



## 2013 ASSEMBLY BILL 272

August 5, 2013 – Introduced by Representatives JACQUE, PETRYK, T. LARSON, KAHL, BIES, A. OTT and BERNIER, cosponsored by Senator SCHULTZ. Referred to Committee on Insurance.

1     **AN ACT to amend** 20.435 (4) (b); and **to create** 20.435 (4) (c), 49.45 (38m) and  
2           51.03 (7) of the statutes; **relating to:** requiring distribution of autism-related  
3           information, providing funding for the Medical Assistance autism benefit, and  
4           making an appropriation.

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### *Analysis by the Legislative Reference Bureau*

Under current law, the Department of Health Services (DHS) provides autism treatment services, under a Medical Assistance (MA) waiver of federal law, to children who have been diagnosed with an autism spectrum disorder and who would not otherwise be eligible for MA benefits. This bill requires DHS to provide autism treatment services under the MA autism benefit to all individuals who are eligible for the services and prohibits DHS from using a waiting list to limit or delay the provision of those services to eligible individuals. The bill also creates a sum sufficient general purpose revenue appropriation to DHS for the autism benefit. In addition, DHS is required to seek a waiver or an amendment to the existing waiver if DHS determines that that is necessary for the provision of the services to all individuals who are eligible and to authorize federal financial participation for MA reimbursement for providing the services to all eligible individuals.

The bill also directs DHS to annually create and distribute information regarding therapies that a parent of a child with autism may provide at home to complement the child's treatment or individualized education program. DHS must distribute the information to local educational agencies and physicians.

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

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

1           **SECTION 1.** 20.435 (4) (b) of the statutes is amended to read:

2           20.435 (4) (b) *Medical Assistance program benefits.* Biennially, the amounts  
3 in the schedule to provide a portion of the state share of Medical Assistance program  
4 benefits administered under subch. IV of ch. 49, excluding amounts provided under  
5 par. (c), for a portion of the Badger Care health care program under s. 49.665, to  
6 provide a portion of the Medical Assistance program benefits administered under  
7 subch. IV of ch. 49 that are not also provided under par. (o), to fund the pilot project  
8 under s. 46.27 (9) and (10), to provide a portion of the facility payments under 1999  
9 Wisconsin Act 9, section 9123 (9m), to fund services provided by resource centers  
10 under s. 46.283, for services under the family care benefit under s. 46.284 (5), for  
11 assisting victims of diseases, as provided in ss. 49.68, 49.683, and 49.685, and for  
12 reduction of any operating deficits as specified in 2005 Wisconsin Act 15, section 3.  
13 Notwithstanding s. 20.002 (1), the department may transfer from this appropriation  
14 account to the appropriation account under sub. (5) (kc) funds in the amount of and  
15 for the purposes specified in s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002  
16 (1), the department may credit or deposit into this appropriation account and may  
17 transfer between fiscal years funds that it transfers from the appropriation account  
18 under sub. (5) (kc) for the purposes specified in s. 46.485 (3r). Notwithstanding s.  
19 20.002 (1), the department may transfer from this appropriation account to the  
20 appropriation account under sub. (7) (bd) funds in the amount and for the purposes  
21 specified in s. 49.45 (6v).

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1           **SECTION 2.** 20.435 (4) (c) of the statutes is created to read:

2           20.435 (4) (c) *Medical Assistance autism benefit.* A sum sufficient for the state's  
3 share of the Medical Assistance autism benefit to provide autism treatment services  
4 under the children's long-term care Medical Assistance waiver program, as  
5 described under s. 49.45 (38m) and 2003 Wisconsin Act 33, section 9124 (8c).

6           **SECTION 3.** 49.45 (38m) of the statutes is created to read:

7           49.45 (38m) **AUTISM BENEFIT.** (a) The department shall provide autism  
8 treatment services under the autism benefit under the children's long-term care  
9 Medical Assistance waiver program, as described under 2003 Wisconsin Act 33,  
10 section 9124 (8c), to all individuals who are eligible for the services and may not use  
11 a waiting list to limit or delay the provision of services to eligible individuals.

12           (b) If the department determines that it needs a waiver or an amendment to  
13 the waiver described under 2003 Wisconsin Act 33, section 9124 (8c), to provide the  
14 services as required under par. (a) and to authorize federal financial participation  
15 for Medical Assistance reimbursement for the services, the department shall request  
16 from the secretary of the federal department of health and human services a waiver  
17 or a waiver amendment to allow the department to provide the services as required  
18 under par. (a) and to authorize federal financial participation for those services.

19           **SECTION 4.** 51.03 (7) of the statutes is created to read:

20           51.03 (7) The department shall annually create and distribute information  
21 regarding therapies that a parent of a child with autism may provide at home with  
22 the child to complement the child's treatment or individualized education program,  
23 as defined in s. 115.76 (9). In gathering information for distribution under this  
24 subsection, the department shall consult with teachers of special education, as  
25 defined in s. 115.76 (15); parents of autistic children; physicians; and representatives

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1 of organizations that advocate for the interests of children with disabilities. The  
2 department shall provide the information to local educational agencies, as defined  
3 in s. 115.76 (10), and physicians using a method determined by the department.

4 (END)