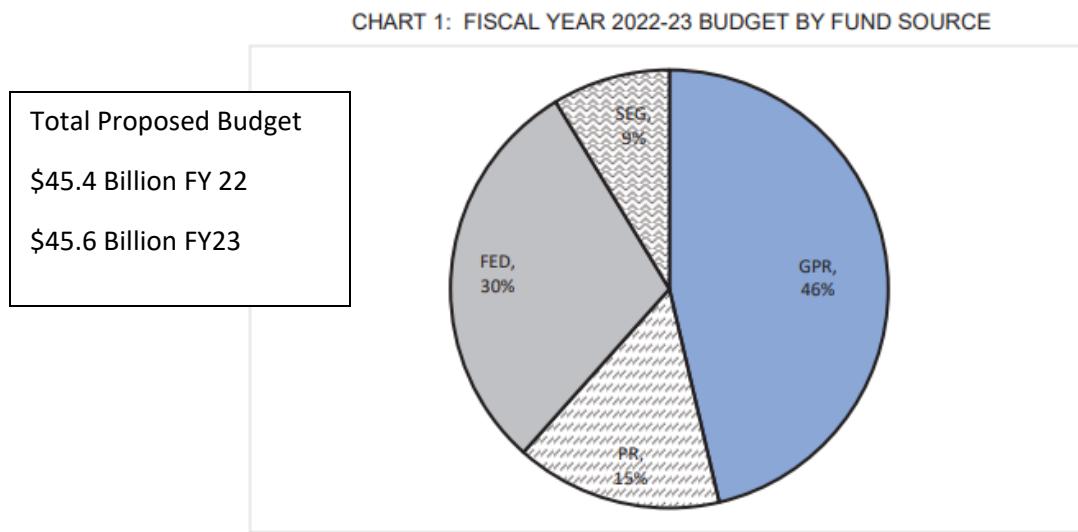


## WAFCA 2021-2023 Biennial Budget Summary

Sources: [DOA Budget in Brief](#) | [2021-23 Executive Budget Overview](#) | [WCA Budget Summary \(3.9.21\)](#)



The largest portion of the state budget is funded from general purpose revenue (GPR), which includes the individual income tax, state sales tax, corporate income tax, and various other taxes (see Chart 2).

TABLE 1: LARGEST BIENNIAL GPR INCREASES OVER BASE  
(\$ in millions)

Department of Public Instruction	\$1,642
Department of Health Services	463
Wisconsin Economic Development Corporation	320
Department of Children and Families	247
University of Wisconsin System	192
Public Service Commission	156
Department of Workforce Development	127
All Other Changes	79
<b>TOTAL</b>	<b>\$3,224</b>

TABLE 2: TEN LARGEST GENERAL PURPOSE REVENUE PROGRAMS  
(\$ in millions)

	FY23 Budgeted	Percent of Total	Cumulative Percent
General and Categorical School Aids	\$7,663.9	36.3%	36.3%
Medical Assistance and Related Programs	3,830.4	18.1%	54.4%
University of Wisconsin System	1,310.3	6.2%	60.6%
Corrections	1,302.2	6.2%	66.8%
State Property Tax Credits	1,202.6	5.7%	72.5%
Shared Revenue	889.7	4.2%	76.7%
Technical College System	550.3	2.6%	79.3%
Community and Social Service Aids	396.6	1.9%	81.2%
Homestead, Earned Income and Other Individual Income	309.9	1.5%	82.6%
Tax Credits			
State Supplement to Social Security Income	<u>158.4</u>	<u>0.7%</u>	<u>83.4%</u>
Top Ten Program Total	\$17,455.8	83.4%	83.4%
Debt Service (not included above)	277.5	1.3%	84.7%
Debt Service for Appropriation Obligation Bonds	311.2	1.5%	86.2%
All Other Programs	2,918.6	13.8%	100.0%
<b>GPR Total</b>	<b>\$21,121.5</b>		

*Detail may not add due to rounding.*

## **CHILD CARE**

- Recommends changes to the Wisconsin Shares program, including increased funding for the REWARD Program, creation of the Child Care Strong Initiative, and increased support for Social Emotional Learning

## **FAMILY & ECONOMIC SUPPORT**

- Increases the Emergency Assistance program by nearly \$9,000,000 and makes the following modifications:
  - Increases the income limitation from 115% of the federal poverty limit to 200%
  - Increases the maximum payment amount to \$1,200
  - Allows individuals aged 18 to 24 who are not parents or caretaker relatives to apply for EA and be determined eligible
  - Allows a household to receive a crisis payment during a national or state emergency without receiving notice that they will be required to leave housing if payment is not made immediately
- Provides \$7,300,000 to start the statewide expansion of Transitional Jobs
- Creates an Internet Assistance Program funded at a total of \$20 million annually
- Provides additional funding of \$500,000 annually for grants to the Wisconsin Trust Account Foundation for programs providing civil legal services to low-income families, as well as expanding eligible legal services relating to eviction matters

## **CHILD WELFARE AND YOUTH SERVICES**

- Provides a \$15,000,000 total increase in Children and Family Aids
- Allocates \$1,500,000 for child welfare worker training improvements
- Provides \$12,000,000 annually for a statewide in-home services intervention program and 2 FTE to develop and implement the program
- Increases funding to Milwaukee County by \$500,000 for a Nurse Partnership Program
- Increases funding for Independent Living Services by \$836,000 over the biennium to expand eligibility and serve more youth as permitted through Family First
- Increases aid to DMCPS for ongoing, wraparound, and other contracted services, and requests \$181,900 for initial assessment specialists (4FTE)
- Provides additional funding of \$132,000 annually to expand the BE GREAT: Graduate program to Boys and Girls Clubs in Wausau and Sheboygan.
- Creates a Jobs for America's Graduates allocation, funded with \$500,000 TANF annually, which would fund programs that improve social, academic, and employment skills of youth who are TANF-eligible
- Provides additional funding of \$500,000 annually for the Homeless Shelter Grant program
- Consolidates certain DCF youth services programs into a new youth services grant program under which DCF must distribute grants to public agencies, nonprofit corporations, and Indian tribes to provide programs that accomplish one or more of nine purposes listed in statute including runaway and homeless youth, children's community programs, services for victims of sex trafficking, and the Brighter Futures Initiative.

## **FOSTER CARE & ADOPTION**

- Increases foster parent payments across the board
  - The amount Kinship and Level 1 foster parents receive would increase to \$300/month
  - Level 2-4 foster parents would receive 2.5 percent increase in each calendar year
- Recommends \$75,000 for creating a new grant program to provide separated siblings with opportunities to be reunited, such as at summer camps
- Allocates nearly \$300,000 for driver education and licensing for children in out-of-home care
- Provides \$300,000 annually to expand adoption recruitment in Milwaukee County
- Provides funding in SFY 2023 related to establish Qualified Residential Treatment Programs, including:
  - \$377,800 to support telephone and telehealth nursing services
  - \$1,300,000 for a Milwaukee-based program
  - \$200,000 for provider training
- Extends the pilot program providing representation of parents in CHIPS proceedings currently operating in Brown, Outagamie, Racine, Kenosha, and Winnebago counties to June 30, 2023

## **YOUTH JUSTICE**

- Requests a sum-sufficient appropriation in order to return 17-year-olds to juvenile court jurisdiction (recommends \$10,000,000 in each year of the biennium)
- Requests an increase in Youth Aids funding to assist counties in supporting the elimination of the Serious Juvenile Offender Program currently operated through the Department of Corrections
- Requests \$15,000,000 in the biennium and 3 FTE to support system improvements related to 2017 Act 185 including community-based grants, residential services grants, expansion of training for youth justice, and state staff to administer the programs

## ***Department of Health Services ([DHS Budget Fact Sheets](#))***

### **MEDICAID**

- Expands Medicaid under the federal Affordable Care Act by covering all low-income Wisconsin residents who earn incomes between 0 percent and 138 percent of the federal poverty level.
- Provides rate increases for: Medication-Assisted Treatment (\$3,632,800 in FY22 and \$7,265,500 in FY23); Medicaid Outpatient Mental Health and Substance Abuse Services and Child-Adolescent Day Treatment (\$10,173,100 in FY22 and \$30,519,200 in FY23); Autism treatment (\$7,539,400 in FY22 and \$15,078,700 in FY23); and other services.
- Creates a Medicaid community health benefit that invests \$25 million for nonmedical services to reduce and prevent health disparities that result from economic and social determinants of health. Services include housing referrals, nutritional mentoring, stress management, and other services that would positively impact an individual's economic and social condition.
- Grants for community organizations and local public health departments to implement health equity action plans. The five initiatives included as part of the plan are funded with \$10,166,200 in FY22 and \$25,726,100 in FY23.
- Expands Medicaid benefits to include services provided by community health workers - \$14,232,000 (GPR/PR-F) in FY23. Community health workers serve as a liaison between health and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.
- Community-Based Psychosocial Services: Allows DHS to provide reimbursement through providers other than those made available by a county. Reimbursement to providers that are

not county-based will receive both the federal and nonfederal share based on a fee schedule that is determined by DHS. For a county that elects to provide the services, DHS must reimburse the county for the federal and nonfederal amount of allowable charges under the Medical Assistance program. The budget allocates \$2,005,000 in FY23.

- Directs DHS to pay allowable charges on behalf of recipients of Medical Assistance for room and board for residential substance use disorder treatment (\$3,274,600 in FY22 and \$3,274,600 in FY23).
- Seeks a waiver from CMS to extend the postpartum Medicaid eligibility for women receiving coverage through CHIP up to 306 percent of the FPL. The waiver will extend eligibility from approximately two months postpartum to 12 months postpartum.

#### **LONG-TERM SUPPORT/AGING AND DISABILITY SERVICES**

- Provides \$40.4 million in FY22 and \$37.4 million in FY23 to fund rate increases for personal care direct care services.
- Creates a nonrefundable individual income tax caregiver credit for qualified expenses incurred by a family caregiver to assist a qualified family member
- Expands caregiver support services to address the needs of caregivers of adults with disabilities who are age 19 to 59.
- Requires ADRCs to designate a caregiver coordinator and create a marketing plan to increase knowledge of programs available.
- Expands the dementia care specialists program to all aging and disability resource centers - \$1,175,000 in FY22 and \$2,350,000 in FY23.
- Ensures every child in need of long-term supports receives the services they require by placing language in state statute that states, *"The department shall ensure that any child who is eligible and who applies for the disabled children's long-term support program that is operating under a waiver of federal law receives services under the disabled children's long-term support program that is operating under a waiver of federal law."*

#### **CRISIS SERVICES**

- Provides \$12.3 million GPR in FY23 to establish up to two regional crisis response centers, with each offering a crisis urgent care and observation center, a 15-bed crisis stabilization facility and at least two inpatient psychiatric beds, to improve the crisis response system, expand crisis bed access, and alleviate the need for long distance emergency detention transportation.
- Provides \$5 million GPR in FY23 to establish five regional crisis stabilization facilities across the state for adults who are in crisis or those requiring short-term crisis stabilization – voluntary admission.
- Allows DHS to create a certification for crisis urgent care and observation centers and establish criteria for that certification by rule. If DHS creates the certification, then no one may operate a crisis urgent care and observation center without a certification.
- Creates a \$1.25 million GPR grant in each year for municipalities and counties to establish behavioral health and police collaboration programs to increase behavioral health professional involvement in emergency response situation.
- Provides \$1,237,400 GPR in each year to support the staffing needs of county crisis programs and peer-run respite centers for their telephone services.
- Provides funding to implement a forensic assertive community treatment program, which is intended to be an intervention that bridges the behavioral health and criminal justice systems.

## **OTHER HEALTH AND MENTAL HEALTH**

- Expands Birth to 3 services to additional children that are lead poisoned (lowers the blood lead level criteria) - \$3.3 million GPR in FY22 and \$6.6 million GPR in FY23.
- Provides \$1,125,000 in each year of the biennium (continues one-time funding from the 2019-21 biennial budget)
- Creates a \$1.9 million GPR grant in FY23 to establish a behavioral health treatment program for those who are deaf, hard of hearing, or deaf-blind.
- Expands the Child Psychiatry Consultation Program statewide - \$500,000 in FY22 and FY23.
- Appropriates \$2 million GPR in FY23 to provide grants to behavioral health providers to implement electronic health records systems and connect to health information exchanges.

### ***Department of Public Instruction ([DPI Budget Website](#))***

- Provides \$613 million GPR increase in general equalization aids.
- Restores state commitment to two-thirds funding.
- Reimburses special education costs at 45 percent in FY22 and 50 percent in FY23 (\$713 million GPR over the biennium)

## **MENTAL HEALTH & WELLNESS**

- Provides an increase of \$22,500,000 GPR in FY22 and \$24,000,000 GPR in FY23 to expand the categorical aid for school mental health programs and provide reimbursements for all pupil services categories, as opposed to just school social workers (i.e., expenditures for school counselors, school nurses, and school psychologists would be reimbursable).
- Expands the School-Based Mental Health Services Grant program by \$3,500,000 GPR annually, beginning in FY22, to support more school districts and independent charter schools in connecting youth to needed mental health services.
- Modifies the grant language to allow more school districts to access the program. Replacing “community mental health agencies” with “mental health providers” to allow schools to partner with individual providers and/or employ telehealth or online strategies.
- Increases support for existing mental health training programs, expands the types of mental health trainings that can be offered to include bullying prevention and violence prevention, as well as to broaden training offerings to include other evidenced-based strategies.

### ***Department of Safety and Professional Services***

- Provides \$900,000 PR in FY22 and \$1,269,200 PR in FY23 and 14.0 FTE permanent PR positions and 2.0 FTE project PR positions at the Department of Safety and Professional Services to investigate professional regulations violations and decrease processing times for professional licenses. In addition, the Governor’s budget increases expenditure authority in the department’s LTE budget by \$100,000 PR in each year of the biennium.

### ***Office of the Commissioner of Insurance ([OCI Budget Website](#))***

- Recommends establishing parity provisions to ensure patients utilizing telehealth services are not charged or have their services limited any more than if they utilized an equivalent in-person service to increase the availability and affordability of telehealth services.
- Fund the development of a state-administered public option health plan to be offered no later than 2025 or 2022 if the federal Affordable Care Act is no longer enforceable.