## State of Misconsin 2025 - 2026 LEGISLATURE

LRB-1533/1 JPC:emw

## **2025 ASSEMBLY BILL 163**

April 8, 2025 - Introduced by Representatives Penterman, Brooks, Duchow, Allen, Tucker, Kreibich, Knodl and Murphy, cosponsored by Senators Stafsholt, Nass and Kapenga. Referred to Committee on Public Benefit Reform.

- 1 AN ACT to renumber and amend 49.823; to create 49.45 (2) (a) 3m., 49.471
- 2 (4d), (4j) and (4p) and 49.823 (2) of the statutes; **relating to:** redeterminations
- 3 of eligibility for the Medical Assistance program and database confirmation
- 4 for public assistance program eligibility.

### Analysis by the Legislative Reference Bureau

This bill makes various changes to eligibility determinations for the Medical Assistance program. Currently, the Department of Health Services administers the Medical Assistance program, a joint federal and state program that provides health services to individuals who have limited financial resources.

The bill prohibits DHS from automatically renewing the eligibility of a recipient under the Medical Assistance program. DHS must determine an individual's eligibility every six months under the bill. DHS is also prohibited from using prepopulated forms or otherwise supplying information, except for name and address, to a recipient under the Medical Assistance program that has been supplied to DHS. Additionally, any recipient under the Medical Assistance program that fails to report to DHS or its designee any change that may affect eligibility within 10 days following such a change is ineligible for benefits for six months from the date DHS discovers the failure to report the change. Under current law, knowingly concealing or failing to disclose any event that an individual

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SECTION 1

knows affects the initial or continued right to a Medical Assistance benefit is subject to a forfeiture of not less than \$100 nor more than \$15,000 for each concealment or failure. If DHS determines that it is necessary to obtain permission from the federal Department of Health and Human Services to implement any portion of the bill with respect to the Medical Assistance program, the bill requires DHS to request any state plan amendment, waiver of federal law, or other federal approval necessary to implement that portion of the bill.

The bill requires DHS to enter into data-sharing agreements with any agency that maintains a database of financial or personal information about residents of this state. DHS must confirm the information of an applicant for a public assistance program against the information contained in those databases. The bill also requires DHS to share data for the purpose of confirming eligibility for public assistance programs. Current law requires DHS and the Department of Children and Families to compare each department's respective databases against the databases of death records to identify deceased participants.

The bill directs DHS to complete a redetermination of eligibility for all recipients of Medical Assistance and immediately remove from Medical Assistance any recipient who is ineligible before January 1, 2026. For all such individuals removed from the Medical Assistance program, the bill directs DHS to inform them of the availability of coverage under a qualified health plan that is offered through an American health benefit exchange and that they may be eligible for premium assistance.

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 (2) (a) 3m. of the statutes is created to read:

49.45 (2) (a) 3m. Remove immediately from eligibility for the Medical Assistance program under sub. (23) or s. 49.471 any individual who has been determined to be ineligible.

**SECTION 2.** 49.471 (4d), (4j) and (4p) of the statutes are created to read:

49.471 (4d) REDETERMINATION OF ELIGIBILITY. The department may not automatically renew the eligibility of a recipient of Medical Assistance benefits under this section or s. 49.45 (23). The department shall redetermine eligibility for

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SECTION 2

- the Medical Assistance program under this section or s. 49.45 (23) for each individual every 6 months. In collecting information from a recipient of Medical Assistance benefits or an applicant, the department may not use any form that is prepopulated with, or otherwise provide to the recipient or applicant, information that has been supplied to the department except for the recipient's or applicant's name and address.
- (4j) Failure to Report. Any recipient of Medical Assistance benefits under this section or s. 49.45 (23) who fails to report to the department or an entity designated by the department any change that may affect the recipient's eligibility for benefits within 10 days following such a change shall be ineligible for benefits under this section or s. 49.45 (23) for 6 months following the date that the department discovers the failure to report the change.
- (4p) FEDERAL APPROVAL. If the department determines that it is necessary to obtain permission from the federal department of health and human services to implement sub. (4d) or (4j), the department shall request any state plan amendment, waiver of federal law, or other federal approval necessary to implement subs. (4d) and (4j). If federal approval is necessary under this subsection but not obtained, the department is not required to implement any portion of sub. (4d) or (4j) for which federal approval is not obtained.
- **SECTION 3.** 49.823 of the statutes is renumbered 49.823 (1) and amended to read:
- 49.823 (1) The department of health services and the department of children and families shall, at least once every 3 months month, perform a comparison of each department's respective public benefit database information against

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nationally recognized databases that contain information on death records, including the federal social security administration's Death Master File, to identify participants in public benefit programs that are deceased. If a department determines during a review under this section subsection that a participant is deceased, the department shall designate that individual as ineligible for benefits in any applicable database. The requirements under this section subsection do not apply to the department of children and families with regard to child care subsidies under s. 49.155.

#### **SECTION 4.** 49.823 (2) of the statutes is created to read:

49.823 (2) The department of health services shall enter into a data-sharing agreement with the department of children and families, the department of workforce development, and any other agency that maintains a database of financial or personal information about residents of this state. The department of health services, through the data-sharing agreement, shall confirm the information submitted by an applicant for a public assistance program with the information contained in other databases held by other agencies, including all available prison records, death records, wage and employment records, lottery and gaming winnings, and out-of-state benefits received under the federal food stamp program under 7 USC 2011 to 2036. The department of health services shall share data with other agencies for the purposes of confirming eligibility for public assistance programs.

#### **SECTION 5. Nonstatutory provisions.**

(1) MEDICAL ASSISTANCE ELIGIBILITY REDETERMINATIONS.

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SECTION 5

1	(a)	In this subsection,	"Medical Assistance"	means the program	under subch.
2	IV of ch.	49.			

- (b) Beginning on the day after the effective date of this paragraph, the department of health services shall redetermine the eligibility of all recipients of Medical Assistance and immediately remove from Medical Assistance any recipient who is ineligible. The department of health services shall complete redeterminations of eligibility for all recipients of Medical Assistance before January 1, 2026.
- (c) The department of health services shall inform any individual who is removed from Medical Assistance under par. (b) of the availability of coverage under a qualified health plan, as defined in 42 USC 18021 (a), that is offered through an American health benefit exchange, as described in 42 USC 18031, and that the individual may be eligible for premium assistance under 26 USC 36B.

14 (END)