accordance with sub. (15).
	NOTE: Provides that a county board or tribe that establishes a coordinated services initiative must appoint a coordinating committee and designate an administering agency. Also provides that the initiative may be funded by the county or tribe, or the county board or tribe may apply for state funding.
15	SECTION 28. 46.56 (3) (a) of the statutes is amended to read:
16	46.56 (3) (a) The coordinating committee shall have the responsibilities
17	specified in par. (d) and shall include representatives from all of the following:
18	1. The county department responsible for child welfare and protection services
19	or, for an initiative established by a tribe, the tribal agency responsible for child

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20 welfare and protection services.

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1	2. The county department responsible for mental health and alcohol and drug
2	abuse services for children and families <u>or, for an initiative established by a tribe, the</u>
3	tribal agency responsible for these services.
4	3. The county department responsible for providing services for children who
5	are developmentally disabled have developmental disability or, for an initiative
6	established by a tribe, the tribal agency responsible for providing these services.
7	4. The family support program under s. 46.985 if the county <u>or tribe</u> has a family
8	support program.
9	5. The juvenile court administrator or another representative appointed by the
10	judge responsible for cases heard under chs. 48 and 938 or, for an initiative
11	established by a tribe, a representative of the tribal court.
12	6. The largest school district in the county and any cooperative educational
13	service agency, if it provides special education in the county, or any county children
14	with disabilities education board in the county, and any other school district in the
15	county that is willing to participate in the program <u>initiative</u>, at the discretion of the
16	administering agency. For an initiative established by a tribe, the coordinating
17	committee shall include a representative of the school district serving the majority
18	of pupils who reside on the reservation of the tribe or on trust lands held for the tribe
19	and any cooperative educational service agency providing special education services
20	to these pupils.
21	7. At least 2 parents of children with severe disabilities, or the number of
22	parents of children with severe disabilities that it will take to make the parent

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23 representation equal to equals 25% of the coordinating committee's membership,

24 whichever is greater, of children who are involved in 2 or more systems of care.

	NOTE: Modifies the required membership for the coordinating committee to include membership options if coordinated services initiatives are established by a tribe. In addition, modifies the provision relating to the parent members to provide that the parents must be parents of a child who is involved in 2 or more systems of care. Under current law, each parent member must be a parent of a child with severe disabilities.
1	SECTION 29. 46.56 (3) (a) 8. of the statutes is created to read:
2	46.56 (3) (a) 8. The agency responsible for economic support programs.
3	SECTION 30. 46.56 (3) (b) 1., 2., 4., 5. and 7. of the statutes are amended to read:
4	46.56 (3) (b) 1. Representatives of the vocational rehabilitation office that
5	provides services to the county or, for an initiative established by a tribe, that
6	provides services to the tribe.
	NOTE: Adds the agency responsible for economic support programs to the required members of the coordinating committee.
7	2. Representatives of a technical college district that is located in the county
8	or, for an initiative established by a tribe, that serves members of the tribe.
9	4. Representatives of health maintenance organizations that are operating in
10	the county <u>or, for an initiative established by a tribe, are serving members of the</u>
11	<u>tribe</u> .
12	5. Representatives of law enforcement agencies that are located in the county
13	or, for an initiative established by a tribe, are representatives of a tribal law
14	enforcement agency.
15	7. Representatives of agencies that are located in the county or, for an initiative
16	established by a tribe, are serving members of the tribe.
	NOTE: Modifies the discretionary membership for the coordinating committee to include options for membership for coordinated services initiatives established by a tribe.
17	SECTION 31. 46.56 (3) (b) 8. to 16. of the statutes are created to read:
18	46.56 (3) (b) 8. Local elected officials.
19	9. Representatives of a vocational and technical school.
a a	

20 10. Local business representatives.

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1	11. Representatives of the county board or, for an initiative established by a
2	tribe, representatives of the elected governing body of the tribe.
3	12. Representatives of the regional offices of the department.
4	13. Representatives of the local faith-based community.
5	14. Representatives of probation and parole agencies.
6	15. Representatives of economic support agencies and the Wisconsin Works
7	agency under subch. III of ch. 49, if a different agency.
8	16. Representatives of vocational rehabilitation programs.
	NOTE: Adds individuals who may be included in coordinating committee membership.
9	SECTION 32. 46.56 (3) (d) 1. (intro.) of the statutes is renumbered 46.56 (3) (d)
10	(intro.).
11	Section 33. 46.56 (3) (d) 1. a. to d. of the statutes are renumbered 46.56 (3) (d)
12	4. to 7. and amended to read:
13	46.56(3)(d) 4. Prepare one or more interagency agreements in accordance with
14	sub. (5) that all participatory organizations in the program <u>initiative</u> agree to follow
15	in creating and operating -a program an initiative.
16	5. Assess how the program initiative relates to other service coordination
17	programs operating at the county <u>, tribal,</u> or local level and take steps to work with
18	the other service coordination programs and to avoid duplication of activities,
19	services, and resources.
20	6. If a county or tribe applies for funding under sub. (15), assist the
21	administering agency in developing the application required under sub. (15) (b).
22	7. Review determinations by the service coordination agency regarding
23	eligibility, for assessment, appropriate services family resources, or funding of

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1	services, at the request of any applicant, recipient, parent of a child who is involved
2	in 2 or more systems of care, or participating county department, or tribal agency,
3	school district, cooperative educational service agencies agency, or county children
4	with disabilities education boards board. The coordinating committee shall adopt
5	written procedures for conducting reviews.
	NOTE: Modifies the duties of the coordinating committee.
6	SECTION 34. 46.56 (3) (d) 2. (intro.) of the statutes is repealed.
	NOTE: Deletes the provision setting forth optional actions of the coordinating committee.
7	SECTION 35. 46.56 (3) (d) 2. a. and b. of the statutes are renumbered 46.56 (3)
8	(d) 13. and 14. and amended to read:
9	46.56 (3) (d) 13. Act Plan for sustainability of the system change started by the
10	initiative beginning in the first year of any funding received for the initiative and
11	thereafter by acting as a consortium to pursue additional funding for the program
12	initiative through grants from the state or federal government or private
13	foundations; maintaining formal collaborative agency relationships; including
14	families in the process by emphasizing rights and advocacy; addressing funding and
15	issues related to providing matching funds required under sub. (15) (c); and
16	recommending a plan for realized savings from substitute care budgets to be
17	reinvested in community-based care.
18	14. Establish target groups of children with severe disabilities who are
19	involved in 2 or more systems of care and their families to be served based on
20	disability of the child, age of the child, geographic areas within the county and other
21	factors with the approval of the department. If by the initiative. For a county or tribe
22	that applies for funding under sub. (15), severely emotionally disturbed children
23	with severe emotional disabilities are required to be a priority target group.

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	NOTE: Modifies the optional actions of the coordinating committee so that they are
	mandatory and modifies those actions.
1	SECTION 36. 46.56 (3) (d) 3. of the statutes is created to read:
2	46.56 (3) (d) 3. Oversee the development and implementation of the initiative.
3	SECTION 37. 46.56 (3) (d) 8. to 12. of the statutes are created to read:
4	46.56 (3) (d) 8. Establish operational policies and procedures, such as referral
5	and screening procedures, a conflict management policy, and a flexible funding
6	policy, and ensure that the policies and procedures are monitored and adhered to.
7	9. Ensure quality, including adherence to core values as adopted by the state
8	advisory committee established under sub. (14) (a).
9	10. Develop a plan for orientation of new coordinating committee members and
10	coordinated services team members to the coordinated services team approach to
11	providing services to a child and his or her family.
12	11. Identify and address gaps in services for children and families who are
13	enrolled in the initiative.
14	12. Ensure client and partner agency satisfaction through performance of a
15	client and partner agency satisfaction survey.
16	SECTION 38. 46.56 (3) (d) 15. of the statutes is created to read:
17	46.56 (3) (d) 15. Distribute information about the availability and operation of
18	the initiative to the general public and to public or private service providers who
19	might seek to make referrals to the initiative.
	NOTE: Creates additional duties of the coordinating committee.
20	SECTION 39. 46.56 (3) (e) of the statutes is created to read:
21	46.56 (3) (e) The coordinating committee may direct the initiative coordinator
22	or another person to do any of the following:
23	1. Maintain data of enrollments in the initiative and results of screening.

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1	2. Establish and report monitoring and evaluation results.
2	3. Monitor, or ensure proper monitoring by the appropriate entity of, targeted
3	case management and in-home services provided under the Medical Assistance
4	Program, under subch. IV of ch. 49, including record-keeping and billing processes.
5	4. Assist in developing and maintaining additional funding sources, including
6	collaborative efforts with system partners.
7	5. Assist in the development and implementation of advocacy for families.
	NOTE: Permits the coordinating committee to direct the initiative coordinator or another person to perform specified additional duties.
8	SECTION 40. 46.56 (4) (a) to (e) of the statutes are amended to read:
9	46.56 (4) (a) Oversee Assist the coordinating committee in overseeing the
10	development and implementation of the program <u>initiative</u> and designate the staff
11	needed for the program <u>initiative</u> .
12	(b) Assist the coordinating committee in drafting and executing interagency
13	agreements and any other operations policies and procedures necessary for the
14	start-up and operation of the program <u>initiative</u> .
15	(c) Distribute Assist the coordinating committee in distributing information
16	about the availability and operation of the program <u>initiative</u> to the general public
17	as well as <u>and</u> to public or private service providers who might seek to make referrals
18	to the program <u>initiative</u> .
19	(d) If the county board of supervisors <u>or tribe</u> decides to seek state funding
20	under sub. (15), develop the application in cooperation with the coordinating
21	committee.
22	(e) Undertake such other activities in compliance with another provision of the
23	other statutes, department rules and, department guidelines, interagency

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1	agreements, and the directions of the coordinating committee as are necessary to
2	ensure the effective and efficient operation of the program initiative.
	NOTE: Modifies the role of the administering agency. The administering agency is defined in SECTION 5 as the department designated by a county board or by a tribe to administer a coordinated services initiative.
3	SECTION 41. 46.56 (5) (a), (b) and (d) to (i) of the statutes are amended to read:
4	46.56 (5) (a) The identity of every county department, tribal agency, agency,
5	school district, cooperative educational service agency or, county children with
6	disabilities education board, technical college $district_{\star}$ or other organization that will
7	participate in the program <u>initiative</u> .
8	(b) The identification of services and resources that the participating
9	organizations will commit to the program <u>initiative</u> or will seek to obtain, including
10	joint funding of services <u>and resources</u> and funding for the qualified staff needed to
11	support the program initiative, such as by cash or contribution of in-kind services
12	and resources as determined by the department under sub. (15) (c). This
13	identification shall specify the roles and responsibilities of the coordinated services
14	team and the coordinating committee.
15	(d) The identification of any group of children with severe disabilities who will
16	be targeted for services <u>and resources</u> through the program <u>initiative</u> .
17	(e) The procedures for outreach, referral, intake, assessment, case planning,
18	and service coordination that the program <u>initiative</u> will use.
19	(f) The specific criteria, based on sub. (7), that will be used for deciding whether
20	a child with severe disabilities and his or her family are eligible for services and
21	<u>resources</u> through the program <u>initiative</u> .
22	(g) The procedures to be followed to obtain any required authorizations for
23	sharing of confidential information among organizations providing treatment,

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1	<u>services</u> , education and support services<u>,</u> and other resources to a child with sever e
2	disabilities and his or her family.
3	(h) The procedures that will be used for resolving managing conflicts among
4	service providers <u>or coordinated services team members</u> or between clients <u>a child</u>
5	or his or her family and service providers.
6	(i) The methods that will be used to measure program <u>initiative</u> effectiveness,
7	including client satisfaction <u>of a child and his or her family</u> , and for revising the
8	operation of the program <u>initiative</u> in light of evaluation results.
9	SECTION 42. 46.56 (5) (j) and (k) of the statutes are created to read:
10	46.56 (5) (j) The mission and core values of the initiative.
11	(k) Expectations for organizations represented on the coordinating committee
12	under sub. (3), including provision of the funding match required under sub. (15) (c).
	NOTE: Modifies items that an interagency agreement must include. Under SECTION 15, an interagency agreement is a written document of understanding among service providers and other partner agencies that are represented on the coordinating committee that identifies mutual responsibilities for implementing coordinated services for children and their families.
13	SECTION 43. 46.56 (6) (title), (a) (intro.), 1. and 2. of the statutes are amended
14	to read:
15	46.56 (6) (title) Roles of service coordination agency, service coordinator,
16	INITIATIVE COORDINATOR, AND INTERDISCIPLINARY COORDINATED SERVICES TEAM. (a)
17	(intro.) There may be one <u>One</u> or more service coordination agencies participating
18	may participate under the program initiative. The organizations and the target
19	groups that are to be served shall be identified in the interagency agreement under
20	sub. (5). <u>A All of the following applies to a</u> service coordination agency shall:

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1	1. Be <u>The service coordination agency shall be</u> selected based on the <u>its</u>
2	experience of the service coordination agency or its staff in providing services; and
3	resources.
4	2. Identify The service coordination agency shall do all of the following:
5	a. Identify a specific individual to act as service coordinator for each child with
6	severe disabilities who is enrolled in the initiative and the child's <u>his or her</u> family
7	to facilitate the implementation of the integrated service plan; coordinated services
8	<u>plan of care.</u>
	NOTE: Sets forth the requirements for and duties of the service coordination agency. Under SECTION 20, the service coordination agency is a county department, tribe, agency, school district, cooperative educational service agency, or county children with disabilities education board designated in an interagency agreement by the coordinating committee to provide intake and service coordination for one or more target groups of children and their families.
9	SECTION 44. 46.56 (6) (a) 3. of the statutes is renumbered 46.56 (6) (a) 2. b. and
10	amended to read:
11	46.56 (6) (a) 2. b. Provide or arrange for intake, assessment, case planning
12	<u>development of the plan of care</u> , and service coordination under sub. (8) ; and .
13	SECTION 45. 46.56 (6) (a) 4. of the statutes is renumbered 46.56 (6) (a) 2. c. and
14	amended to read:
15	46.56 (6) (a) 2. c. Act as a resource source for information about other services
16	and resources for children with severe disabilities who are involved in 2 or more
17	systems of care and their families who are not eligible for the program initiative, if
18	the coordinating committee determines that this service the service coordination
19	agency can be provided provide the information without interfering with the primary
20	purpose of the program <u>initiative</u> .
	NOTE: SECTIONS 45 and 46 modify the duties of the service coordination agency.
91	SECTION 46 46 56 (6) (b) of the statutes is amended to read:

21 SECTION 46. 46.56 (6) (b) of the statutes is amended to read:

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1	46.56 (6) (b) The service coordinator shall have the functions specified in sub.
2	(8) (f) to (i) (h), (n), and (r).
3	SECTION 47. 46.56 (6) (c) of the statutes is amended to read:
4	46.56 (6) (c) The interdisciplinary coordinated services team shall have has the
5	functions specified under sub. (8) (f) and, (h), and (i).
	NOTE: SECTIONS 47 and 48 modify the provisions cross-referencing the functions of the service coordinator and the coordinated services team.
6	SECTION 48. 46.56 (6) (cr) of the statutes is created to read:
7	46.56 (6) (cr) Every county and tribe that operates any initiative shall develop
8	written policies and procedures specifying the selection process for the initiative
9	coordinator.
	NOTE: Creates a requirement that every county and tribe that operates any initiative develop written policies and procedures specifying the selection process for the initiative coordinator.
10	SECTION 49. 46.56 (6) (d) of the statutes is created to read:
11	46.56 (6) (d) The primary responsibility of the initiative coordinator is to
12	promote collaborative relationships between systems of care. The initiative
13	coordinator shall do all of the following:
14	1. Bring together parents and relevant staff from various agencies and
15	organizations to comprise the coordinating committee under sub. (3) (a) and (b), and
16	support their activities, in order to ensure compliance with established policies and
17	procedures specified in sub. (3) (d).
18	2. Work with the coordinating committee to maintain and support agency
19	participation as established in the interagency agreement.
20	3. Work with the coordinating committee and service coordination agency to
21	receive and review referrals.

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1	4. Work with the coordinating committee and service coordination agency to
2	assure provision of service coordination services for all groups of people working with
3	the child and his or her family.
4	5. Guide the development of the coordinated service team working with the
5	child and his or her family in order to ensure compliance with basic principles of the
6	initiative core values.
7	6. Review plans of care, including crisis response plans, for consistency with
8	the coordinated services team approach to providing services to a child and his or her
9	family and core values.
10	7. Assist the coordinating committee and coordinated services teams in
11	establishing consistent measures for the development, implementation, evaluation,
12	and monitoring of the initiative and its outcomes.
13	8. Facilitate public education and awareness of issues and programs for
14	children who are involved in 2 or more systems of care and their families.
15	9. Ensure provision of ongoing support and training that is related to the
16	coordinated services team process for families, service coordinators, and providers
17	and ensure orientation for coordinated services team members.
18	10. Support service providers in developing strategies to enhance existing
19	programs, to increase resources, and to establish new resources relevant to project
20	goals and objectives.
21	11. Ensure that local and state agencies submit data and reports in an accurate
22	and timely manner.
23	12. If directed to do so by the coordinating committee, perform any of the duties
24	set forth in sub. (3) (e).

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Note: Provides that the primary responsibility of the initiative coordinator is to promote collaborative relationships in the systems of care, as defined in Section 23, and sets forth the duties of the initiative coordinator.

SECTION 50. 46.56 (7) of the statutes is amended to read:

 $\mathbf{2}$ Children with severe 46.56 (7) ELIGIBILITY OF CHILDREN AND FAMILIES. 3 disabilities who are involved in 2 of more systems of care and their families shall be 4 eligible for the program. The initiative, except that the coordinating committee may $\mathbf{5}$ establish specific additional criteria for eligibility for services and may establish 6 certain target groups of children with severe disabilities who are involved in 2 or 7 more systems of care to receive services. If target groups are established, only 8 children with severe disabilities falling within the target groups are eligible for may 9 be enrolled in the program initiative. Any eligibility criteria shall meet all of the following conditions: 10

(a) Be based on a community assessment that identifies areas of greatest need
 for integrated coordinated services for children with severe disabilities.

(b) Give priority to children with severe disabilities who are at risk of placement outside the home or who are in an institution and are not receiving integrated coordinated community-based services based in the community and other resources, or who would be able to return to community placement or their homes from an institutional placement if such the services and other resources were provided.

(c) Not exclude a child with severe disabilities or that child's <u>his or her</u> family
from services <u>or other resources</u> because of lack of ability to pay.

NOTE: Modifies the provisions relating to eligibility of children and families.

21 SECTION 51. 46.56 (8) (title) of the statutes is amended to read:

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146.56 (8) (title)Referral, intake, assessment, case planning plan of care2Development, and service coordination.

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3 SECTION 52. 46.56 (8) (a) to (g) and (h) (intro.), 2., 3., 4., 5. and 6. of the statutes 4 are amended to read:

 $\mathbf{5}$ 46.56 (8) (a) Referrals to the program initiative may come from any county 6 departments, tribal agencies, agencies, school districts, cooperative educational 7 service agencies, county children with disabilities education boards, technical 8 college districts, courts assigned to exercise jurisdiction under chs. 48 and 938, tribal 9 courts, or any other organization, or the a child with severe disabilities who is 10 involved in 2 or more systems of care or his or her family may contact the 11 administering agency or service coordination agency to request services and 12resources.

13(b) Upon referral, staff from the service coordination agency or individuals 14 designated by the coordinating committee shall screen the referral to determine if 15the child with severe disabilities and the child's his or her family appear to meet the 16 eligibility criteria and any target groups group requirements established by the 17coordinating committee. If the child with severe disabilities and the child's his or her 18 family appear to be eligible, the staff shall gather assist the entity that made the 19 referral under par. (a), and the parent or parents, in gathering information from the 20child's family and any current service providers necessary to prepare an application 21for the program initiative.

(c) Consent for release of information and participation of <u>relating to</u> a child
 with severe disabilities and his or her family in the program and in the program
 evaluation must <u>shall</u> be obtained from the child's parent, or the child, if appropriate

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or required <u>by federal statute or regulation or state statute or rule</u>, or by order of a
 court with appropriate jurisdiction.

3 The service coordination agency or individuals designated by the (d) coordinating committee shall review the completed application with the family, and, 4 5 in light of the eligibility criteria in the interagency agreement and sub. (7), determine 6 whether the child with severe disabilities and the child's his or her family are eligible 7 for and appropriate for services through the program enrollment in the initiative. 8 The service coordination agency or the individuals designated by the coordinating 9 committee shall approve or disapprove each application within 30 days after the date 10 on which the application was received completed.

(e) If the child with severe disabilities who is involved in 2 or more systems of
care and the child's his or her family are found to be ineligible, or if it is determined
that enrollment in the initiative is not the best method of meeting the needs of the
child and his or her family, staff from the service coordination agency or individuals
designated by the coordinating committee shall assist them the child and family in
obtaining identifying and accessing needed services or resources from appropriate
providers.

(f) If the child with severe disabilities and the child's his or her family are found
to be eligible for the program and are enrolled in the initiative, the agency shall
assign a service coordinator who shall assemble an interdisciplinary a coordinated
services team to assess the strengths and needs of the child with severe disabilities
and the child's his or her family's need for treatment, education, care, and support.
The service coordinator shall coordinate the operations of the coordinated services
team.

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(g) The service coordinator shall assemble the results of all prior relevant 1 2 assessments and evaluations documenting the service strengths and needs of the a 3 child with severe disabilities enrolled in the initiative and the child's his or her 4 family, including individualized education program team evaluations under s. $\mathbf{5}$ 115.782 or independent educational evaluations, court-ordered evaluations under 6 s. 48.295 or 938.295, family support program evaluations, community integration 7 program or community options program assessments, and any other available medical, psychiatric, psychological, vocational or developmental educational, 8 9 medical, vocational, and psychosocial evaluations.

10 (h) (intro.) The interdisciplinary coordinated services team, the family of the 11 child with severe disabilities enrolled in the initiative, and the service coordinator 12shall, based on a review of a summary of existing assessments of strengths and needs 13 that have been assembled and any additional evaluations and plans that they the 14team, the coordinator, or the family find finds to be necessary, prepare an integrated a strength-based, gender-competent and culturally competent, 15service family-centered, coordinated services plan of care within 60 days after the date on 16 17which the application was received approved. The integrated service coordinated services plan of care shall include all of the following: 18

2. The short-term and long-term goals for treatment and support services for
 to address the needs of the child with severe disabilities and the child's his or her
 family.

3. The services <u>and resources</u> needed by the child with severe disabilities and
the child's <u>his or her</u> family, including the identity of each <u>individual and</u>
organization that will be responsible for providing <u>-a portion of the treatment</u>,
education and support services to be offered to the child and the child's family, and

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the specific services that each organization will provide the services and other
 resources. The coordinated services plan of care shall place emphasis on services and
 resources that are available through community and informal sources.

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4 4. Criteria for measuring the effectiveness and appropriateness of the 5 integrated service plan coordinated services plan of care so that it can be modified 6 as needed to better meet the child's and the child's family's needs. <u>A coordinated</u> 7 services plan of care shall be oriented so as to produce meaningful outcomes and to 8 provide services in the least restrictive setting possible.

5. Identification of any administrative or judicial procedures under ch. 48, 51,
55, 115, 118, or 938 that may be necessary in order to fully implement the integrated
service plan coordinated services plan of care and the identity of the individual or
organization that will be responsible for initiating those procedures, if any are
required.

6. Identification of available sources of funding to support the services <u>and</u> <u>other resources</u> needed for the child with severe disabilities and his or her family and an allocation of funding responsibility among organizations where <u>if</u> more than one organization is responsible for the child's and <u>the child's his or her</u> family's treatment, education and support services.

NOTE: Modifies the provisions relating to referrals to the coordinated services initiative, screening of children and families referred to the initiative, consent for release of information, review of completed applications with the child's family, assistance to families found to be ineligible, enrollment in the initiative and assignment of a coordinated services team, assembling results of prior assessments and evaluations documenting the strengths and needs of the child, and preparation of a coordinated services plan of care.

SECTION 53. 46.56 (8) (cm) of the statutes is created to read:

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1	46.56 (8) (cm) Consent for participation of a child and his or her family in the
2	initiative and in the initiative evaluation shall be obtained from the child's parent
3	or, if appropriate, the child.
	NOTE: Creates a separate provision relating to consent for participation in a CST initiative. This language is deleted from s. 46.56 (8) (c), stats., in the bill.
4	SECTION 54. 46.56 (8) (h) 7. and 8. of the statutes are created to read:
5	46.56 (8) (h) 7. Clear statements articulating the specific needs of the child and
6	family that are to be addressed. Needs may not be stated solely in terms of the need
7	for services but may be described in a strength-based manner with a response that
8	is readily achievable.
9	8. Plans for responding to possible crisis situations that may occur with the
10	child and his or her family.
	NOTE: Creates additional information that must be included in the coordinated services plan of care.
11	SECTION 55. 46.56 (8) (i) to (k) of the statutes are amended to read:
12	46.56 (8) (i) If additional evaluations are needed, the service coordination
13	agency <u>coordinated services team</u> shall arrange for them or assist the child's family
14	in obtaining them.
15	(j) The proposed integrated service plan coordinated services plan of care shall
16	be submitted to any service providers who would be <u>are</u> included in the integrated
17	service plan and the court assigned to exercise jurisdiction under chs. 48 and 938 if
18	participation in the program has been court ordered under s. 48.345 (6m) or 938.34
19	(6m) proposed plan of care.
20	(k) Upon written approval of the integrated service plan coordinated services
21	<u>plan of care</u> by the proposed service providers and, the child's family, unless the
22	child's involvement in the program is through court order under s. 48.355 or 938.355,

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1 in which case approval of the court may be substituted for that of the family, and the 2 coordinated services team, the integrated service plan plan of care shall be 3 implemented by the service coordination agency and the service providers 4 individuals and organizations designated to provide services and other resources $\mathbf{5}$ under the integrated service plan plan of care. NOTE: Modifies provisions relating to arranging for additional evaluations of the child, submitting the coordinated services plan of care to any service provider included in the plan of care, and implementing the plan of care. 6 **SECTION 56.** 46.56 (8) (L) of the statutes is repealed. NOTE: Repeals a provision under which the service coordination agency and the designated service providers must include in the integrated service plan all individuals who are active in the care of the child with severe disabilities, including members of the child's family, foster parents, and other individuals who by close and continued association with the child have come to occupy significant roles in the care and treatment of the child. **SECTION 57.** 46.56 (8) (m) to (o) of the statutes are amended to read: 7 8 46.56 (8) (m) Each organization or service provider designated to provide 9 services and other resources under the integrated service coordinated services plan 10 of care shall identify a specific staff person individual who shall serve as the ongoing member of a treatment team contact person to ensure continuity and communication 11 12while services are being provided to the child with severe disabilities and his or her 13family under the integrated service plan. The service coordinator shall coordinate the operations of the treatment team of care. 14 (n) The service coordinator shall advocate for the child with severe disabilities 1516 and the child's his or her family and ensure that they are provided the opportunity to participate in assessment, planning, and ongoing review of services to the fullest 17extent possible. 18 19 (o) Services and other resources under this section shall be provided in the

20 community, preferably in the child's home or home community, in the least restrictive

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1 and least intrusive setting and manner which that meets the best interests of the

2 child with severe disabilities.

NOTE: Modifies provisions relating to identifying an ongoing contact person from each organization or service provider designated to provide services under the plan of care, requiring that the service provider advocate for the child and his or her family and ensure they are participating in planning and other activities to the fullest extent possible, and requiring that services and other resources be provided in the least restrictive and least intrusive setting and manner.

3 SECTION 58. 46.56 (8) (p) and (q) of the statutes are repealed.

NOTE: Repeals provisions under which an integrated service plan may not be used to place or accomplish the placement of a child outside of his or her home and that an integrated service plan may not modify a individualized education program.

4 **SECTION 59.** 46.56 (8) (r) and (s) of the statutes are amended to read:

5 46.56 (8) (r) The On a regular basis, and at least every 3 months, the service 6 coordinator shall, when necessary and at least every 6 months, assemble the 7 treatment coordinated services team, the family of the child with severe disabilities, 8 the child with severe disabilities, where if appropriate, and any counsel, guardian 9 ad litem, or other person advocating for the interests of the child with severe 10 disabilities or the child's his or her family to review the integrated service, plan of <u>care and progress toward the goals of the integrated service plan of care</u>, establish 11 12new goals, request the inclusion of new participating organizations or individuals, 13 or otherwise modify the integrated service coordinated services plan of care to better 14 meet the needs of the child with severe disabilities and the child's his or her family. 15Decisions to amend the integrated service coordinated services plan of care must be 16 approved by the service coordinator, the treatment coordinated services team, the family and, where if the integrated service plan of care is being provided under a 1718 court order, by the court.

(s) Services under the integrated service plan may be terminated <u>Coordination</u>
 of services by a coordinated services team may be ended by the agreement of all

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1	participants on the coordinated services team that the goals of treatment and
2	support have been met and that an integrated service plan is no longer needed, by
3	order of the court if services are being provided under court order, or are being met;
4	by withdrawal of the family of the child with severe disabilities unless participation
5	is court ordered, or; by the service coordination agency upon a recommendation from
6	the service coordinator and the treatment, that further services are not in the child's
7	best interests, or that coordinated services team; by the family's refusal to
8	<u>participate in the process; if</u> the child with severe disabilities and child's <u>his or her</u>
9	family no longer meet the eligibility criteria for the program coordinated services
10	team; or by court order, if services are being provided under court order.
	NOTE: Modifies provisions relating to review of and amendments to plans of care and termination of the coordinated services team process.
11	SECTION 60. 46.56 (9) of the statutes is amended to read:
12	46.56 (9) IMMEDIATE CARE. Individual county departments, tribal agencies,
13	other agencies, and other service providers may shall provide immediate services
14	and other resources as necessary and appropriate to children with severe disabilities
15	who are involved in 2 or more systems of care and their families who have been
16	referred for participation an evaluation of eligibility for and appropriateness of
17	<u>enrollment</u> in the program <u>initiative</u> while assessment and planning take place.
	NOTE: Modifies the provision relating to providing immediate services and other resources as necessary.
18	SECTION 61. 46.56 (10) to (13) of the statutes are amended to read:
19	46.56 (10) RELATION TO FAMILY OTHER SUPPORT PROGRAM PROGRAMS. In any county
20	<u>or for a tribe</u> that has a family support program under s. 46.985 , <u>or other support</u>
21	programs, including comprehensive community services or office of justice
22	assistance programs, the integrated service program initiative shall coordinate its

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activities with the family support program. The administering agency for the family
support program may act as a service coordination agency for the integrated service
program and the family support program advisory committee may act as the
coordinating committee if the requirements of this section are met and the
department gives its approval programs.

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6 (11) INFORMAL CONFLICT CONFLICT MANAGEMENT. The department, 7 administering agency, service coordination agencies, and service coordinators shall 8 establish and use informal means for conflict management, including consultation, 9 mediation, and independent assessment, whenever possible. <u>A formal conflict</u> 10 <u>management policy shall be established in writing by the coordinating committee for</u> 11 <u>use by families, providers, and other individuals involved in the initiative.</u>

12 (12) ADMINISTRATIVE APPEALS. Decisions by the service coordination agency 13regarding eligibility, enrollment, denial, termination, reduction, or appropriateness of services and decisions by the individuals designated by the coordinating 14 15committee regarding eligibility, enrollment, or denial may be appealed to the 16 coordinating committee by a child with severe disabilities who is a service applicant 17or recipient or by the parent or guardian or guardian ad litem of the applicant or 18 Decisions of the coordinating committee may be appealed to the recipient. 19 department under ch. 227.

(13) REVIEW OF ACTIONS BY INDIVIDUAL AGENCIES. Nothing in this section shall
 limit, modify, or expand the rights, remedies, or procedures established in federal
 statutes or regulations or state law statutes or rules for individuals or families
 receiving services provided by individual organizations that are participating in the
 integrated service coordinated services plan of care.

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NOTE: Modifies the provision requiring the coordinated services initiative to coordinate its activities with other support programs, conflict management, administrative appeals, and review of actions by individual organizations participating in the plan of care.

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SECTION 62. 46.56 (14) (a) of the statutes is amended to read:

 $\mathbf{2}$ 46.56 (14) (a) In order to support the development of a comprehensive service 3 system of coordinated care for children with severe disabilities who are involved in 2 or more systems of care and their families, the department shall establish a 4 $\mathbf{5}$ statewide state advisory committee with representatives of county departments and 6 tribal governing bodies, the department of public instruction, educational agencies, 7 the department of children and families, the department of corrections, the juvenile 8 correctional system, professionals experienced in the provision of services to children 9 with severe disabilities, who are involved in 2 or more systems of care and their 10 families with children with severe disabilities, advocates for such families and their 11 children, the subunit of the department of workforce development that administers 12vocational rehabilitation, a representative of the local workforce development board 13established under 29 USC 2832, a representative of the philanthropy community, the technical college system, health care providers, courts assigned to exercise 14 15jurisdiction under chs. 48 and 938, child welfare officials, and other appropriate persons as selected by the department. The department may use an existing 1617committee for this purpose if it has representatives from the listed groups and is willing to perform the required functions. This committee shall establish principles 18 19 and core values for administering initiatives, monitor the development of programs 20initiatives throughout the state, and support communication and mutual assistance 21among operating programs initiatives as well as those that are being developed.

NOTE: Modifies the provision requiring the department of health services to establish a state advisory committee. The bill adds to membership of the advisory committee representatives of tribal governing bodies, the department of corrections, the

juvenile correctional system, the subunit of the department of workforce development

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that administers economic support programs, the local workforce development board. the philanthropic community, and the department of children and families. **SECTION 63.** 46.56 (14) (b) (intro.) of the statutes is amended to read: 1 2 46.56 (14) (b) (intro.) The department shall provide, either directly or through 3 purchase of services, the following support services to the counties and tribes that 4 elect to participate in the program initiative: 5**SECTION 64.** 46.56 (14) (b) 1. and 3. of the statutes are amended to read: 6 46.56 (14) (b) 1. Consultation in the areas of developing and maintaining 7 individual integrated service plans, initiatives and finding appropriate resources, 8 and establishing and maintaining local programs. 9 3. Assessment resources for cases where no local evaluation resource is 10 available or sufficient to enable development of an effective integrated service plan coordinated services plan of care. These resources may be provided directly through 11 12state-operated programs or by referral to private service providers. NOTE: SECTIONS 63 and 64 modify current requirements for the department of health services to provide support services to counties and tribes that elect to participate in the coordinated services team initiative. 13 **SECTION 65.** 46.56 (14) (c) (intro.) and 1. of the statutes are amended to read: 14 46.56 (14) (c) (intro.) The department shall evaluate the programs initiatives 15funded under this section. All organizations participating in the program initiatives shall cooperate with the evaluation. The evaluation shall include information about 16 17all of the following: 18 1. The number of days that children with severe disabilities served in the 19 programs enrolled in the initiative spent in out-of-home placement compared to 20 other children with severe disabilities in the target group who are involved in 2 or

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1	more systems of care and are not enrolled in the initiative and the costs associated
2	with these placements.
3	SECTION 66. 46.56 (14) (c) 2. of the statutes is repealed.
4	SECTION 67. 46.56 (14) (c) 3. to 5. of the statutes are amended to read:
5	46.56 (14) (c) 3. A comparison between any changes in problem behaviors of
6	participants enrollees before and after participation enrollment in the program
7	<u>initiative</u> .
8	4. A comparison between school attendance and performance of participants
9	<u>enrollees</u> before and after participation <u>enrollment</u> in the program <u>initiative</u> .
10	5. A comparison between recidivism rates of participants enrollees who have
11	a history of delinquency.
12	SECTION 68. 46.56 (14) (c) 6. and 7. of the statutes are amended to read:
13	46.56 (14) (c) 6. Parent and child satisfaction with the program initiative.
14	7. Types of services provided to children with severe disabilities and their
15	families in the program through the integrated service plan initiative and the cost
16	of these services.
	NOTE: SECTIONS 65, 66, 67, and 68 modify provisions requiring the department of health services to evaluate initiatives receiving state funding.
17	SECTION 69. 46.56 (14) (c) 8. of the statutes is repealed.
	NOTE: Repeals the provision requiring the department of health services to evaluate the fulfillment of the terms of the interagency agreements developed by the coordinating committee.
18	SECTION 70. 46.56 (14) (c) 9. of the statutes is created to read:
19	46.56 (14) (c) 9. A systems change and sustainability plan under sub. (3) (d) 13.
20	SECTION 71. 46.56 (14) (d) of the statutes is amended to read:
21	46.56 (14) (d) Notwithstanding sub. (1) (c) (intro.) eligibility requirements for
22	enrollment in the initiative, if the state is funding the program initiative in a

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1	particular county or for a tribe under sub. (15), the department may permit the
2	county <u>or tribe</u> to serve <u>under this section</u> any individual who has <u>a</u> severe
3	disabilities disability and who has not attained 22 years of age, and his or her family,
4	if the individual's mental, physical, sensory, behavioral, emotional, or developmental
5	disabilities disability or whose combination of multiple disabilities meets the
6	requirements specified in sub. (1) (c) (om) 1. to 4.
	NOTE: Modifies the provision under which the state may permit a county or tribe receiving state funding to serve an individual who has a severe disability and who has not attained 22 years of age.
7	SECTION 72. 46.56 (15) (a) and (b) (intro.) of the statutes are amended to read:
8	46.56 (15) (a) From the appropriation $\underline{account}$ under s. 20.435 (7) (co), the
9	department shall make available funds to implement programs. The funds may be
10	used to pay for the intake, assessment, case planning and service coordination
11	provided under sub. (8) and for expanding the capacity of the county to provide
12	community-based care and treatment for children with severe disabilities
13	initiatives under this section.
14	(b) (intro.) In order to apply for funds under this section subsection the county
15	board of supervisors <u>or tribe</u> shall do all of the following:
	NOTE: Modifies the provision permitting the department of health services to provide funds to implement coordinated services initiatives.
16	SECTION 73. 46.56 (15) (b) 1r. of the statutes is created to read:
17	46.56 (15) (b) 1r. Demonstrate that the coordinating services team approach
18	to providing services to children who are involved in 2 or more systems of care and
19	families will be followed, and principles and core values, as outlined by the advisory
20	committee established by the department, will be adhered to.
	NOTE: Creates an additional requirement for county boards of supervisors or tribes who apply for funds to implement a coordinated services initiative.

SECTION 74. 46.56 (15) (b) 2. to 4. of the statutes are amended to read: 21

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1	46.56 (15) (b) 2. Establish children with severe emotional disturbances to be
2	the priority target group <u>to be</u> served by the program <u>initiative as severely</u>
3	emotionally disturbed children.
4	3. Submit a plan to the department for implementation of the integrated
5	service program initiative in accordance with the requirements of this section.
6	4. Submit a description of the existing services <u>and other resources</u> in the
7	county <u>or tribe</u> for children with severe disabilities <u>who are involved in 2 or more</u>
8	systems of care, an assessment of any gaps in services, and a plan for using the funds
9	received under this program subsection or funds from other funding sources to
10	develop or expand any needed community-based services such as in-home
11	treatment, treatment foster care, day treatment, respite care or crisis services <u>the</u>
12	<u>initiative</u> .
	NOTE: Modifies the current requirements for county boards of supervisors or tribes that apply for funds to implement a coordinated services initiative.
13	SECTION 75. 46.56 (15) (b) 5. of the statutes is created to read:
14	46.56 (15) (b) 5. Agree to comply with this section.
	NOTE: Creates an additional requirement for county boards of supervisors or tribes that apply for funds to implement a coordinated services initiative.
15	SECTION 76. 46.56 (15) (c) and (d) of the statutes are amended to read:
16	46.56 (15) (c) In order <u>for a county or tribe</u> to obtain funds under this section,
17	subsection, all of the participating agencies and organizations shall provide
18	matching funds <u>that, in total,</u> equal to 20% of the requested funding shall be provided
19	by the participating county departments and school districts. All of the participating
20	county departments and school districts shall participate in providing the. The
21	match , which may be cash or in-kind. The department shall determine what may
22	be used as in-kind match.

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1	(d) In order to apply for funding, at least one school district, cooperative
2	educational service agency or county children with disabilities education board
3	serving children with severe disabilities in the county must participate in the
4	program a county or tribe shall have a coordinating committee that meets the
5	requirements under sub. (3) (a) and (b), that will carry out the responsibilities under
6	<u>sub. (3) (d)</u> .
	NOTE: Modifies provisions relating to required matching funds and the requirement that a county or tribe must have a coordinating committee in order to apply for funding to implement a coordinated services initiative.
7	SECTION 77. 46.56 (15) (e) of the statutes is repealed.
	NOTE: Repeals the provision under which the coordinating committee and the administering agency must develop and submit to the department of health services, during the first year of funding, a set of goals for diverting children with severe disabilities from placements outside the home and a plan for allocating funding from institutional services to community-based services for children with severe disabilities. Further, this provision provides that the coordinating committee and the administering agency must ensure that any funds saved, during the course of the program, as a result of the reduced use of institutional care by the target population will be allocated to community-based services for the target population.
8	SECTION 78. 46.56 (15) (f) of the statutes is amended to read:
9	46.56 (15) (f) Funds allocated under this subsection may not be used to replace
10	any other state and federal funds or any county funds that are being used to fund
11	services for children with severe disabilities who are involved in 2 or more systems
12	<u>of care</u> .
	NOTE: Modifies the provision relating to replacing other funds with coordinated services initiative funds.
13	SECTION 79. 48.02 (9s) of the statutes is renumbered 48.02 (2f) and amended
14	to read:
15	48.02 (2f) "Integrated service Coordinated services plan of care" has the
16	meaning given in s. 46.56 (1) (g) (cm).
17	SECTION 80. 48.33 (1) (c) of the statutes is amended to read:

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1	48.33 (1) (c) A description of the specific services or continuum of services which
2	the agency is recommending that the court order for the child or family or for the
3	expectant mother of the unborn child, the persons or agencies that would be
4	primarily responsible for providing those services, the identity of the person or
5	agency that would provide case management or coordination of services, if any, and,
6	in the case of a child adjudged to be in need of protection or services, whether or not
7	the child should receive an integrated service <u>a coordinated services</u> plan <u>of care</u> .
8	SECTION 81. 48.345 (6m) of the statutes is amended to read:
9	48.345 (6m) If the report prepared under s. 48.33 (1) recommends that the child
9 10	48.345 (6m) If the report prepared under s. 48.33 (1) recommends that the child is in need of an integrated service <u>a coordinated services</u> plan <u>of care</u> and if an
10	is in need of an integrated service a coordinated services plan of care and if an
10 11	is in need of an integrated service <u>a coordinated services</u> plan <u>of care</u> and if an integrated service program <u>an initiative</u> under s. 46.56 has been established in the
10 11 12	is in need of an integrated service <u>a coordinated services</u> plan <u>of care</u> and if an integrated service program <u>an initiative</u> under s. 46.56 has been established in the county <u>or, for a child who is a member of a tribe, as defined in s. 46.56 (1) (q), by a</u>
10 11 12 13	is in need of an integrated service <u>a coordinated services</u> plan <u>of care</u> and if an integrated service program <u>an initiative</u> under s. 46.56 has been established in the county <u>or</u> , for a child who is a member of a tribe, as defined in s. 46.56 (1) (q), by a tribe, the judge may order that an integrated service <u>an assessment of the child and</u>

NOTE: SECTIONS 79, 80, and 81 modify provisions of the ch. 48, stats., the children's code, to make them consistent with the changes in the bill relating to coordinated services initiatives. In addition, SECTION 81 permits a judge to order that a child be assessed for eligibility for coordinated services instead of permitting a judge to order coordinated services without an assessment.

17 SECTION 82. 49.45 (25) (bm) 2. of the statutes is amended to read:

18 49.45 (25) (bm) 2. — A— Individuals who are designated by the coordinating

19 <u>committee have, or a</u> service coordination agency has, determined under s. 46.56 (8)

- 20 (d) that the person is a child, as defined in s. 46.56 (1) (bm), with emotional and
- 21 behavioral disabilities that meet the requirements under s. 46.56 (1) (c) 1. to 4.

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NOTE: Modifies current law relating to case management services for severely emotionally disturbed children under the medical assistance program to make it consistent with changes in the bill relating to coordinated services initiatives.

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1	SECTION 83. 51.42 (3) (ar) 14. of the statutes is amended to read:
2	51.42 (3) (ar) 14. If the county board of supervisors establishes an integrated
3	service program for children with severe disabilities initiative to provide coordinated
4	services under s. 59.53 (7), participate in and may administer an integrated service
5	program for children with severe disabilities under s. 59.53 (7) the initiative,
6	including entering into any written interagency agreements or contracts.
7	SECTION 84. 51.437 (4m) (m) of the statutes is amended to read:
8	51.437 (4m) (m) If the county board of supervisors establishes an integrated
9	service program for children with severe disabilities initiative to provide coordinated
10	services under s. 59.53 (7), participate in an integrated service program for children
11	with severe disabilities under s. 59.53 (7) the initiative, including entering into any
12	written interagency agreements or contracts.
13	SECTION 85. 51.437 (4r) (a) 3. of the statutes is amended to read:
14	51.437 (4r) (a) 3. May administer an integrated service program for children
15	with severe disabilities initiative to provide coordinated services under s. 59.53 (7),
16	if the county board of supervisors establishes an integrated service program for
17	children with severe disabilities the initiative.
	NOTE: SECTIONS 83, 84, and 85 modify the duties and powers of county departments of community programs and developmental disability services to make them consistent with the changes in the draft relating to coordinated services initiatives.
18	SECTION 86. 59.53 (7) of the statutes is repealed and recreated to read:
19	59.53 (7) INITIATIVE TO PROVIDE COORDINATED SERVICES. The board may establish
20	an initiative to provide coordinated services under s. 46.56.
	NOTE: Permits a county board of supervisors to establish a coordinated services

 $\ensuremath{\operatorname{NOTE:}}$ Permits a county board of supervisors to establish a coordinated services initiative.

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1	SECTION 87. 115.817 (5) (c) of the statutes is amended to read:
2	115.817 (5) (c) If the county board of supervisors establishes an integrated
3	service program for children with severe disabilities initiative to provide coordinated
4	$\underline{services}$ under s. 59.53 (7), the county children with disabilities education board shall
5	participate in an integrated service program for children with severe disabilities
6	under s. 59.53 (7) the initiative, and may enter into written interagency agreements
7	or contracts under the program initiative .
	NOTE: Modifies the duties of the county children with disabilities education board to make them consistent with the changes in the bill relating to coordinated services initiatives.
8	SECTION 88. 116.03 (13m) of the statutes is amended to read:
9	116.03 (13m) If the county board of supervisors establishes an integrated
10	service program for children with severe disabilities initiative to provide coordinated
11	services under s. 59.53 (7), participate in an integrated service program for children
12	with severe disabilities under s. 59.53 (7) the initiative and may enter into written
13	interagency agreements or contracts under the program initiative.
	NOTE: Modifies the duties of the board of control of a cooperative educational service agency to make them consistent with the changes in the bill relating to coordinated services initiatives.
14	SECTION 89. 120.12 (19) of the statutes is amended to read:
15	120.12 (19) (title) INTEGRATED SERVICE PROGRAM INITIATIVE TO PROVIDE
16	<u>COORDINATED SERVICES</u> . If the county board of supervisors establishes an integrated
17	service program for children with severe disabilities initiative to provide coordinated
18	services under s. 59.53 (7), participate in an integrated service program for children
19	with severe disabilities under s. 59.53 (7) the initiative and may enter into written
20	interagency agreements or contracts under the program initiative.
	NOTE: Modifies the duties of school boards to make them consistent with the changes in the bill relating to coordinated services initiatives.

5

1	SECTION 90. 938.02 (9s) of the statutes is renumbered 938.02 (2f) and amended
2	to read:
3	938.02 (2f) "Integrated service Coordinated services plan of care" has the
4	meaning given in s. 46.56 (1) (g) (<u>cm</u>).

SECTION 91. 938.33 (1) (c) of the statutes is amended to read:

6 938.33 (1) (c) A description of the specific services or continuum of services that 7 the agency is recommending the court to order for the juvenile or family, the persons 8 or agencies that would be primarily responsible for providing those services, and the 9 identity of the person or agency that would provide case management or coordination 10 of services, if any, and whether or not the juvenile should receive an integrated 11 service a coordinated services plan of care.

12 SECTION 92. 938.34 (6m) of the statutes is amended to read:

13 938.34 (6m) INTEGRATED SERVICE COORDINATED SERVICES PLAN OF CARE. If the 14 report prepared under s. 938.33 (1) recommends that the juvenile is in need of an 15 integrated service a coordinated services plan of care and if an integrated service 16 program initiative under s. 46.56 has been established in the county or, if applicable, 17 by a tribe, order that an integrated service an assessment of the juvenile and the 18 juvenile's family for eligibility for and appropriateness of the initiative, and if eligible 19 for enrollment in the initiative, that a coordinated services plan of care be developed

and implemented.

NOTE: SECTIONS 90, 91, and 92 modify provisions of the ch. 938, Stats., the juvenile justice code, to make them consistent with the changes in the bill relating to coordinated services initiatives. In addition, SECTION 92 permits a judge to order that a juvenile be assessed for eligibility for coordinated services instead of permitting a judge to order coordinated services without an assessment.

21 SECTION 93. Fiscal changes.

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1	(1) Initiatives for coordinated services. In the schedule under section 20.005
2	(3) of the statutes for the appropriation to the department of health services under
3	section 20.435 (7) (co) of the statutes, as affected by the acts of 2009, the dollar
4	amount is decreased by \$1,466,000 for the first fiscal year of the fiscal biennium in
5	which this subsection takes effect for the purpose for which the appropriation is
6	made. In the schedule under section $20.005(3)$ of the statutes for the appropriation
7	to the department of health services under section 20.435 (7) (co) of the statutes, as
8	affected by the acts of 2009, the dollar amount is decreased by \$1,466,000 for the 2nd
9	fiscal year of the fiscal biennium in which this subsection takes effect for the purpose
10	for which the appropriation is made.
	NOTE: Increases the appropriation for state grants to implement coordinated services initiatives by \$1,466,000 in fiscal years 2009–10 and 2010–11.
11	SECTION 94. Effective date. This act takes effect on the day after publication
12	or the 2nd day after publication of the 2009–11 biennial budget act, whichever is
13	later.

 $\rm NOTE:~Provides~that~the~provisions~of~the~bill~take~effect~on~the~day~after~publication~or~the~2nd~day~after~publication~of~the~2009-11~biennial~budget~act, whichever~is~later.$

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(END)