State of Misconsin 2017 - 2018 LEGISLATURE

LRB-2988/1 TJD:emw

2017 SENATE BILL 269

May 25, 2017 - Introduced by Senators Johnson, Erpenbach, Shilling, L. Taylor, Carpenter, Ringhand, Larson, Risser, Hansen, Wirch, Miller, Bewley and Vinehout, cosponsored by Representatives C. Taylor, Kolste, Riemer, Anderson, Barca, Berceau, Billings, Bowen, Brostoff, Considine, Crowley, Doyle, Fields, Genrich, Goyke, Hebl, Hesselbein, Hintz, Mason, Meyers, Ohnstad, Pope, Sargent, Shankland, Sinicki, Spreitzer, Stuck, Subeck, Vruwink, Wachs, Young, Zamarripa, Zepnick and Kessler. Referred to Committee on Insurance, Housing and Trade.

AN ACT *to amend* 253.07 (title); and *to create* 49.45 (9d) and 253.07 (6) of the statutes; **relating to:** maintaining access and reimbursements to certain family planning providers in the Medical Assistance program.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Health Services to provide state reimbursement under the Medical Assistance program and state-based family planning funding to a nonpublic family planning provider if the nonpublic family planning provider becomes subject to a federal funding prohibition. A federal funding prohibition is defined under the bill as an enacted federal law, a regulation, or an executive order or action that prohibits federal moneys from being paid by the state to a provider under the Medicaid program because of the scope of services offered by the provider or the scope of services for which the provider offers referrals.

Under the bill, nonpublic family planning providers subject to a federal funding prohibition would receive state Medical Assistance reimbursement for those family planning services currently covered under the Medical Assistance program. The bill requires DHS to ensure that Medical Assistance program enrollees are allowed access to the nonpublic family planning provider to the same extent as before the federal funding prohibition and to maintain requirements for the nonpublic family planning provider that are the same as before the federal funding prohibition. The bill also prohibits DHS from limiting the scope of services for which a nonpublic family planning provider may offer a referral to receive the state reimbursement.

The bill also requires that if a nonpublic family planning provider is subject to a federal funding prohibition, DHS must create a state-funded family planning

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program to distribute state funds to any nonpublic family planning providers that are subject to a federal funding prohibition.

For further information see the *state* 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:

SECTION 1. 49.45 (9d) of the statutes is created to read:

49.45 (9d) Family Planning Services; Private Providers. (a) In this subsection:

- 1. "Family planning" has the meaning given s. 253.07 (1) (a).
- 2. "Federal funding prohibition" means an enacted federal law, a regulation, or an executive order or action that prohibits federal moneys from being paid by the state to a provider under the Medicaid program because of the scope of services offered by the provider or the scope of services for which the provider offers referrals.
- 3. "Nonpublic family planning provider" means an entity other than a public entity or governmental unit that is a provider of services for family planning under the Medical Assistance program under this subchapter on December 31, 2016.
- (b) If a nonpublic family planning provider becomes subject to a federal funding prohibition, the department shall do all of the following:
- 1. Ensure that enrollees in the Medical Assistance program under this subchapter are allowed access to the nonpublic family planning provider to the same extent as before the federal funding prohibition.
- 2. Reimburse the nonpublic family planning provider for services provided to Medical Assistance enrollees under this subchapter for services for family planning that are covered under the Medical Assistance program.

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1	3. Maintain requirements for the nonpublic family planning provider to receive
2	state payments under this subchapter that are the same requirements as before the
3	federal funding prohibition.
4	(c) The department may not limit the scope of services for which a nonpublic
5	family planning provider may offer a referral in order to receive reimbursement
6	under par. (b) 2.
7	Section 2. 253.07 (title) of the statutes is amended to read:
8	253.07 (title) Women's health block grant; state family planning funds.
9	Section 3. 253.07 (6) of the statutes is created to read:
10	253.07 (6) State-funded family planning program. (a) In this subsection:
11	1. "Federal funding prohibition" means an enacted federal law, a regulation,
12	or an executive order or action that prohibits federal moneys from being paid by the
13	state to or directly to a provider under Title X of the federal Public Health Service
14	Act, 42 USC 300 to 300a-6, because of the scope of services offered by the provider
15	or the scope of services for which the provider offers referrals.
16	2. "Nonpublic family planning provider" means an entity other than a public
17	entity or governmental unit that is a provider of services for family planning and that
18	is eligible to apply for grant funding under Title X of the federal Public Health Service
19	Act, 42 USC 300 to 300a-6, on December 31, 2016.
20	(b) Notwithstanding sub. (5), if a nonpublic family planning provider becomes

subject to a federal funding prohibition, the department shall establish a

state-funded family planning program to ensure continuity of family planning

services in the state and distribute state funds to any nonpublic family planning

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- 1 providers that are subject to a federal funding prohibition to be used to provide family
- 2 planning services.
- 3 (END)