



## 1995 ASSEMBLY BILL 615

October 12, 1995 - Introduced by Representatives R. YOUNG, R. POTTER, BALDUS, PLOMBON, GROBSCHMIDT, MORRIS-TATUM, NOTESTEIN, ROBSON, WASSERMAN, WILDER, BOYLE and BALDWIN, cosponsored by Senators BURKE, CLAUSING, MOEN and MOORE. Referred to Committee on Insurance, Securities and Corporate Policy.

1     **AN ACT to amend** 40.51 (8), 60.23 (25), 66.184, 111.70 (1) (a), 120.13 (2) (g),  
2           185.981 (4t) and 185.983 (1) (intro.); and **to create** 40.51 (8m), 111.70 (4) (n),  
3           111.91 (2) (k) and 632.895 (11) of the statutes; **relating to:** requiring insurance  
4           coverage of certain immunizations for children.

---

### *Analysis by the Legislative Reference Bureau*

This bill requires every health insurance policy (called "disability insurance policy" in the statutes), including health care plans offered by health maintenance organizations, preferred provider plans and the state, and every self-insured health plan of the state or a county, city, town, village or school district, to provide coverage of specified immunizations, from birth to age 19, for a dependent child of the insured if the policy or plan covers a dependent of the insured. (Under current law, health insurance policies are required to cover a newly born child of the insured, even if the policy did not provide coverage for dependents at the time of the birth.) Coverage of the specified immunizations may not be subject to any deductibles, coinsurance or copayments under the policy or plan. Specifically excluded from this coverage requirement are health insurance policies that cover only certain specified diseases, health care plans offered by limited service health organizations, medicare replacement or supplement policies and long-term care insurance policies.

For further information see the **state and local** 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:***

5           **SECTION 1.** 40.51 (8) of the statutes is amended to read:

1           40.51 (8) Every health care coverage plan offered by the state under sub. (6)  
2 shall comply with ss. 631.89, 631.90, 631.93 (2), 632.72 (2), 632.87 (3) to (5), 632.895  
3 (5m) and (8) to (10) (11) and 632.896.

4           **SECTION 2.** 40.51 (8m) of the statutes is created to read:

5           40.51 (8m) Every health care coverage plan offered by the group insurance  
6 board under sub. (7) shall comply with s. 632.895 (11).

7           **SECTION 3.** 60.23 (25) of the statutes is amended to read:

8           60.23 (25) SELF-INSURED HEALTH PLANS. Provide health care benefits to its  
9 officers and employes on a self-insured basis if the self-insured plan complies with  
10 ss. 631.89, 631.90, 631.93 (2), 632.87 (4) and (5), 632.895 (9) and (11) and 632.896.

11           **SECTION 4.** 66.184 of the statutes is amended to read:

12           **66.184 Self-insured health plans.** If a city, including a 1st class city, or a  
13 village provides health care benefits under its home rule power, or if a town provides  
14 health care benefits, to its officers and employes on a self-insured basis, the  
15 self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2),  
16 632.87 (4) and (5), 632.895 (9) and (11), 632.896, 767.25 (4m) (d) and 767.51  
17 (3m) (d).

18           **SECTION 5.** 111.70 (1) (a) of the statutes, as affected by 1995 Wisconsin Act 27,  
19 is amended to read:

20           111.70 (1) (a) "Collective bargaining" means the performance of the mutual  
21 obligation of a municipal employer, through its officers and agents, and the  
22 representative of its municipal employes in a collective bargaining unit, to meet and  
23 confer at reasonable times, in good faith, with the intention of reaching an  
24 agreement, or to resolve questions arising under such an agreement, with respect to  
25 wages, hours and conditions of employment, and with respect to a requirement of the

1 municipal employer for a municipal employe to perform law enforcement and fire  
2 fighting services under s. 61.66, except as provided in sub. (4) (m) and (n) and s. 40.81  
3 (3) and except that a municipal employer shall not meet and confer with respect to  
4 any proposal to diminish or abridge the rights guaranteed to municipal employes  
5 under ch. 164. The duty to bargain, however, does not compel either party to agree  
6 to a proposal or require the making of a concession. Collective bargaining includes  
7 the reduction of any agreement reached to a written and signed document. The  
8 municipal employer shall not be required to bargain on subjects reserved to  
9 management and direction of the governmental unit except insofar as the manner  
10 of exercise of such functions affects the wages, hours and conditions of employment  
11 of the municipal employes in a collective bargaining unit. In creating this subchapter  
12 the legislature recognizes that the municipal employer must exercise its powers and  
13 responsibilities to act for the government and good order of the jurisdiction which it  
14 serves, its commercial benefit and the health, safety and welfare of the public to  
15 assure orderly operations and functions within its jurisdiction, subject to those  
16 rights secured to municipal employes by the constitutions of this state and of the  
17 United States and by this subchapter.

18 **SECTION 6.** 111.70 (4) (n) of the statutes is created to read:

19 111.70 (4) (n) *Health insurance coverage of immunizations for minor*  
20 *dependents.* The municipal employer is prohibited from bargaining collectively with  
21 respect to the provision of the health insurance coverage required under s. 632.895  
22 (11).

23 **SECTION 7.** 111.91 (2) (k) of the statutes is created to read:

24 111.91 (2) (k) The provision to employes of the health insurance coverage  
25 required under s. 632.895 (11).

1           **SECTION 8.** 120.13 (2) (g) of the statutes is amended to read:

2           120.13 **(2)** (g) Every self-insured plan under par. (b) shall comply with ss.  
3 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.87 (4) and (5), 632.895 (9) ~~and (10)~~ to  
4 (11), 632.896, 767.25 (4m) (d) and 767.51 (3m) (d).

5           **SECTION 9.** 185.981 (4t) of the statutes is amended to read:

6           185.981 **(4t)** A sickness care plan operated by a cooperative association is  
7 subject to ss. 252.14, 631.89, 632.72 (2), 632.87 (2m), (3), (4) and (5), 632.895 (10) and  
8 (11) and 632.897 (10) and ch. 155.

9           **SECTION 10.** 185.983 (1) (intro.) of the statutes is amended to read:

10           185.983 **(1)** (intro.) Every such voluntary nonprofit sickness care plan shall be  
11 exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41,  
12 601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.89, 631.93, 632.72  
13 (2), 632.775, 632.79, 632.795, 632.87 (2m), (3), (4) and (5), 632.895 (5), ~~(9) and (10)~~  
14 and (9) to (11), 632.896 and 632.897 (10), subch. II of ch. 619 and chs. 609, 630, 635,  
15 645 and 646, but the sponsoring association shall:

16           **SECTION 11.** 632.895 (11) of the statutes is created to read:

17           632.895 **(11)** COVERAGE OF IMMUNIZATIONS. (a) In this subsection, "dependent"  
18 has the meaning given in s. 635.02 (3c).

19           (b) Except as provided in par. (d), every disability insurance policy, and every  
20 self-insured health plan of the state or a county, city, town, village or school district,  
21 that provides coverage for a dependent of the insured shall provide coverage of  
22 immunizations against all of the following, from birth to the age of 19 years, for a  
23 dependent who is a child of the insured:

- 24           1. Diphtheria.
- 25           2. Pertussis.

- 1           3. Tetanus.
- 2           4. Polio.
- 3           5. Measles.
- 4           6. Mumps.
- 5           7. Rubella.
- 6           8. Haemophilus influenza b.
- 7           9. Hepatitis B.

8           (c) The coverage required under par. (b) may not be subject to any deductibles,  
9           copayments or coinsurance under the policy or plan.

10          (d) This subsection does not apply to any of the following:

- 11           1. A disability insurance policy that covers only certain specified diseases.
- 12           2. A health care plan offered by a limited service health organization, as defined  
13           in s. 609.01 (3).
- 14           3. A long-term care insurance policy, as defined in s. 600.03 (28g).
- 15           4. A medicare replacement policy, as defined in s. 600.03 (28p).
- 16           5. A medicare supplement policy, as defined in s. 600.03 (28r).

17           **SECTION 12. Initial applicability.**

18          (1) This act first applies to all of the following:

19           (a) Except as provided in paragraphs (b) and (c) , disability insurance policies  
20           that are issued or renewed, and self-insured health plans that are established,  
21           extended, modified or renewed, on the effective date of this paragraph.

22           (b) Disability insurance policies covering employes who are affected by a  
23           collective bargaining agreement containing provisions inconsistent with this act  
24           that are issued or renewed on the earlier of the following:

- 25           1. The day on which the collective bargaining agreement expires.

