

WAAN Request		Governor	Joint Finance Committee	Final Bdgt-Veto Changes
Adult Protective Services (APS)/Elder Abuse/Guardian Support and Training (Health Services & Justice Budgets)	Adult Protective Services (APS) Program - increase funding to counties from \$5 million (the funding level set in 2009) to \$12 million annually.	Increase of \$9.9 M over biennium for APS.	Provides an increase of \$1M each year of biennium	
	Domestic Violence in Later Life Program – increase funding from \$75,000 to \$150,000 annually.		Not included	
	Elder Abuse Direct Service Program – increase funding from \$2 million to \$4 million annually.		Not included	
	Guardianship Support Center (GSC) – increase funding from \$100,000 to \$200,000 annually + \$65,000/year for ongoing management and maintenance of the new online guardian training program.	Increase of \$100K to base funding + Increase of \$63K in each yr. of the budget for guardian training update/maintenance.	Not included	
	Establish permanent funding to support the continuation of Wisconsin’s Elder Abuse Hotline and Elder Justice Program (\$59,500 for FY 2024 and \$212,700 for FY 2025).	Create a program to promote the protection of elders and support the statewide elder abuse hotline - \$250,000 GPR/yr. 2. (Justice Budget)	\$135,000K in second year of biennium to non-governmental organization to continue hotline	
Expand infrastructure support – data reporting, case management, training coordination, oversight of a growing number of residential care facilities, and support for Wisconsin’s tribal nations – by authorizing new positions within the state Department of Health Services (\$12 million over the biennium).				
ADRC Funding (Health Services Budget)	Increase funding to Aging and Disability Resource Centers (ADRCs) by \$32.4 million to equalize historical funding disparities, fully fund required contracted services for a growing customer base and provide an additional \$25 million to add critical services to all ADRC operations across the state.	Increase base funding by \$2.5 million GPR/year 1 and \$5 million GPR/year 2 to increase base allocations to ADRCs.	Provides \$2.5 M (year 1) and \$5M (year 2) to increase ADRC base allocations	
		Provide a 0.5 FTE position to provide caregiver support services in every county - \$3.1 million GPR/yr. 1 and \$6.3 million GPR/yr. 2.	Not included	
		Support the ongoing costs of the tribal Aging and Disability Resource Specialists (ADRS) - \$1.7 million GPR in yr. 2.	Not included	
		Build a centralized ADRC website and database providing Wisconsinites access to information about long-term care supports and services from the comfort of their home – \$1.1 million GPR in yr. 2.	Not included	

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Alzheimer's/Dementia Supports (Health Services Budget)	Keep flexibility in the Alzheimer's Family and Caregiver Support Program (AFCSPP). Waivers provided during the COVID-19 pandemic have allowed the AFCSPP program to pay family members to provide respite care and lift the annual 112-hour cap on respite care. It is essential to continue these practices beyond 2023.	Increase the Alzheimer's Family and Caregiver Support Program (AFCSPP) funding by \$1 million GPR over the biennium (\$500,000/\$500,000) and increase the income eligibility threshold from \$48,000 to \$60,000 annually.	Provides \$250,000 annually and increase the amount of AFCSPP funding DHS may provide to \$3 million annually. The max. income eligibility limit and caps on funding for goods and services for each person served remain unchanged.	
		Increase funding for the Alzheimer's disease grant - \$100,000 GPR in each year of the budget.	Not included	
Board on Aging and Long-Term Care (Board on Aging & LTC Budget)	Change Wisconsin Statute § 16.009 to comply with federal law (45 CFR § 1324.11) requiring a full-time State Ombudsman in addition to an Executive Director/agency head and fund the full-time State Ombudsman position and additional administrative support staff (\$189,000 FY 2024 and \$242,200 for FY 2025).	3.0 FTE positions to enhance administrative support and program capacity to meet increasing demand for services. This proposal eliminates the shared executive director/state ombudsman position and authorizes a separate full-time State Long-term Care Ombudsman position, putting Wisconsin in compliance with federal regulations - \$89,000 GPR/yr. 1 and \$113,600 GPR/yr. 2.	Provides \$78,700 (\$51,200 GPR and \$27,500 PR) in 2023-24 and \$101,800 (\$66,100 GPR and \$35,700 PR) in 2024-25 and 1.0 positions (0.65 GPR and 0.35 PR) beginning in 2023-24, to create 1.0 state long-term care ombudsman position. Specify that the BOALTC executive director employs, rather than serves as, the state long-term care ombudsman.	
Family Caregiver Support (Health Services- & Workforce Development Budgets)	Create a Wisconsin state tax credit (up to \$500) to ease the financial expenses of caregiving. A Wisconsin income tax credit reimburses family caregivers for expenses—like assistive technology, adult day services and other needed equipment and services purchased for their loved ones.	Create a Caregiver Tax Credit - an individual non-refundable income tax caregiver credit. The credit is equal to 50% of qualified expenses in the taxable year and is limited to \$500 for most filers. The credit is subject to income limits that phase out the credit between \$75,000 and \$85,000 in income for single/head of household filers and \$150,000 and \$170,000 in income for married-joint filers – est. decrease in tax revenue of \$96.7 million/yr. 1 and \$98.3 million/yr. 2. (Revenue Budget)	Not included	
	Increase Funding for Respite Service grants so more family caregivers can have access to respite opportunities and assistance to help pay for respite services.	Provide additional funding for the existing Respite Care grant - \$200,000 GPR in each year of the budget.	Not included	
	Expand Wisconsin Family and Medical Leave Policies by creating a paid family leave program and including grandparents, grandchildren, siblings and other extended family members or persons with close affinity relationship who are taking on increasing caregiving roles.	Create a state Paid Family and Medical Leave program that provides 12 weeks of benefits for qualified employed and self-employed individuals and provide position and expenditure authority to implement and administer the program and pay benefits to qualified individuals - \$65,767,800/yr. 1 and \$177,645,600/yr. 2. \$65,767,800/yr. 1 and \$177,645,600/yr. 2. (Workforce Development Budget)	Not included	

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		<p>Expand the current state Family and Medical Leave laws to extend leave to care for a grandparent, grandchild, or sibling (and others included in the current law) with a serious health condition and expands the definition of "serious health condition" to include medical quarantine (for the individual or a caregiver). Additionally, the expansion extends leave to include deployment of a spouse or child and unforeseen or unexpected closure of a school or child care facility and lowers the threshold of hours an employee has to work to qualify for leave from 1,000 hours to 680 hours. (Workforce Development Budget)</p>	<p>Not included</p>	
<p>Healthy Aging Grants (Health Services Budget)</p>	<p>A permanent \$600,000 annual state investment in Healthy Aging Grants to reduce falls in older adults and associated injury-related costs, manage chronic conditions and increase physical activity to reduce costs, improve wellness, and reduce the burden on public safety.</p>	<p>Creation of a grant for entities providing healthy aging programs - \$600,000 GPR in each year of the budget.</p>	<p>Not included</p>	
<p>Home and Community-Based Services (HCBS) – Direct Care Workforce Support (Health Services Budget)</p>	<p>Continue the 5 percent home and community-based services rate increases until the new minimum rate bands are implemented.</p>	<p>Funding to continue the 5% rate increase provided to HCBS under the American Rescue Plan Act - \$15,405,600 GPR/yr. 1 and \$65,570,900 GPR/yr. 2.</p>	<p>Continued the 5% rate increase for Home- and Community-Based Services for Family Care through 6/30/25.</p>	
	<p>Provide a 25 percent increase in the Family Care capitation rates, with a corresponding increase in IRIS rates to enable providers to establish competitive wages for the home and community-based long-term care workforce. Competitive wages are needed to repair and rebuild our long-term care system.</p>	<p>Funding to increase the direct care and services portion of the Family Care capitation rates in recognition of the direct care workforce challenges facing the state - \$15 million GPR in each year of the budget.</p>	<p>Provides \$12.9 million (\$5 million GPR and \$7.9 million FED) in 2023-24 and \$25.4 million (\$10 million GPR and \$15.4 million FED) in 2024-25 to increase the direct care and services portion of the Family Care managed care organization (MCO) capitation rates to fund LTC services for individuals enrolled in Family Care and added DHS and MCO reporting requirements requiring DHS to include MCO executive leadership salaries and amounts retrieved by the state under the contractual risk corridors (a percentage of excess profits) in the public available financial summaries for the Family Care programs. DHS and Family Care MCOs are also required to track and annually report to JFC the total authorized and total provided care plan hours by service category and MCO.</p>	<p>The DHS and MCO reporting requirements were vetoed from the final budget.</p>
	<p>Increase Medicaid Personal Care (MAPC) rates by 39 percent (from \$23.44/hr. to \$32.63/hr.) to cover the actual cost of providing services.</p>	<p>Funding to increase support for direct care staff providing personal care services - \$15 million GPR in each year of the budget.</p>	<p>Provides \$12.9 million (\$5 million GPR and \$7.9 million FED) in 2023-24 and \$25.4 million (\$10 million GPR and \$15.4 million FED) in 2024-25 to increase Medicaid personal care reimbursement rates (4.3% increase).</p>	