



Wisconsin Assisted Living Association

News Blast

June 28, 2011

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For more information about WALA please visit our website at www.ewala.org. Let us know how you feel about the new look and feel of our website!

Don't forget about our newest membership benefit - ability to write on the WALA Wall! It's an online discussion forum that lets you talk about hot button topics, like Family Care, with other members! Contact the WALA office for more information!

In This Issue

[State Budget Signed on Sunday](#)

[Concealed Carry Passes](#)

[Medicaid & Family Care Reform](#)

[Interview with Governor Walker](#)



**Governor Walker Signs Budget Bill \ Provides
50 Partial Vetoes**

On Sunday, June 26th Governor Walker signed Assembly Bill 40 (Wisconsin 2011-13 Budget Bill) into law, and provided 50 partial vetoes.

Click [here](#) to view a copy of the Governor's complete veto message.

Below are the veto items Governor Walker included that are impacting long-term care. If an item does not appear, that provision remains as the legislature provided and will become law.

Veto: Family Care Cost-Effectiveness Study [Section 9121(3g) - Page 15, Item 29]

This section requires the Department of Health Services secretary to study the cost-effectiveness of the Family Care program, the Family Care Partnership, the IRIS self-directed care program and the program for all-inclusive care for the elderly (PACE). The study will compare the cost-effectiveness of each program to each of the other programs and is due to the Joint Committee on Finance by March 1, 2012.

I am partially vetoing this section to remove the requirement that the report be submitted by March 1, 2012, because the department is already required to prepare this information as a response to the 2011 Legislative Audit Bureau study of the Family Care program. The findings of that review are due to the Joint Legislative Audit Committee on August 31, 2012, and to submit a partial analysis in March would be premature.

Veto: Deadline for Study on the Purchase of Generic Drugs for Medical Assistance

This provision requires the Department of Health Services to conduct a study to determine if a competitive bidding process for the purchase of generic drug equivalents provided through the Medical Assistance program would generate cost savings to the program. The study is due to the Joint Committee on Finance no later than December 31, 2011.

I am partially vetoing the provision to remove the requirement that the report be submitted by December 31, 2011, because I believe the department should have flexibility to review all aspects of this option and applying an arbitrary due date removes this flexibility.

Chippewa Falls Veterans Home Cost-Benefit Analysis [Page 17, Item 34]

Partial Veto Cost-Benefit Analysis Exemption for Veteran's Affairs [Sections 234 and 9101(2u)]

These sections require the Department of Administration to conduct a cost-benefit analysis on the initial contract for the operation and staffing of the Veterans Home at Chippewa Falls and to submit the results to the Joint Committee on Finance by February 1, 2012, or before the Department of Veterans Affairs enters into a contract for

the operation of the home. Further, the Department of Veterans Affairs is exempted from the current law requirement to conduct a cost-benefit analysis meeting the same criteria prior to entering into the contract.

I am vetoing section 234 because I object to exempting the Department of Veterans Affairs from the requirement to conduct a cost-benefit analysis prior to contracting for the operation of the home. Further, I am partially vetoing section 9101 (2u) requiring the Department of Administration to conduct a similar cost-benefit analysis because this requirement is unnecessary and duplicative of the Department of Veterans Affairs analysis.

Concealed Carry Passes Senate and Assembly

Concealed Carry Passes Senate and Assembly - Awaits Governor's Signature

The Wisconsin Assembly passed "concealed carry" legislation ([Enrolled Senate Bill 93](#)) with a bipartisan vote of [68-27](#). There were no further amendments, therefore the bill now heads to the Governor for his signature into law.

As reported in previous WALA Blasts, an amendment for CBRFs, RCACs, adult family homes and nursing homes was included the defines these facilities as "non-residential buildings." The intent of this language is to clarify that these long-term care facilities can prohibit concealed carry of weapons by employees, visitors and residents. Owners or occupants of non-residential buildings can post a sign that is at least 5 inches by 7 inches located in a prominent place near all of the entrances to the part of the building to which the restriction applies. WALA lobbyist Forbes McIntosh led this change for prohibition for concealed carry for your residents if you wish.

[Enrolled Senate Bill 93](#)

SECTION 76. 943.13 (1e) (cm) of the statutes is created to read:
943.13 (1e) (cm) Nonresidential building "includes a nursing home as defined in s. 50.01 (3), a community-based residential facility as defined in s. 50.01 (1g), residential care apartment complex as defined in s. 50.01 (1d), an adult family home as defined in s. 50.01 (1), and a hospice as defined in s. 50.90 (1).

SECTION 82. 943.13 (2) (bm) of the statutes is created to read:
943.13 (2) (bm) 1. In this paragraph, "sign" means a sign that states a restriction imposed under subd. 2. that is at least 5 inches by 7 inches.

943.13(2) 2 am. For the purposes of sub. (1m) (c) 2., 4., and 5., an owner or occupant of a part of a nonresidential building, the state or a local governmental unit, or a university or a college has notified an individual not to enter or remain in a part of the building while carrying a firearm or with a particular type of firearm if the

owner, occupant, state, local governmental unit, university, or college has posted a sign that is located in a prominent place near all of the entrances to the part of the building to which the restriction applies and any individual entering the building can be reasonably expected to see the sign.

Wisconsin Budget Completed - Attention Turns to Medicaid and Family Care Reform

Now that Governor Walker has provided his list of 50 partial vetoes and signed the remainder of the 2011-13 biennial budget bill into law, the attention for stakeholder healthcare and long-term care organizations turns toward the Medicaid and Family Care "reform" process that the Department of Health Services will undertake. This involves both the \$466.6 million "unspecified cuts" to Medicaid and the "reform" that DHS will look to implement by seeking Medicaid state plan amendments and federal Department of Health & Human Services (DHHS) waivers. Governor Walker's and DHS' Medicaid budget goals rely heavily on obtaining these Medicaid state plan amendments and federal waivers to implement the unspecified cuts, which if DHS were to fail to obtain the concern is that this could lead to heavier cuts to providers - which is why our focus as an association will be on this process.

Earlier this year, Extraordinary Session [Assembly Bill 11](#) (budget repair bill) was passed into law ([Act 10](#)). Due to court action implementation of the bill was delayed until just recently. Act 10 required DHS to study the potential changes to the Medicaid state plan and to waivers of federal law relating to Medicaid obtained from the federal Department of Health and Human Services (DHHS). If DHS determines, as a result of the study that revision of existing statutes or rules would be necessary to advance state Medicaid changes and seek federal waivers (sunset on January 1, 2015).

- Require cost sharing from program benefit recipients up to the maximum allowed by federal law or a waiver of federal law.
- Authorize provider to deny care or services if a program benefit recipient is unable to share costs, to the extent allowed by federal law or waiver.
- Modify existing benefits or establish various benefit packages and offer different packages to different groups of recipients.
- Revise provider reimbursement models for particular services.
- Mandate that program benefit recipients enroll in managed care.
- Restrict or eliminate presumptive eligibility.
- To the extent permitted by federal law, impose restrictions on providing benefits to individuals who are not citizens of the U.S.
- Set standards for establishing and verifying eligibility requirements.
- Develop standards and methodologies to assure accurate eligibility determinations and redetermine continuing

- eligibility.
- Reduce income levels for the purposes of determining eligibility to the extent allowed by federal law or waiver and subject to the ability of the state DHS to obtain a waiver from provisions of the federal health care reform law.
 - Please note: the state budget removed the normal DHS rule making process and now provides for approval of the DHS state plan amendments and federal waiver requests by a 14-day passive review by the Joint Finance Committee. If objections are raised by committee members, a public hearing and debate can be held. If the Committee does not take any action, the request to the federal government for Medicaid state plan amendments and federal waivers will be allowed to move forward.

WALA will continue to meet with the DHS Secretary's office and representatives of the department on these issues throughout the summer and fall.



Interview with Governor Walker

Milwaukee Journal Sentinel (June 28, 2011)

[Interview with Governor Walker](#)

Walker Says he Should Have Prepared Public Earlier for his Sweeping Changes

Excerpt: "The state budget's freeze on new enrollments in the state's Family Care program could be modified or dropped later this year.

Walker said he wants to make sure counties won't continue to direct clients to institutional care if a Family Care expansion is approved.

"I don't want to have a system that expands by putting more clients into institutions," Walker said. He said he was concerned that some counties outside southeastern Wisconsin were doing that. He praised the Milwaukee County Family Care program. Milwaukee County has a waiting list of more than 2,000 people to get into Family Care, which provides various support to enable frail or disabled people to remain in their homes." ([More...](#))

Sincerely,

Jim Murphy, Executive Director
Sarah Bass, Operations Director

Wisconsin Assisted Living Association