AN ACT to repeal 50.83, 51.44 (1) (d), ch. 140 (title), 140.03 (1) (c), 140.05 (2), 140.05 (5), 140.05 (12), 140.055 (title) and (3), 140.06 (1) (intro.), 140.08, 140.09 (title), 140.09 (1) (c), 140.09 (2), 140.09 (3), 140.09 (4) (title), 140.09 (4) (a), 140.09 (4) (b) 2, 140.09 (5), 140.09 (6) (title), 140.09 (7) (title), 140.09 (8), 140.09 (9), 140.09 (10), 140.09 (12), 140.09 (16), 140.50, 140.52 (intro.), 140.65, 140.82 (title), 140.82 (1) (a) to (L), (2) and (3), 140.85 (1) (a), 141.01 (title) (1), (1m), (1r) and (2), 141.01 (3) (a) 2, 141.01 (3) (b) and (4), 141.01 (6) (intro.), (a) and (b), 141.01 (6) (d) (g), 141.01 (7) to (11), 141.015, 141.02, 141.045 (4), 141.05, 141.07, 141.10, 143.01 (1m), 143.04 (8), 143.14, 143.16, 143.17, 146.023 (title) and (1), 146.024 (1) (b), 146.024 (1) (e) and (f), 146.025 (1) (b) and (c), 146.025 (1) (ed), 146.028 (1) (f), 146.03, 146.04, 146.06, 146.07, 146.09, 146.13, 146.14 (title), 146.14 (3), 146.145 (1), 146.145 (18) (title), 146.88 (1) (c) and (d), 146.882 (1) (b) and (c), ch. 149 (title), 149.04 (title), 149.04 (5) (a), 149.04 (6), 149.06 (2), 149.06 (4), 149.07 (3), 149.08 (title), 150.39 (9), ch. 151 (title) and 151.01 (1); to renumber 46.63, 46.79, 50.50, 50.51, 50.52, 50.55, 50.57, 50.59, 50.70, 50.80, 50.81, 50.82, 50.85, 97.41 (1), 140.01 (intro.), (1) and (2), 140.02, 140.03 (1) (b) 1 and 2, 140.03 (3) and (5), 140.05 (title), 140.05 (1), 140.05 (3), 140.05 (4), 140.05 (9), 140.05 (14), 140.05 (14m), 140.05 (15), 140.05 (16) (a), (b), (c), (cm), (d), (dm), (e), (f), (fm), (g) and (h), 140.05 (17), 140.09 (1) (intro.), 140.09 (1) (a) and (b), 140.09 (4) (b) 1, 140.09 (6), 140.09 (7), 140.09 (9), 140.09 (11), 140.09 (13), 140.09 (14) (title), 140.09 (14), 140.09 (15), 140.09 (17), 140.10, 140.45, 140.53, 140.54, 140.56, 140.58, 140.59, 140.595, 140.60, 140.66, 140.67, 140.70, 140.74, 140.76, 140.77, 140.82 (1) (intro.), 140.84, 140.86, 141.01 (3) (a) 1, 141.01 (5), 141.01 (6) (c), 141.04, 141.045 (1) and (3), 141.15, 143.02, 143.04 (1), 143.04 (5), 143.04 (6), 143.04 (9), 143.05, 143.06, 143.07, 143.08, 143.11, 143.01, 146.022 (1) (e), (2) and (3), 146.023 (1m) to (5), 146.024 (1) (c) and (d), 146.024 (2) to (4), 146.025 (1) (cm) to (e), 146.025 (1) (f), 146.025 (2) to (9), 146.027, 146.0275, 146.028 (1) (g) and (2) to (8), 146.05, 146.10, 146.125, 146.14 (1) and (2), 146.14 (4) to (6), 146.18 (1), 146.18 (2), 146.18 (3), 146.24, 146.80, 146.882 (title) and (1) (intro.) and (a), 146.882 (1) (e), 149.01, 149.02, 149.03, 149.04 (4), 149.04 (5) (intro.), 149.04 (5) (b), 149.06 (1), 149.06 (6), 149.06 (7), 149.07 (title), 149.07 (1) (a) to (d) and (2), 149.08, 151.01 (intro.), 151.01 (3), 151.01 (4), 151.01 (5), 151.05, 151.09 (intro.) and (1) to (6), 151.11, 151.12 (1), 151.13 and 823.22; to consolidate, renumber and amend 140.03 (1) (intro.) and (b) (intro.), 140.055 (1) and (2), 140.85 (1) (intro.) and (b) and 151.09 (7) (intro.) and (am); to amend
The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 13.94 (1) (dg) of the statutes is amended to read:

13.94 (1) (dg) Annually, by October 1, perform a financial audit of expenditures made under the grant for dental services under s. 254.69 (4) (a) 1. or 2. or (c), 15.915 (2) (b) and under s. 255.20 of the statutes, relating to: health administration and supervision, local health departments, local health officials, communicable diseases, maternal and child health, environmental health, chronic disease and injuries, granting rule–making authority and providing penalties.

SECTION 2. 14.245 (1) (d) of the statutes is amended to read:

14.245 (1) (d) Make recommendations at least once a year under par. (b) to the council on alcohol and other drug abuse, the state health planning agency under s. 255, and the single state agencies under P.L. 91–513, as amended on March 30, 1980, and under 21 CFR 310.505, as amended on April 30, 1980.

SECTION 3. 15.197 (21) (e) of the statutes is amended to read:

15.197 (21) (e) A representative of an organization of registered sanitarians in this state who is employed by a city local health department, as defined in s. 250.01 (4) (a) 2. or 3. or (b), with agent status under s. 50.53 524.69.

SECTION 4. 15.197 (21) (f) of the statutes is amended to read:

15.197 (21) (f) A representative of an organization of registered sanitarians in this state who is employed by a county local health department, as defined in s. 250.01 (4) (a) 1. or 2. or (c), with agent status under s. 50.335 524.69.

SECTION 5. 15.915 (2) (b) of the statutes is amended to read:

15.915 (2) (b) An employe of the department of health and social services appointed by the secretary of health and social services, an employe of the department of natural resources appointed by the secretary of natural resources, a representative of local public health agencies departments who is not an employe of the department of health and social services, one physician representing clinical laboratories and one member representing private environmental testing laboratories, none of whom may be employes of the laboratory of hygiene, appointed for 3–year terms.

SECTION 6. 16.366 (2) (e) of the statutes is amended to read:

16.366 (2) (e) Section 50.335 524.692, as it applies to an agent for the department of health and social ser-
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services in the administration of s. 140.05 (17) 254.47, applies to an agent for the department of administration in the administration of this section.

SECTION 7. 19.21 (5) (d) 2. of the statutes is amended to read:
19.21 (5) (d) 2. Subdivision 1 does not apply to patient health care records, as defined in s. 146.81 (4), that are in the custody or control of a public local health agency department, as defined in s. 140.03 (1) (e) 250.01 (4).

SECTION 8. 20.435 (1) (ak) of the statutes is amended to read:
20.435 (1) (ak) Continuation coverage and medical leave premium subsidies. Biennially, the amounts in the schedule to make premium payments under ss. 146.88 252.16 and 146.882 252.17.

SECTION 9. 20.435 (1) (am) of the statutes is amended to read:
20.435 (1) (am) Acquired immunodeficiency syndrome services. The amounts in the schedule for the purchase of services under s. 146.022 252.12 (2) (a) for individuals with respect to acquired immunodeficiency syndrome and related infections.

SECTION 10. 20.435 (1) (ao) of the statutes is amended to read:
20.435 (1) (ao) Clinical trials program grant. The amounts in the schedule for a grant under s. 146.022 252.12 (2) (c).

SECTION 11. 20.435 (1) (cc) of the statutes is amended to read:
20.435 (1) (cc) Cancer control and prevention. The amounts in the schedule for cancer control and prevention grants under s. 146.027 255.05 and for the breast cancer screening program under 1991 Wisconsin Act 39, section 9125 (13g). Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department may transfer funds for cancer control and prevention grants under s. 146.027 255.05 between fiscal years under this paragraph. All funds allocated by the department under s. 146.027 255.05 (2) but not encumbered by December 31 of each year lapse to the general fund on the next January 1 unless transferred to the next calendar year by the joint committee on finance.

SECTION 12. 20.435 (1) (cd) of the statutes is amended to read:
20.435 (1) (cd) Breast cancer screening and services. The amounts in the schedule for breast cancer screening and services under s. 146.0277 255.06.

SECTION 13. 20.435 (1) (cf) of the statutes is amended to read:
20.435 (1) (cf) Rural cervical cancer treatment training. The amounts in the schedule for grants to applying organizations for the provision of specialized training to perform, in rural areas, colposcopic examinations and follow-up activities under s. 146.0277 255.07.

SECTION 14. 20.435 (1) (cm) of the statutes is amended to read:
20.435 (1) (cm) Immunization. Biennially, the amounts in the schedule for the provision of vaccine to immunize children under s. 140.05 (46) (a) 252.04 (1).

SECTION 15. 20.435 (1) (cp) of the statutes is amended to read:
20.435 (1) (cp) Public health aids. The amounts in the schedule to provide funding for a grant to a volunteer health care provider under 1991 Wisconsin Act 39, section 9125 (15p) and primary health care services grants under s. 140.03 250.08 and a grant to health organization for public ethics (HOPE), inc., under 1991 Wisconsin Act 39, section 9125 (13f). Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department may transfer funds for primary health care services grants under s. 140.03 250.08 between fiscal years under this paragraph. All funds allocated by the department under s. 140.03 250.08 but not encumbered by December 31 of each year lapse to the general fund on the next January 1 unless transferred to the next calendar year by the joint committee on finance.

SECTION 16. 20.435 (1) (e) of the statutes is amended to read:
20.435 (1) (e) Disease aids. Biennially, the amounts in the schedule for assisting victims of diseases, as provided in ss. 49.48, 49.483, 49.485, 58.06, 149.04 252.08 (4) and (5) and 149.06 252.10 (6) and (7).

SECTION 17. 20.435 (1) (ed) of the statutes is amended to read:
20.435 (1) (ed) Radon aids. The amounts in the schedule for the provision of state aid for local radon services under s. 140.53 254.34 (4).

SECTION 18. 20.435 (1) (ef) of the statutes is amended to read:
20.435 (1) (ef) Lead–poisoning or lead–exposure services. The amounts in the schedule for the purposes of providing grants under s. 151.09 254.15 (7).

SECTION 19. 20.435 (1) (eg) of the statutes is amended to read:
20.435 (1) (eg) Pregnancy counseling. The amounts in the schedule for grants for pregnancy counseling under s. 146.75 253.08.

SECTION 20. 20.435 (1) (em) of the statutes is amended to read:
20.435 (1) (em) Supplemental food program for women, infants and children benefits. The amounts in the schedule to provide a state supplement under s. 146.135 253.06 to the federal special supplemental food program for women, infants and children authorized under 42 USC 1786.

SECTION 21. 20.435 (1) (es) of the statutes is amended to read:
20.435 (1) (es) Supplemental food program for women, infants and children administration. The

Underscored, stricken, and vetoed text may not be searchable.
Section 22. 20.435 (1) (ev) of the statutes is amended to read:

20.435 (1) (ev) Pregnancy outreach. The amounts in the schedule for outreach to low-income pregnant women under s. 46.63 253.085.

Section 23. 20.435 (1) (f) of the statutes is amended to read:

20.435 (1) (f) Family planning. The amounts in the schedule to provide family planning services under s. 146.80 253.07 and under 1991 Wisconsin Act 39, section 9125 (21q). Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department may transfer funds between fiscal years under this paragraph. All funds allocated distributed by the department under s. 146.80 253.07 (2) (b) and (4) but not encumbered by December 31 of each year lapse to the general fund on the next January 1 unless transferred to the next calendar year by the joint committee on finance.

Section 24. 20.435 (1) (gm) of the statutes is amended to read:

20.435 (1) (gm) Licensing, review and certifying activities. The amounts in the schedule for the purposes specified in ss. 50.50 to 50.85, 140.05 (17), 140.051, 140.06 (5) and (8), 140.45 (6), 140.50 to 140.60, 140.86, 141.15 (2) (b), 143.15 (7) and 146.24, 50.135, 50.49 (2) (b), 250.05 (6), 252.22 (7), 254.20 (5) and (8), 254.31 to 254.39, 254.47, 254.48 and 254.61 to 254.89, subch. IV of ch. 50 and ch. 150. All moneys received under ss. 50.50 to 50.85, 50.135, 50.49 (2) (b), 50.93 (1) (c), 140.05 (17), 140.051 (3), 140.06 (5) and (8), 140.45 (6), 140.50 to 140.60, 140.86, 141.15 (2) (b), 143.15 (7), 146.24 and 150.13, 250.05 (6), 252.22 (7), 254.20 (5) and (8), 254.31 to 254.39, 254.47, 254.48 (3) and 254.61 to 254.89 shall be credited to this appropriation.

Section 25. 20.435 (1) (j) of the statutes is amended to read:

20.435 (1) (j) Fees for services and supplies. The amounts in the schedule for the purposes provided in ch. 69 and ss. 50.02 (2), 50.025, 50.13, 50.36 (2) and 140.61 254.41 and to conduct health facility plan and rule development activities, for accrediting nursing homes, convalescent homes and homes for the aged and for the purchase and distribution of the medical supplies. All moneys received under ch. 69 and ss. 50.02 (2), 50.025, 50.13, 50.36 (2) and 140.61 254.41 and as reimbursement for medical supplies shall be credited to this appropriation.

Section 26. 20.435 (1) (ja) of the statutes is amended to read:

20.435 (1) (ja) Congenital disorders; diagnosis, special dietary treatment and counseling. The amounts in the schedule to provide diagnostic services, special dietary treatment and follow-up counseling for congenital disorders and periodic evaluation of infant screening programs as specified under s. 146.02 253.13. All moneys received by the department under s. 146.02 253.13 (2), less the amounts appropriated under par. (jb), shall be credited to this appropriation.

Section 27. 20.435 (1) (jb) of the statutes is amended to read:

20.435 (1) (jb) Congenital disorders; operations. From all moneys received under s. 146.02 253.13 (2), the amounts in the schedule to be used for the costs of consulting with appropriate experts as specified in s. 146.02 253.13 (5).

Section 28. 36.25 (11) (b) of the statutes is amended to read:

36.25 (11) (b) The laboratory shall provide complete laboratory services in the areas of water quality, air quality, public health and contagious diseases for appropriate state agencies, and may perform examinations for licensed physicians, veterinarians, local health officers as defined in s. 250.01 (5), and resource management officials as may be necessary for the prevention and control of those diseases and environmental hazards which cause concern for public health and environmental quality.

Section 29. 39.16 (2) (e) of the statutes is amended to read:

39.16 (2) (e) Encourage and review the development of training programs in relation to the state’s health work force needs. Health work force activities performed pursuant to the medical education review committee’s functions shall be in accordance with the state health plan under s. 140.82.

Section 30. 44.09 (2) of the statutes is amended to read:

44.09 (2) Subsection (1) does not apply to patient health care records, as defined in s. 146.81 (4), that are in the custody or control of a public local health agency department, as defined in s. 140.03 (1) (c) 250.01 (4).

Section 31. 46.011 (4) of the statutes is amended to read:

46.011 (4) “State health planning and development agency” means the department, as designated under s. 140.82 (4) 250.04 (12).

Section 32. 46.034 (1) of the statutes is amended to read:

46.034 (1) The department, in order to discharge more effectively its responsibilities under this chapter and chs. 48, 51, 140 250 and 141 251 and other relevant provisions of the statutes, may establish community human services pilot programs for the study, implementation and evaluation of improved human services delivery systems. In the implementation of such pilot programs, the requirement of statewide uniformity with respect to the organization and governance of human ser-
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services shall not apply. The department and local governmental bodies may establish such departments, boards, committees, organizational structures and procedures as may be needed to implement the pilot programs. Such departments, boards, committees and organizational structures may assume responsibilities currently assigned by statute to the departments, boards, committees or organizational structures which are to be replaced.

**SECTION 33.** 46.10 (2m) of the statutes is amended to read:

46.10 (2m) The liability specified in sub. (2) shall not apply to tuberculosis patients receiving care, maintenance, services and supplies under s. 58.06 and ch. 149 252.07 to 252.10, to persons 18 and older receiving care, maintenance, services and supplies provided by prisons named in s. 302.01 or to parents of a minor who receives care for alcohol or drug abuse under s. 51.47 (1) without consent of the minor’s parent or guardian.

**SECTION 34.** 46.16 (2m) of the statutes is amended to read:

46.16 (2m) IMMUNIZATION REQUIREMENTS; DAY CARE CENTERS. The department, after notice to a licensee, may suspend, revoke or refuse to renew a license in any case in which the department finds that there has been a substantial failure to comply with the requirements of s. 140.05 (16) 252.04.

**SECTION 35.** 46.20 (3) of the statutes is amended to read:

46.20 (3) Upon approval of the site, plans and specifications, as provided in s. 149.01 252.073 as to tuberculosis sanatoriums and ss. 46.17 and 301.37, as to other institutions, the joint committee shall report to the several county boards the estimated cost of the site and buildings, and the amount thereof chargeable to each county on the basis set forth in sub. (6) (a), appending to each report a copy of the plans and specifications and all matter relating to the site and buildings; and if, if the report is approved by each county board, the joint committee shall purchase the site and cause the buildings to be erected in accordance with the plans and specifications.

**SECTION 36.** 46.21 (2m) (c) Exchange of information. Notwithstanding ss. 48.78 (2) (a), 49.45 (4), 49.53 (1m), 51.30, 51.45 (14) (a), 55.06 (17) (c), 143.07 (7), 146.80 (3) (c) and 146.82, 252.11 (7) and 253.07 (3) (c), any subunit of the county department of human services acting under this subsection may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of human services or with any person providing services to the client under a purchase of services contract with the county department of human services, if necessary to enable the county department of human services to coordinate the delivery of services to the client.

**SECTION 37.** 46.23 (3) (b) 1. b. of the statutes is amended to read:

46.23 (3) (b) 1. b. A local board of health or a health officer appointed under s. 140.09 for a local health department, as defined in s. 250.01 (4) (a) 1. or 2. or (c).

**SECTION 38.** 46.23 (3) (b) 1. bm. of the statutes is amended to read:

46.23 (3) (b) 1. bm. A local health officer for a local health department, as defined in s. 250.01 (4) (a) 1. or 2. or (c).

**SECTION 39.** 46.23 (3) (b) 1. c. of the statutes is amended to read:

46.23 (3) (b) 1. c. A county local health commission or committee created under s. 141.01 department, as defined in s. 250.01 (4) (a) 1. or 2. or (c).

**SECTION 40.** 46.23 (3) (e) of the statutes is amended to read:

46.23 (3) (e) Exchange of information. Notwithstanding ss. 49.45 (4), 49.53 (1m), 51.30, 51.45 (14) (a), 55.06 (17) (c), 143.07 (17), 146.80 (3) (c) and 146.82, 252.11 (7) and 253.07 (3) (c), any subunit of a county department of human services acting under this section may exchange confidential information about a client, without the informed consent of the client, with any other subunit of the same county department of human services or with any person providing services to the client under a purchase of services contract with the county department of human services, if necessary to enable an employee or service provider to perform his or her duties, or to enable the county department of human services to coordinate the delivery of services to the client.

**SECTION 41.** 46.245 of the statutes is amended to read:

46.245 Information for pregnant women. In any county in which a hospital, clinic or other facility in which abortions are performed is located, a county department under s. 46.215, 46.22 or 46.23 shall prepare the lists specified under s. 146.28 253.10 (2). The county department shall distribute the lists to each of those hospitals, clinics or other facilities.

**SECTION 42.** 46.27 (6) (e) of the statutes is amended to read:

46.27 (6) (e) The department shall encourage counties to use public health nurses who meet the requirements of s. 141.045 250.06 (1) to conduct assessments under this subsection.

**SECTION 43.** 46.56 (3) (b) 6. of the statutes is amended to read:

46.56 (3) (b) 6. Representatives of the county public health department, as defined in s. 251.01 (2).

**SECTION 44.** 46.63 of the statutes is renumbered 253.085.
SECTION 48. 46.73 of the statutes is renumbered 255.04, and 255.04 (1) and (5), as renumbered, are amended to read:

255.04 (1) Any hospital, as defined under s. 50.33 (2), any physician licensed under ch. 448, and any laboratory required to apply to the department for a certificate of approval under s. 143.15 252.22 (2) shall report information concerning any person diagnosed as having cancer or a precancerous condition to the department as prescribed by the department under sub. (2).

(5) The department may, to the extent feasible, collect information related to the occupation of cancer patients in order to fulfill the purpose of s. 144.05 (14m) 250.04 (3) (b) 4.

SECTION 49. 46.79 of the statutes is renumbered 254.52, and 254.52 (2) (d) and (e) (intro.), as renumbered, are amended to read:

254.52 (2) (d) Develop, update and disseminate information for use by clinicians, laboratory technicians and local health departments under chs. 140 and 144 that diagnose or treat Lyme disease or investigate cases or suspected cases of Lyme disease.

(e) (intro) Develop and distribute information through offices of physicians and public local health clinics, departments and by newsletters, public presentations or other releases of information. That information shall include all of the following:

SECTION 50. 46.87 (3) (c) 5. of the statutes is amended to read:

46.87 (3) (c) 5. The county local health department, if any, established under s. 140.09 251.02.

SECTION 51. 46.90 (5) (a) of the statutes is amended to read:

46.90 (5) (a) Except as otherwise provided, upon receiving a report of abuse, material abuse, neglect or self-neglect, the county agency shall either investigate the report or refer the report to another agency for investigation. Upon receiving a report of abuse, material abuse, neglect or self-neglect of an elder person who resides in a community-based residential facility or a nursing home licensed under s. 50.03 or of an elder person who receives services from a home health agency licensed under s. 444.15 50.49 and the person suspected of abusing or neglecting the person is an employee of the home health agency, the county agency may not investigate the report but it shall refer the report within 24 hours after the report is received, excluding Saturdays, Sundays and legal holidays, to the department for investigation. An investigation of a report of abuse, neglect or self-neglect shall be commenced within 24 hours after a report is received, excluding Saturdays, Sundays and legal holidays. An investigation of a report of material abuse shall be commenced within 5 days after a report is received, excluding Saturdays, Sundays and legal holidays. If a report is referred to the department, paras. (b) to (g) and sub. (6) do not apply to the department.
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a claim may be filed against the decedent’s estate and the statute of limitations specified in s. 859.02 shall be exclusively applicable. The court may refuse to render judgment or allow the claim in any case where a parent, spouse, surviving spouse or child is dependent on such the property for support. The court in rendering judgment shall take into account the current family budget requirement as fixed by the U.S. department of labor for such the community or as fixed by the authorities of such the community in charge of public assistance. The records kept by the municipality, county or institution are prima facie evidence of the value of the general relief furnished. This section shall not apply to any person who receives care for pulmonary tuberculosis as provided in s. 149.04 252.08 (4).

SECTION 58. 49.43 (4) of the statutes is amended to read:

49.43 (4) “Home health agency” has the meaning specified in s. 146.625 (1) (am). (am)

SECTION 59. 49.45 (6m) (bm) 6. c. of the statutes is amended to read:

49.45 (6m) (bm) 6. An HIV infection, as defined in s. 146.625 (1) (e) 252.01 (2), and illness or injury associated with the development of acquired immunodeficiency syndrome.

SECTION 60. 49.45 (25) (am) of the statutes is amended to read:

49.45 (25) (am) Except as provided under par. (be) and sub. (24), case management services under s. 49.46 (2) (b) 9. are reimbursable under medical assistance only if provided to a medical assistance beneficiary who receives case management services from or through a certified case management provider in a county, city, village or town that elects, under par. (b), to make the services available and who has a developmental disability, as defined under s. 51.01 (5) (a), chronic mental illness, as defined under s. 51.01 (3g), or Alzheimer’s disease, as defined under s. 46.87 (1) (a), is alcoholic, as defined under s. 51.01 (1), or drug dependent, as defined under s. 51.01 (6), is physically disabled, as defined by the department, is a severely emotionally disturbed child, is age 65 or over or, after December 31, 1991, has HIV infection, as defined in s. 146.88 (1) (d) 252.01 (2).

SECTION 61. 49.45 (25) (be) of the statutes is amended to read:

49.45 (25) (be) A private nonprofit agency that is a certified case management provider may elect to provide case management services to medical assistance beneficiaries who have HIV infection, as defined in s. 146.88 (1) (d) 252.01 (2). The amount of the allowable charges for those services under the medical assistance program that is not provided by the federal government shall be paid from the appropriation under s. 20.435 (1) (am).

SECTION 62. 50.03 (4) (a) 1. of the statutes is amended to read:

50.03 (4) (a) 1. Except as provided in sub. (4m), the department shall issue a license if it finds the applicant to be fit and qualified, if it finds that the facility meets the requirements established by this subchapter and, for a community–based residential facility, if the facility has paid the license fee under s. 140.85 50.037 (2) (a). The department, or its designee, shall make such inspections and investigations as are necessary to determine the conditions existing in each case and shall file written reports. The department may designate and use full–time city or county agencies as its agents in making the inspections and investigations, including such subsequent inspections and investigations as are deemed necessary or advisable. The department shall reimburse the city or county furnishing such service at the rate of $25 per year per license issued in the municipality. Before renewing the license of any community–based residential facility, the department shall consider all formal complaints filed under sub. (2) (f) during the current license period and the disposition of each. The department shall promulgate rules defining “fit and qualified” for the purposes of this subdivision.

SECTION 63. 50.39 (2) of the statutes is amended to read:

50.39 (2) The use of the title “hospital” to represent or identify any facility which does not meet the definition of a “hospital” as provided herein or is not subject to approval under ss. 50.32 to 50.39 is prohibited, except that institutions governed by ss. 51.09 and 149.01 252.073 are exempt.

SECTION 64. 50.39 (3) of the statutes is amended to read:

50.39 (3) Facilities governed by ss. 45.365, 48.62, 49.14, 49.171, 50.02, 51.09, 58.06, 149.01, 149.02 and 149.06 252.073, 252.076 and 252.10, secured correctional facilities as defined in s. 48.02 (15m), correctional institutions governed by the department of corrections under s. 301.02 and the offices and clinics of persons licensed to treat the sick under chs. 446, 447 and 448 are exempt from ss. 50.32 to 50.39. Sections 50.32 to 50.39 do not abridge the rights of the dental examining board, pharmacy examining board, chiropractic examining board, board of nursing in carrying out their statutory duties and responsibilities.

SECTION 65. 50.50 of the statutes is renumbered 254.61, and 254.61 (5) (d), as renumbered, is amended to read:

254.61 (5) (d) Any bed and breakfast establishment that serves meals breakfasts only to its lodgers.

SECTION 66. 50.505 of the statutes is renumbered 254.63 and amended to read:

254.63 Motels. Upon the written request of the hotel operator made on forms furnished by the department, the department may classify a hotel as a “motel”, if the operator of the hotel furnishes on–premise on–premises park–
Section 67. 50.51 of the statutes is renumbered 254.64, and 254.64 (1) (a), (1p) and (4) (c), as renumbered, are amended to read:

254.64 (1) (a)  No person may conduct, maintain, manage or operate a hotel, restaurant, temporary restaurant, tourist rooming house, vending machine commissary or vending machine as defined in s. 50.50 if the person has not been issued an annual permit by the department or by a village, city or county which local health department that is granted agent status under s. 50.535 254.69 (2).

(1p) The issuance of a permit may be conditioned upon the permittee correcting a violation of this subchapter, rules promulgated by the department under this subchapter or ordinances or regulations adopted under s. 50.535 254.69 (2) (g), within a specified period of time. If the condition is not met within the specified period of time, the permit shall be void.

(4) (c)  A permit for a temporary restaurant may be transferred to a premise premises other than that for which it was issued if, prior to operation of the temporary restaurant at the new premise premises, approval of the new premise premises is secured from a department representative or, if the new premise premises is located in a village, city or county, the jurisdictional area of the local health department that has been granted agent status for the premise premises under s. 50.535 254.69 (2), from the village, city or county local health department.

Section 68. 50.515 of the statutes is renumbered 254.65 and amended to read:

254.65 Preinspection.  (1) The department or a village, city or county local health department granted agent status under s. 50.535 254.69 (2) may not grant a permit to a person intending to operate a new hotel, tourist rooming house, bed and breakfast establishment, restaurant or vending machine commissary or to a person intending to be the new operator of an existing hotel, tourist rooming house, bed and breakfast establishment, restaurant or vending machine commissary without a preinspection. This section does not apply to a temporary restaurant or when a permit is transferred under s. 50.51 254.64 (4) (d).

(2) Agents designated by the department under s. 50.535 254.69 (1) shall make preinspections of vending machine commissaries as required under this subsection and shall be reimbursed for those services at the rate of 80% of the preinspection fee designated in this subsection. Agents designated by the department under s. 50.535 254.69 (2) shall make preinspections of hotels, restaurants and tourist rooming houses and establish and collect preinspection fees under s. 50.535 254.69 (2) (d).

Section 69. 50.518 of the statutes is renumbered 254.66 and amended to read:

254.66 Average annual surveys.  The department or a village, city or county local health department granted agent status under s. 50.535 254.69 (2) shall annually make a number of inspections of restaurants in this state that shall equal the number of restaurants for which annual permits are issued under s. 50.51 254.64 (1) (a).

Section 70. 50.52 of the statutes is renumbered 254.67.

Section 71. 50.53 of the statutes is renumbered 254.68, and 254.68 (1) (intro.), (1g), (2) (intro.) and (3), as renumbered, are amended to read:

254.68 (1) (intro.) Except as provided in s. 50.535 254.69 (2) (d) and (e), the annual permit fees under this section are as follows:

(1g) Beginning on July 1, 1987, except as provided in s. 50.535 254.69 (2) (d) and (e), the annual permit fee for a bed and breakfast establishment is $75.

(2) (intro.) Except as provided in s. 50.535 254.69 (2) (d):

(3) Except as provided in s. 50.535 254.69 (2) (d) and this subsection, a fee of $5 is required to issue any duplicate permit. The fee for a duplicate vending machine operator’s permit or vending machine permit is $1.

Section 72. 50.535 of the statutes is renumbered 254.69, and 254.69 (title), (1) and (2) (am) to (h) and (j) 1, as renumbered, are amended to read:

254.69 (title) Agent status for local health departments.  (1) VENDING OPERATIONS.  In the administration and enforcement of this subchapter, the department may use villages, cities or counties local health departments as its agents in making inspections and investigations of vending machine commissaries, vending machine operators and vending machines if the village, city or county jurisdictional area of the local health department has a population greater than 5,000.  When If the designation is made and the services are furnished, the department shall reimburse the village, city or county local health department furnishing the service at the rate of 80% of the net license fee per license per year issued in the municipality.  No city or village may be designated on or after August 1, 1987, as an agent under this subsection if the city or village is located in a county in which the city or village is designated as an agent.  If a county is designated before, on or after August 1, 1987, as an agent under this subsection, the designation only applies to those cities, villages and towns in the county which are not designated as an agent under this subsection jurisdictional area.

(2) (am) In the administration of this subchapter or s. 140.05 (17) 254.47, the department may enter into a written agreement with a village, city or county, if the village, city or county local health department with a jurisdictional area that has a population greater than 5,000, which designates the village, city or county as its local health department as the department’s agent in issuing permits to and making investigations or inspections of hotels, restaurants, temporary restaurants, tourist rooming houses, bed and breakfast establishments, campgrounds and camping resorts, recreational and educa-
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In a village, city or county, jurisdictional area of a local health department without agent status, the department of health and social services may issue permits, collect permit fees under s. 50.53, 254.68 and make investigations or inspections of hotels, restaurants, temporary restaurants, tourist rooming houses, bed and breakfast establishments, campgrounds and camping resorts, recreational and educational camps and public swimming pools. If the department designates a village, city or county local health department as its agent, the department, village, city or county local health department may require no permit for the same operations other than the permit issued by the village, city or county local health department under this subsection. The department shall coordinate the designation of agents under this subsection with the department of agriculture, trade and consumer protection to ensure that, to the extent feasible, the same village, city and county agencies are local health department granted agent status under this subsection and under s. 97.41. Except as otherwise provided by the department, a village, city or county local health department granted agent status shall regulate all types of establishments for which this subchapter permits the department of health and social services to delegate regulatory authority. No village or city may be designated on or after August 1, 1987, as an agent under this paragraph if the county in which the village or city is located is designated as an agent. If a county is designated before, on or after August 1, 1987, as an agent under this paragraph, the designation only applies to those villages, cities and towns in the county which are not designated as an agent under this subsection.

(b) A village, city or county local health department granted agent status under this subsection shall meet standards adopted promulgated by rule, by the department of health and social services. The department shall annually evaluate the licensing, investigation and inspection program of each village, city or county local health department granted agent status. If, at any time, a village, city or county local health department granted agent status fails to meet the standards, the department of health and social services may revoke its agent status.

(c) The department shall provide education and training to agents designated under this subsection to ensure uniformity in the enforcement of this subchapter, s. 140.05 (17), 254.47 and rules promulgated under this subchapter and s. 140.05 (17) 254.47.

(d) Except as provided in par. (dm), a village, city or county local health department granted agent status under this subsection shall establish and collect the permit fee for each type of establishment. The village, city or county local health department may establish separate fees for preinspections of new establishments, for preinspections of existing establishments for which a person intends to be the new operator or for the issuance of duplicate permits. No fee may exceed the village’s, city’s or county’s local health department’s reasonable costs of issuing permits to, making investigations and inspections of, and providing education, training and technical assistance to the establishments, plus the state fee established under par. (e). A village, city or county local health department granted agent status under this subsection or under s. 97.41 may issue a single permit and establish and collect a single fee which authorizes the operation on the same premises of more than one type of establishment for which it is granted agent status under this subsection or under s. 97.41.

(dm) A village, city or county local health department granted agent status under this subsection shall contract with the department of health and social services for the department of health and social services to collect fees and issue permits. The department shall collect from the village, city or county local health department the actual and reasonable cost of providing the services.

(e) The department shall establish state fees for its costs related to setting standards under this subchapter and s. 140.05 (17), 254.47 and 254.68. The department shall provide education and training to, making investigations and inspections of existing establishments for which this subchapter permits the department of health and social services to delegate regulatory authority. No village or city may be designated on or after August 1, 1987, as an agent under this paragraph if the county in which the village or city is located is designated as an agent. If a county is designated before, on or after August 1, 1987, as an agent under this paragraph, the designation only applies to those villages, cities and towns in the county which are not designated as an agent under this subsection.

(f) If, under this subsection, a village, city or county local health department becomes an agent or its agent status is discontinued during a permittee’s permit year, the department of health and social services and the village, city or county local health department shall divide any fee paid by the permittee for that permit year according to the proportions of the permit year occurring before and after the village’s, city’s or county’s local health department’s agent status is granted or discontinued. No additional fee may be required during the permit year due to the change in agent status.

(g) A village, city or county may enact, adopt or rules and a local board of health may adopt regulations regarding the permittees and premises for which the local health department is the designated agent under this subsection, which are stricter than this subchapter and s. 140.05 (17), 254.47 or rules promulgated by the department of health and social services under this subchapter or s. 140.05 (17), 254.47. No such provision may conflict with this subchapter or with department rules.

(h) This subsection does not limit the authority of the department to inspect establishments in villages, cities and counties jurisdictional areas of local health departments where agent status is granted if it inspects in
response to an emergency, for the purpose of monitoring and evaluating the village's, city's or county's local health department's licensing, inspection and enforcement program or at the request of the village, city or county local health department.

(j) 1. A permit fee established by a village, city or county local health department granted agent status exceeds the reasonable costs described under par. (d).

SECTION 73. 50.54 of the statutes is renumbered 254.70, and 254.70 (1), as renumbered, is amended to read:

254.70 (1) An applicant for a permit under this subchapter shall complete the application prepared by the department or the village, city or county local health department granted agent status under s. 50.535 254.69 (2) and provide, in writing, any additional information the department of health and social services or village, city or county local health department issuing the permit requires.

SECTION 74. 50.545 of the statutes is renumbered 254.71, and 254.71 (5), as renumbered, is amended to read:

254.71 (5) The department shall conduct evaluations of the effect that the food protection practices certification program has on compliance by restaurants with requirements established under s. 50.52 254.74 (1) and provide the evaluations, as requested, to the council on food protection practices.

SECTION 75. 50.55 of the statutes is renumbered 254.72, and 254.72 (title), as renumbered, is amended to read:

254.72 (title) Health and safety; standard.

SECTION 76. 50.56 of the statutes is renumbered 254.73.

SECTION 77. 50.57 of the statutes is renumbered 254.74, and 254.74 (title), (1) (e) and (2), as renumbered, are amended to read:

254.74 (title) Powers of the department and local health departments.

(1) (e) Hold a hearing under ch. 227 if, in lieu of proceeding under ch. 68, any interested person in a village, city or county the jurisdictional area of a local health department not granted agent status under s. 50.535 254.69 appeals to the department of health and social services alleging that a permit fee for a hotel, restaurant, temporary restaurant, tourist rooming house, campground, camping resort, recreational or educational camp or public swimming pool exceeds the permit issuer’s reasonable costs of issuing permits to, making investigations and inspections of, and providing education, training and technical assistance to the establishment.

(2) A village, city or county local health department designated as an agent under s. 50.535 254.69 (2) may exercise the powers specified in sub. (1) (a) to (d), consistent with s. 50.535 254.69 (2) (g).
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SECTION 84. 50.71 of the statutes is renumbered 254.87.

SECTION 85. 50.80 of the statutes is renumbered 254.80, and 254.80 (2), as renumbered, is amended to read:

254.80 (2) To secure exemption from liability the hotelkeeper must shall do all of the following:

(a) have Have doors on sleeping rooms equipped with locks or bolts;

(b) offer Offer, by notice printed in large plain English type and kept conspicuously posted in each such sleeping room, to receive valuable articles for safekeeping, and explain in such the notice that the hotel is not liable for loss unless articles are tendered for safekeeping;

(c) keep Keep a safe or vault suitable for keeping such the articles and receive them for safekeeping when tendered by a guest, except as provided in sub. (3).

SECTION 86. 50.81 of the statutes is renumbered 254.81 and amended to read:

254.81 Hotelkeeper's liability for baggage; limitation. Every guest and intended guest of any hotel upon delivering to the hotelkeeper or the hotelkeeper's servants any baggage or other property for safekeeping elsewhere than in the room assigned to the guest, shall demand and the hotelkeeper shall give a check or receipt, to evidence the delivery. No hotelkeeper shall be liable for the loss of or injury to the baggage or other property of a hotel guest, unless it was delivered to the hotelkeeper or the hotelkeeper's servants for safekeeping or unless the loss or injury occurred through the negligence of the hotelkeeper or the hotelkeeper's servants.

SECTION 87. 50.82 of the statutes is renumbered 254.82 and amended to read:

254.82 Liability of hotelkeeper for loss of property by fire or theft; owner's risk. A hotelkeeper is not liable for the loss of baggage or other property of a hotel guest by a fire (not intentional) unintentionally produced by the hotelkeeper or the hotelkeeper's servants. Every hotelkeeper is liable for loss of baggage or other property of a guest caused by theft or gross negligence of the hotelkeeper or the hotelkeeper's servants. Such, the liability may not exceed $200 for each trunk and its contents, $75 for each valise and its contents and $10 for each box, bundle or package and contents, so placed under the care of the hotelkeeper; and $50 for all other effects including wearing apparel and personal belongings, unless the hotelkeeper has agreed in writing with the guest to assume a greater liability. When any person suffers the person's permits his or her baggage or property to remain in any hotel, after the person's status as a guest has ceased, or forwards the same baggage or property to a hotel before becoming a guest and the same baggage or property is received into the hotel, the hotelkeeper holds such the baggage or property at the risk of the owner.
51.025 (1) (f) The local health department, as defined in s. 250.01 (4) (b), in the city of Milwaukee public health department.

**Section 92.** 51.44 (1) (b) of the statutes is created to read:

51.44 (1) (b) “Local health department” has the meaning given in s. 250.01 (4).

**Section 93.** 51.44 (1) (d) of the statutes is repealed.

**Section 94.** 51.44 (4) of the statutes is amended to read:

51.44 (4) Each county board of supervisors shall designate the appropriate county department under s. 46.21, 46.23 or 51.437, the local health department, or another entity as the lead public health agency department of the county, or another entity as the local lead agency to provide early intervention services under the funding specified in sub. (3).

**Section 95.** 51.45 (8) (d) of the statutes is amended to read:

51.45 (8) (d) Each approved public and private treatment facility shall file with the department on request, data, statistics, schedules and information the department reasonably requires, including any data or information specified under s. 46.973 (2m). An approved public or private treatment facility that without good cause fails to furnish any data, statistics, schedules or information as requested, or files fraudulent returns thereof, shall be removed from the list of approved treatment facilities.

**Section 96.** 51.62 (1) (b) of the statutes is amended to read:

51.62 (1) (b) “Inpatient health care facility” has the meaning provided in s. 140.86, 50.135 (1), except that it does include community-based residential facilities as defined in s. 50.01 (1g).

**Section 97.** 58.06 of the statutes is amended to read:

58.06 Private tuberculosis sanatoriums. Any private, philanthropic tuberculosis sanatorium organized on a nonprofit basis, if approved by the department, may admit patients committed to it by any county, or transferred to it by the department, or referred to it for outpatient service, in the manner and upon the terms provided by s. 252.01 (1), except that the facility may add actual interest expense to charges made for the cost of care after July 1, 1989, to the cost of care. Such charges made for the cost of care to recover the costs in carrying such charges and 10% to such charges shall generate sufficient earnings in addition to depreciation accruals to provide funds to cover replacement costs for buildings, fixtures and equipment as they are replaced.

**Section 98.** 59.97 (15) (im) of the statutes is amended to read:

59.97 (15) (im) The fact that an individual with acquired immunodeficiency syndrome or a positive test for the presence of HIV, as defined in s. 146.025 (1) (b) 252.01 (1), antigen or nonantigenic products of HIV or an antibody to HIV resides in a community living arrangement with a capacity for 8 or fewer persons may not be used under par. (i) to assert or prove that the existence of the community living arrangement in the city, town or village poses a threat to the health, safety or welfare of the residents of the city, town or village.

**Section 99.** 60.63 (10m) of the statutes is amended to read:

60.63 (10m) The fact that an individual with acquired immunodeficiency syndrome or a positive test for the presence of HIV, as defined in s. 146.025 (1) (b) 252.01 (1), antigen or nonantigenic products of HIV or an antibody to HIV resides in a community living arrangement with a capacity for 8 or fewer persons may not be used under sub. (10) to assert or prove that the existence of the community living arrangement in the town poses a threat to the health, safety or welfare of the residents of the town.

**Section 100.** 62.09 (1) (a) of the statutes is amended to read:

62.09 (1) (a) The officers shall be a mayor, treasurer, clerk, comptroller, attorney, engineer, one or more assessors unless the city is assessed by a county assessor under s. 70.99, one or more constables as determined by the common council, a local health commissioner officer, as defined in s. 250.01 (5), or local board of health, as defined in s. 250.01 (3), street commissioner, board of police and fire commissioners except in cities where not applicable, chief of police, chief of the fire department, board of public works, 2 aldermen from each aldermanic district, and such other officers or boards as are created by law or by the council. If one alderman from each aldermanic district is provided under s. 66.018 (1), the council may, by ordinance adopted by a two-thirds vote of all its members and approved by the electors at a general or special election, provide that there shall be 2 aldermen from each aldermanic district.

**Section 101.** 62.23 (7) (i) 9m of the statutes is amended to read:

62.23 (7) (i) 9m. The fact that an individual with acquired immunodeficiency syndrome or a positive test for the presence of HIV, as defined in s. 146.025 (1) (b) 252.01 (1), antigen or nonantigenic products of HIV or an antibody to HIV resides in a community living arrangement with a capacity for 8 or fewer persons may not be used under sub. 9 to assert or prove that the existence of the community living arrangement in the city poses a threat to the health, safety or welfare of the residents of the city.

**Section 102.** 66.052 (1) of the statutes is amended to read:

66.052 (1) Any city common council or village board may direct the location, management and construction of, and license (annually or otherwise), regulate or prohibit any industry, thing or place where any nauseous, offensive or unwholesome business is carried on, that is
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within the city or village or within 4 miles of the bound-
aries of the city or village, except that the Milwaukee,
Menominee and Kinnicinnic rivers with their branches
to the outer limits of the county of Milwaukee, and all
canals connecting with said rivers, together with the
lands adjacent to said rivers and canals or within 100
yards thereof of them, are deemed to be within the jur-
diction of the city of Milwaukee. Any town board as to
the area within the town not licensed, regulated or prohib-
ited by any city or village pursuant to this section, shall
have the same powers as are provided in this section for
cities and villages, as to the area within the town that
is not licensed, regulated or prohibited by any city or village
under this section. Any such business that is conducted
in violation of any city, village or town ordinance per-
mitted that is authorized to be enacted under this section
is declared to be a public nuisance and an. An action for
the abatement or removal thereof of the business or to
obtain an injunction to prevent operation of the same
business may be authorized to be brought and maintained
by the city common council or village or town board in
the name of this state on the relation of such city, village
or town as provided in ss. 823.01, 823.02 and 823.07, or
as provided in s. 146.125 254.58. Section 97.42 shall
may not limit the powers granted by this section. Section
97.52 shall may not limit the powers granted by this sec-
tion to cities or villages but powers granted to towns by
this section shall be are limited by s. 97.52 and by any
orders and rules promulgated thereunder under s. 97.52.

Section 103. 66.058 (2) (d) of the statutes is amended to read:

66.058 (2) (d) Any license granted under the provi-
sions of this section shall be subject to revocation or sus-
pension for cause by the city common council, village
board or town board that issued the the license upon
complaint filed with the clerk of such the city, village or
town signed by any law enforcement officer, local health
officer, as defined in s. 250.01 (5), or building inspector
after a public hearing upon the complaint, provided
that the holder of the license shall be given 10 days’
notice in writing of the hearing, and the holder of the
license shall be entitled to appear and be heard as to why
such the license shall not be revoked. Any holder of a
license which that is revoked or suspended by the govern-
ing body of any city, village or town may within 20 days
of the date of the revocation or suspension appeal therefrom to the circuit court of the county in which the
trailer camp or mobile home park is located by filing a
written notice of appeal with the city, village or town
clerk, together with a bond executed to the city, village or
town, in the sum of $500 with 2 sureties or a bonding
company approved by the said clerk, conditioned for the
faithful prosecution of the appeal and the payment of
costs adjudged against the license holder.

Section 104. 66.0585 of the statutes is amended to read:

66.0585 Municipalities; parking fees on mobile
homes. Any municipality may assess parking fees at the
rates under s. 66.058 on mobile homes, as defined in s.
70.111 (19), except mobile homes which are located in
campgrounds licensed under s. 240.05 (17) 254.47 and
mobile homes which are located on land where the prin-
cipal residence of the owner of the mobile home is
located, regardless of whether or not the mobile home is
occupied during all or part of any calendar year.

Section 105. 66.075 (2) of the statutes is amended to read:

66.075 (2) The county board in each county and the
common council in each city shall authorize the construc-
tion of such a county or municipal slaughterhouse, shall
make the necessary appropriation for the purchase of
land and the construction and maintenance of such
slaughterhouse and shall take proper action to secure the
building, establishment and maintenance of such county
or municipal slaughterhouse. Provided, that in cities
such municipal slaughterhouse shall be maintained and
operated by the health department in such city.

Section 106. 66.124 (1) of the statutes is amended to read:

66.124 (1) An employe or agent of a village, city or
county local health department designated by the depart-
ment of health and social services under s. 50.535 254.69
(2) or the department of agriculture, trade and consumer
protection shall examine the samples and specimens, examine and copy relevant documents
and records or obtain photographic or other evidence
needed to enforce subch. III VII of ch. 50 254. ch. 97 or
s. 140.05 (17) 254.47, relating to those premises. If sam-
ple of food are taken, the village, city or county local health department shall pay or offer to pay the market
value of those samples. The village, city, county local
health department, department of health and social ser-
dices or department of agriculture, trade and consumer
protection shall examine the samples and specimens
secured and shall conduct other inspections and examina-
tions needed to determine whether there is a violation of
subch. III VII of ch. 50 254. ch. 97 or s. 140.05 (17) 254.47,
rules adopted by the departments under those statutes, ordinances adopted by the village, city or county
or regulations adopted by the village, city, county local
board of health under s. 50.535 (2) (g) or 97.41 (7) or
254.69.

Section 107. 66.124 (2) (a) of the statutes is amended to read:

66.124 (2) (a) Whenever, as a result of an examina-
tion, the a village, city or county has reasonable cause to
believe that any examined food constitutes, or that any
construction, sanitary condition, operation or method of
operation of the premises or equipment used on the prem-
ises creates an immediate danger to health, the administrator of the village, city or county agency responsible for
the village’s, city’s or county’s agent functions under s.
50.535(2) or 97.41 or 254.69 (2) may issue a temporary
order and cause it to be delivered to the permittee, or to
the owner or custodian of the food, or to both. The order
may prohibit the sale or movement of the food for any
purpose, prohibit the continued operation or method of
operation of specific equipment, require the premises
to cease any other operation or method of operation which
creates the immediate danger to health, or set forth any
combination of these requirements. The administrator
may order the cessation of all operations authorized by
the permit only if a more limited order does not remove
the immediate danger to health. Except as provided in
par. (c), no temporary order is effective for longer than 14
days from the time of its delivery, but a temporary order
may be reissued for one additional 14–day period, if nec-
essary to complete the analysis or examination of sam-
ple, specimens or other evidence.

**SECTION 108.** 66.124 (4) of the statutes is amended
to read:

66.124 (4) A proceeding under this section, or the
issuance of a permit for the premises after notification of
procedures under this section, does not constitute a
waiver by the village, city or county of its authority to rely
on a violation of subch. III of ch. 50, ch. 97 or s. 140.05
(17) , s. 254.47 or subch. VII of ch. 254 or any rule
adopted under those statutes as the basis for any subse-
cquent suspension or revocation of the permit or any other
enforcement action arising out of the violation.

**SECTION 109.** 66.32 of the statutes is amended
to read:

66.32 Extraterritorial powers. The extraterritorial
powers granted to cities and villages by statute, including
ss. 30.745, 62.23 (2) and (7a), 66.052, 146.107 and 236.10;
shall and 254.57, may not be exercised within the corpo-
rate limits of another city or village. Wherever such these
statutory extraterritorial powers shall overlap, the juris-
diction over said the overlapping area shall be divided on
a line all points of which are equidistant from the bound-
aries of each municipality concerned so that not more
than one municipality shall exercise such power over any
area.

**SECTION 110.** 66.435 (4) (a) of the statutes is amended
to read:

66.435 (4) (a) The governing body of the municipal-
ity, or such public officer or public body as it designates,
including a housing authority organized and created
under s. 66.40, a redevelopment authority created under
s. 66.431 or a community development authority created
under s. 66.4325, is authorized to prepare a workable pro-
gram for utilizing appropriate private and public
resources to eliminate, and prevent the development or
spread of, slums and urban blight and deterioration, to
encourage needed urban rehabilitation, to provide for the
redevelopment of blighted, deteriorated or slum areas, or
to undertake such of the aforesaid those activities or other
feasible activities as that may be suitably employed to
achieve the objectives of such a program; and such. The
governing body may by resolution or ordinance provide
the specific means by which such a workable program
can be effectuated and may confer upon its officers and
employs the power required to carry out a program of
rehabilitation and conservation for the restoration and
removal of blighted, deteriorated or deteriorating areas.
Whenever any If a municipality finds that there exists in
such the municipality dwellings or other structures which
that are unfit for human habitation due to dilapidation,
defects increasing that increase the hazards of fire, acci-
dents or other calamities, lack of ventilation, light or san-
tary facilities, or due to other conditions, any one of
which is sufficient for action, rendering such the dwell-
ings or other structures unsafe or insanitary or unsanitary,
dangerous or detrimental to the health, safety or morals,
or otherwise inimical to the welfare of the residents of
such the municipality, power is expressly conferred upon
such the municipality to may enact such the resolutions
or ordinances deemed that it considers appropriate and
effective in order to prevent the those conditions herein
set forth and to may require or cause the repair, closing
doing or demolition or removal of such the dwellings or other
structures. For the purposes of such the resolutions
or ordinances, a “dwelling” means any building, or struc-
ture, or part thereof, of the building or structure that is
used and occupied for human habitation or intended to be
so used, and includes any appurtenances belonging
therein to it or usually enjoyed therewith with it. The
terms “structure” shall also include includes fences,
additions, garages, sheds, and any type of store, or commercial,
industrial or manufacturing building. Such The ordi-
nances or resolutions shall require that whenever there
has been a violation, or whenever, if there are reasonable
grounds to believe that there has been a violation, of any
provision of any such the ordinances or resolutions,
notice of such violation or the alleged violation shall be
given to the the alleged responsible person or persons
responsible therefore or by appropriately designated public
officers or employees of such municipality. Every such
notice shall: 1. Be put in writing; 2. Include include a
description of the real estate sufficient for identification;
3. Include include a statement of the reason or reasons
why it is being issued; 4. Specify for issuance specify a
time for the performance of any act which it that the
notice requires; and 5. Be be served upon the the alleged
responsible person or persons. Such. The notice of violation
shall be deemed to be is properly served upon such
the person if a copy thereof of it is delivered to the per-
son personally or, if not found, by leaving a copy thereof,
is left at the person’s usual place of abode, in the presence
of someone in the family of suitable age and discretion
who shall be informed of the contents thereof, or by send.
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Section 111. 66.435 (4) (b) of the statutes is amended to read:

66.435 (4) (b) Any person aggrieved by the determination of any board, commission or commissioner of local health officer, following review of an order issued by officers and employees of a municipality under this section, may appeal directly to the circuit court of the county in which the dwelling or other structure is located by filing a petition for review with the clerk of the circuit court within 30 days after a copy of the order of the board, commission or commissioner of local health officer has been served upon the person. The petition shall state the substance of the order appealed from and the grounds upon which the person believes the order to be improper. A copy of the petition shall be served upon the board, commission or commissioner of local health officer whose
The determination is being appealed. The copy shall be served personally or by registered or certified mail within the 30-day period provided in this paragraph. A reply or answer shall be filed by the board, commission or commissioner of local health officer within 15 days from after the receipt of the petition. A copy of the written proceedings of the hearing held by the board, commission or commissioner of local health officer which led to service of the order being appealed, shall be included with the reply or answer when filed. If it appears to the court that the petition is filed for purposes of delay, the court shall, upon application of the municipality, promptly dismiss the petition. Either party to the proceedings may then petition the court for an immediate hearing on the order. The court shall review the order, and the copy of written proceedings of the hearing conducted by the board, commission or commissioner of local health and officer, shall take such testimony as in its judgment may be that the court determines is appropriate, and, following a hearing upon the order without a jury, the court shall make its determination. If the court affirms the determination made by the board, commission or commissioner of local health officer, the court shall fix a time within which the order appealed from shall become operative.

Section 112. 69.01 (3) of the statutes is amended to read:

69.01 (3) “City registrar” means the city local health officer in of a local health department with jurisdiction for a city which that is a registration district.

Section 113. 69.01 (14) of the statutes is amended to read:

69.01 (14) “Local health office” means a county health department established under s. 140.09 or a city health office established under s. 141.015 or 141.02 department” has the meaning given in s. 250.01 (4).

Section 114. 69.03 (10) of the statutes is amended to read:

69.03 (10) At the request of a local health office department, provide the local health office department with vital statistics for local health planning and program activities and establish a schedule with the local health office department for transmittal of the vital statistics.

Section 115. 69.04 (1) (a) 1. of the statutes is amended to read:

69.04 (1) (a) 1. The state registrar may approve a city as a registration district for registration of births occurring in the city if the state registrar determines that the city has a facility which provides obstetrical care and a local health office established under s. 141.015 or 141.02 and department with jurisdiction for the city that is administered by a full-time local health officer with a deputy who is authorized to act in place of the local health officer during the officer’s absence, illness or disability and staff, office space and other resources for the proper administration of birth records, makes reasonable use of public health data derived from birth records and suitably preserves and cares for official city birth records.

Section 116. 69.05 (3m) (intro.), (a) and (b) of the statutes are amended to read:

69.05 (3m) (intro.) If the mother of a registrant of a birth certificate resides in a city and the birth certificate is not filed in such city, send a copy of the birth certificate to such city the local health office department with jurisdiction for the city if:

(a) The office local health department has a maternal–child visitation or information program;

(b) The office local health department has requested the copy and notified the state registrar of its request; and

Section 117. 69.14 (1) (a) 2. of the statutes is amended to read:

69.14 (1) (a) 2. A filing party shall send a certificate of birth for a birth in a city which has a city local health office which department that is not a registration district to such office the local health department if the office local health department has a maternal–child visitation or information program, if the office local health department has filed with the state registrar a request that the certificate be sent to it and if the state registrar has approved the request. The state registrar may revoke his or her approval at any time.

Section 118. 69.14 (1) (a) 3. (intro.) of the statutes is amended to read:

69.14 (1) (a) 3. (intro.) Any city health office accepting local health department that accepts original birth certificates under subd. 2 shall:

Section 119. 69.20 (3) (c) of the statutes is amended to read:

69.20 (3) (c) Notwithstanding sub. (2), a local registrar may disclose information on a birth certificate or issue a copy of the certificate to a county or city local health office department, as defined in s. 250.01 (4), for health or demographic research or a public health program if the local health office department pays the copying costs and if the birth of the registrant occurred within the boundaries of the political subdivision served by the local health office department or the registrant is a resident of such the political subdivision. The local health office department may not disclose any information from any copy which it receives under this paragraph to any person and shall destroy the copy no later than one year after receipt.

Section 120. 69.22 (4) of the statutes is amended to read:

69.22 (4) A local registrar in a registration district may set a reasonable fee to cover the costs of sending requests to city local health offices departments under s. 69.05 (3m).

Section 121. 74.53 (1) (c) of the statutes is amended to read:
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74.53 (1) (c) The cost of abating a public nuisance under s. 254.595 or 823.04 or 823.22 if the person owned the property when the public nuisance was abated.

SECTION 122. 76.02 (9) of the statutes is amended to read:

76.02 (9) "Telecommunications services" means the transmission of voice, video, facsimile or data messages, including telegraph messages, except that "telecommunications services" does not include cable television, radio, one–way radio paging or transmitting messages incidental to transient occupancy in hotels, as defined in s. 50.50 254.61 (3).

SECTION 123. 76.38 (1) (br) of the statutes is amended to read:

76.38 (1) (br) "Telecommunications services" means the transmissions of voice, video, facsimile or data messages, including telegraph messages. “Telecommunications services” does not include cable television, broadcast television, radio, one–way radio paging and the transmission of messages incidental to transient occupancy in hotels, as defined in s. 50.50 254.61 (3).

SECTION 124. 87.305 (1) (intro.) of the statutes is amended to read:

87.305 (1) DEPARTMENT APPROVAL. (intro.) Notwithstanding s. 87.30 or any rule promulgated, order issued or ordinance adopted under that section, the department shall authorize the connection of a sanitary sewer line from the sewerage treatment plant in the city of Prairie du Chien and connection of the public water supply of the city of Prairie du Chien to the railroad depot and the Dousman hotel on St. Feriole island and shall authorize historic use of the Dousman hotel as a hotel, as defined under s. 50.50 254.61 (3), if all of the following conditions are met:

SECTION 125. 94.705 (2) of the statutes is amended to read:

94.705 (2) CERTIFICATION STANDARDS. Notwithstanding s. 140.72 250.09, the department shall, by rule, adopt standards for the training and certification of private and commercial applicators, at least equal to but not to exceed federal standards adopted under the federal act. In the adoption of the standards, separate categories of pesticide use and application may be established for certification purposes depending on the specific types of pesticides used, the purposes for which they are used, types of equipment required in their application, the degree of knowledge and skill required and other factors which may warrant the creation of different categories. The standards shall provide that individuals to be certified must be competent with respect to the use and application of pesticides in the various categories of pesticide use and application for which certification is desired. For commercial applicators, competence in the use and handling of pesticides shall be determined on the basis of written examinations.

SECTION 126. 95.21 (1) (b) of the statutes is amended to read:

95.21 (1) (b) “Officer” means a peace officer, full–time local health officer, as defined in s. 250.01 (5), humane officer, warden, an employe designated by the department or other person designated by the governing body of the county, city, village or town.

SECTION 127. 95.21 (6) of the statutes is amended to read:

95.21 (6) DELIVERY OF CARCASS; PREPARATION; EXAMINATION BY LABORATORY OF HYGIENE. An officer who kills an animal shall deliver the carcass to a veterinarian or local health department, as defined in s. 250.01 (4). The veterinarian or local health department shall prepare the carcass, properly prepare and package the head of the animal in a manner to minimize deterioration, arrange for delivery by the most expeditious means feasible of the head of the animal to the state laboratory of hygiene and dispose of or arrange for the disposal of the remainder of the carcass in a manner which minimizes the risk of exposure to any rabies virus. The laboratory of hygiene shall examine the specimen and determine if the animal was infected with rabies. The state laboratory of hygiene shall notify the department, the veterinarian or local health department which prepared the carcass and, if the animal is suspected to have bitten a person, that person or that person’s physician.

SECTION 128. 95.21 (7) of the statutes is amended to read:

95.21 (7) COOPERATION OF VETERINARIAN. Any practicing veterinarian who is requested to be involved in the rabies control program by an officer is encouraged to cooperate in a professional capacity with the department, the laboratory of hygiene, the local health department, as defined in s. 250.01 (4), the officer involved and, if the animal is suspected to have bitten a person, the person’s physician.

SECTION 129. 95.50 (3) of the statutes is amended to read:

95.50 (3) Any dead animal found upon a public highway or other public place shall, in case the owner of such the animal cannot be found, be buried or otherwise disposed of at public expense by the proper health officer of the town, city or village wherein such local health department, as defined in s. 250.01 (4) (a) 1. or 3. or (b), in whose jurisdiction the animal is found. This subsection applies only if a county which does not exercise its authority under s. 59.07 (84).

SECTION 130. 97.20 (2) (e) 2. of the statutes is amended to read:

97.20 (2) (e) 2. The retail preparation and processing of meals for sale directly to consumers or through vending machines, if the preparation and processing is covered under a restaurant permit or other permit issued under s. 50.51 254.64.
shall coordinate the designation of jurisdictional area of the local health department for issuing licenses to and for the same local health department has a population greater than 5,000, which is incidentally engaged of agriculture, trade and consumer protection of health and social services to ensure that, to the extent feasible, the same village, city and county agencies are local health department under this section may be required by the department, the village, the city of agriculture, trade and consumer protection or the county local health department for the same operations. The department of agriculture, trade and consumer protection shall coordinate the designation of agents under this section with the department of health and social services to ensure that, to the extent feasible, the same village, city and county agencies are local health department granted agent status under this section and under s. 50.535 254.69 (2). Except as otherwise provided by the department of agriculture, trade and consumer protection, a village, city or county local health department granted agent status shall regulate all types of establishments for which this subsection permits the department of agriculture, trade and consumer protection to delegate regulatory authority. No village or city may be designated on or after August 1, 1987, as an agent under this subsection if the county in which the village or city is located is designated as an agent. If a county is designated before, on or after August 1, 1987, as an agent under this subsection, the designation only applies to those cities, villages and towns in the county which are not designated as an agent under this subsection.

SECTION 138. 97.41 (1) of the statutes is created to read:

97.41 (1) In this section:
(a) “Local board of health” has the meaning given in s. 250.01 (3).
(b) “Local health department” has the meaning given in s. 250.01 (4).

SECTION 139. 97.41 (2), (4) to (8) and (9) (a) and (c) of the statutes are amended to read:

97.41 (2) A village, city or county local health department granted agent status under this section shall meet standards adopted, by rule, by the department. The department shall annually evaluate the licensing, investigation and inspection program of each village, city or
A village, city or county local health department granted agent status. If, at any time, a village, city or county local health department granted agent status fails to meet the standards, the department may revoke its agent status.

(4) (a) Except as provided in par. (b), a village, city or county local health department granted agent status under this section shall establish and collect the license fee for retail food establishments, as defined in s. 97.30 (1) (c). The village, city or county local health department may establish separate fees for preinspections of new establishments, for preinspections of existing establishments for which a person intends to be the new operator or for the issuance of duplicate licenses. No fee may exceed the actual and reasonable costs of issuing licenses to, making investigations and inspections of, and providing education, training and technical assistance to the establishments, plus the state fee established under sub. (5). A village, city or county local health department which is granted agent status under this section or under s. 50.535 254.69 may issue a single license and establish and collect a single fee which authorizes the operation on the same premises of more than one type of establishment with respect to which it is granted agent status under this section or under s. 50.535 254.69 (2).

(b) A village, city or county local health department granted agent status under this section may contract with the department for the department to collect fees and issue licenses. The department shall collect from the village, city or county local health department the actual and reasonable cost of providing the services.

(5) The department shall establish state fees for its costs related to setting standards for retail food establishments, as defined in s. 97.30 (1) (c), setting standards for agents under this section and monitoring and evaluating the activities of, and providing education and training to, agent villages, cities and counties local health departments. Agent villages, cities and counties local health departments shall include the state fees in the license fees established under sub. (4) (a), collect the state fees and reimburse the department for the state fees collected. The state fee may not exceed 20% of the license fee charged under s. 97.30 (3) for a license issued by the department.

(6) If, under this section, a village, city or county local health department becomes an agent or its agent status is discontinued during a licensee’s license year, the department and the village, city or county local health department shall divide any license fee paid for that license year according to the proportions of the license year occurring before and after the village’s, city’s or county’s local health department’s agent status is granted or discontinued. No additional fee may be required during the license year due to the change in agent status.

(7) A village, city or county local board of health may adopt and impose regulations on licensees and premises for which it is the local health department is the designated agent under this section, which are stricter than this chapter or rules promulgated by the department under this chapter. No such regulation may conflict with this chapter or rules promulgated by the department.

(8) This section does not limit the authority of the department to inspect establishments in villages, cities and counties jurisdictional areas of local health departments where agent status is granted if it inspects in response to an emergency, for the purpose of monitoring and evaluating the village’s, city’s or county’s local health department’s licensing, inspection and enforcement program or at the request of the village, city or county local health department.

(9) (a) A permit fee established by a village, city or county local health department granted agent status exceeds the reasonable costs described under sub. (4) (a).

(c) That a license fee for a retail food establishment license issued by an agent city or county local health department under this section exceeds the reasonable costs of that agent city or county local health department for issuing the license, investigating and inspecting the establishment, and providing education, training and technical assistance to the establishment.

SECTION 140. 97.42 (3) (em) of the statutes is amended to read:

97.42 (3) (em) Slaughter of commercially raised deer. The requirements of pars. (a) and (b) do not apply to the slaughter of a commercially raised deer if its meat food products are not sold by a person holding a restaurant permit under s. 50.54 254.64 or by an operator of a retail food establishment, as defined under s. 97.30 (1) (c). The operator of an establishment in which commercially raised deer, their carcasses or their meat food products are examined and inspected under this subsection shall pay the department for the cost of the department’s examination and inspection.

SECTION 141. 101.01 (1) (f) of the statutes is amended to read:

101.01 (1) (f) “Local order” means any ordinance, order, rule or determination of any common council, board of aldermen, board of trustees or the village board, of any village or city, or a regulation or order of the local board of health of any municipality, as defined in s. 250.01 (3), or an order or direction of any official of such a municipality, upon any matter over which the department has jurisdiction.

SECTION 142. 101.02 (7) (a) of the statutes is amended to read:

101.02 (7) (a) Nothing contained in ss. 101.01 to 101.25 may be construed to deprive the common council, the board of aldermen, the board of trustees or the village board of any village or city, or the a local board of health of any municipality, as defined in s. 250.01 (3), of any power or jurisdiction over or relative to any place of employment or public building, provided that, whenever the department shall, by an order, fix a standard of
safety or any hygienic condition for employment or places of employment or public buildings. The order shall, upon the filing by the department of a copy thereof the order with the clerk of the village or city to which it may apply, be held to amend or modify any similar conflicting local order in any particular matters governed by said the order of the department.

Thereafter no local officer shall make or enforce any order contrary thereto the order of the department.

SECTION 143. 101.05 (2) of the statutes is amended to read:

101.05 (2) A bed and breakfast establishment, as defined under s. 50.50 254.61 (1), is not subject to rules on residential occupancy or to other building codes adopted by the department under this subchapter, except that the uniform dwelling code specified in s. 101.62 applies to the 3rd floor level of a bed and breakfast establishment that uses, other than as storage, the 3rd floor level of the bed and breakfast establishment structure.

SECTION 144. 101.123 (1) (b) of the statutes, as affected by 1991 Wisconsin Act 130, is amended to read:

101.123 (1) (b) “Inpatient health care facility” means a county home established under s. 49.14, a county infirmary established under s. 49.171, a community-based residential facility or a nursing home licensed under s. 50.03 or a tuberculosis sanatorium established under s. 58.06, or under s. 149.01 or 252.073 or 252.076.

SECTION 145. 101.123 (1) (f) of the statutes is amended to read:

101.123 (1) (f) “Restaurant” means an establishment defined in s. 50.50 254.61 (5) with a seating capacity of more than 50 persons.

SECTION 146. 101.124 of the statutes is amended to read:

101.124 Heated sidewalks prohibited. In this section, “exterior pedestrian traffic surface” means any sidewalk, ramp, stair, step, entrance way, plaza or pedestrian bridge not fully enclosed within a building and “heated” means heated by electricity or energy derived from the combustion of fossil fuels, but not including the use of waste thermal energy. “Exterior pedestrian traffic surface” does not include any means of ingress and egress by the physically disabled required under s. 101.13 (2). No person may construct a heated exterior pedestrian traffic surface. The department or any city, town or county is prohibited from approving any plan under s. 120.12 (16) which includes such heated surface. The department shall order any existing heated exterior pedestrian traffic surface in operation to be shut off. This section does not apply to any inpatient health care facility as defined in s. 50.135 (1), or community–based residential facility, as defined in s. 140.85 (1) (a) or 140.86 50.01 (1g).

SECTION 147. 101.128 (1) (c) and (e) of the statutes are amended to read:

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101.128 (1) (c) “Hotel” has the meaning given in s. 50.50 254.61 (3).

(e) “Restaurant” has the meaning given in s. 50.50 254.61 (5).

SECTION 148. 101.22 (1m) (n) 1. to 3. of the statutes are amended to read:

101.22 (1m) (n) 1. A bed and breakfast establishment, as defined in s. 50.50 254.61 (1).

2. A hotel, as defined in s. 50.50 254.61 (3).

3. A tourist rooming house, as defined in s. 50.50 254.61 (6).

SECTION 149. 103.15 (2) (intro.) of the statutes is amended to read:

103.15 (2) (intro.) Notwithstanding ss. 227.01 (9) (13) and 227.10 (1), unless the state epidemiologist determines and the secretary of health and social services declares under s. 140.05 250.04 (1) or (2) (a) that individuals who have HIV infections may, through employment, provide a significant risk of transmitting HIV to other individuals, no employer or agent of an employer may directly or indirectly:

SECTION 150. 115.01 (10) (a) 2. of the statutes is amended to read:

115.01 (10) (a) 2. Days on which school is closed by order of a local health officer, as defined in s. 250.01 (5).

SECTION 151. 115.28 (16) of the statutes is amended to read:

115.28 (16) Algebra and other drug abuse prevention plan. Cooperate with the department of health and social services in the preparation of a joint alcohol and other drug abuse prevention, intervention, treatment and rehabilitation plan under s. 140.84 46.974.

SECTION 152. 118.125 (2) (b) of the statutes is amended to read:

118.125 (2) (b) Information from a pupil’s immunization records shall be made available to state and local health officials in the department of health and social services to carry out the purposes of s. 140.05 115.01 (10) of the statutes.

SECTION 153. 118.125 (2m) (b) of the statutes is amended to read:

118.125 (2m) (b) Any pupil record that concerns the results of a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV shall be treated as provided under s. 116.025 252.15. In this subsection, “HIV” means human immunodeficiency virus has the meaning given in s. 252.01 (1).

SECTION 154. 118.25 (3) of the statutes is amended to read:

118.25 (3) In counties having a population of less than 500,000, the school board may require periodic health examinations of pupils by physicians, under the supervision of local boards of health departments and the department of health and social services, and may pay the cost of such the examinations out of school district funds.

SECTION 155. 120.12 (16) (a) of the statutes is amended to read:
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120.12 (16) (a) In cooperation with local public health agencies and officials specified in ss. 140.09, 141.01, 141.015, 141.02, and 141.04 departments, as defined in s. 250.01 (4), develop and implement a plan to encourage compliance with par. (b) and s. 440.05 (16) (b) 252.04 (2) and submit the plan to the department of health and social services by September 1, 1991, and annually thereafter.

Section 156. 120.12 (16) (b) of the statutes is amended to read:

120.12 (16) (b) Require each student to present evidence of completed basic and recall (booster) series immunizations unless the student, if an adult, or the parent, guardian or legal custodian of a minor student submits a written waiver to the school board under s. 140.05 (16) (c) 252.04 (3).

Section 157. 120.13 (11) of the statutes is amended to read:

120.13 (11) Nurses and dentists. (a) In counties having a population of less than 500,000, employ public health nurses, registered nurses, school nurses and licensed dentists, who shall be under the supervision of the local board of health, as defined in s. 250.01 (3), and the department of health and social services, registered nurses and school nurses.

(b) In counties having a population of 500,000 or more, employ qualified public health nurses, school nurses, registered nurses and licensed dentists who shall cooperate with the local board of health, as defined in s. 250.01 (3), and the department of health and social services.

Section 158. 125.02 (7) of the statutes is amended to read:

125.02 (7) "Hotel" means a hotel as defined in s. 50.50 254.61 (3), that is provided with a restaurant.

Section 159. 125.02 (18) of the statutes is amended to read:

125.02 (18) "Restaurant" means a restaurant as defined in s. 50.50 254.61 (5).

Section 160. 125.68 (5) of the statutes is amended to read:

125.68 (5) RESTAURANT SANITATION RULES. No applicant may obtain a “Class B” license or permit or a “Class C” license unless the premises complies with the rules promulgated by the department of health and social services governing sanitation in restaurants. However, the department of health and social services may not restrict the serving of cheese without charge in individual portions to customers as permitted by s. 50.50 254.61 (5).

Section 161. Chapter 140 (title) of the statutes is repealed.

Section 162. 140.01 (intro.), (1) and (2) of the statutes are renumbered 250.01 (intro.), (2) and (8), and 250.01 (intro.), as renumbered, is amended to read:

250.01 Definitions. (intro.) As used in chs. 140 250 to 143 255, unless the context requires otherwise:

Section 163. 140.02 of the statutes is renumbered 250.02 (1) and amended to read:

250.02 (1) STATE HEALTH OFFICER. DUTIES. The secretary shall appoint a state health officer in the unclassified service and may assign the state health officer such duties of the secretary or department as the secretary provides.

The state health officer may appoint such advisory and examining bodies as are needed to carry out the duties of the state health officer and as provided by law. The state health officer shall appoint state epidemiologists for program areas of acute and communicable diseases, occupational and environmental diseases, maternal and child health and chronic diseases. Individuals appointed as state epidemiologists shall have advanced training and expertise in epidemiology in their program areas.

Section 164. 140.03 (title) of the statutes is renumbered 250.08 (title).

Section 165. 140.03 (1) (intro.) and (b) (intro.) of the statutes are consolidated, renumbered 250.08 (1) (intro.) and amended to read:

250.08 (1) (title) DEFINITION. (intro.) In this section:

(b) “Primary, primary health care services” means all of the following:

Section 166. 140.03 (1) (b) 1. and 2. of the statutes are renumbered 250.08 (1) (a) and (b) and amended to read:

250.08 (1) (a) Services of a physician, as defined in s. 448.01 (5) and, if feasible, services of a physician’s assistant, as defined in s. 448.01 (6), a nurse practitioner, as defined in s. 632.895 (8) (a) 3., or a public health nurse under s. 141.05 250.06.

(b) Diagnostic laboratory and radiologic services, if the public local health agency department provides laboratory and radiologic services.

Section 167. 140.03 (1) (b) 3. to 5. of the statutes are renumbered 250.08 (1) (c) to (e).

Section 168. 140.03 (1) (c) of the statutes is repealed.

Section 169. 140.03 (3) and (5) of the statutes are renumbered 250.08 (3) and (5) and amended to read:

250.08 (3) PRIMARY HEALTH CARE SERVICES GRANTS. From the appropriation under s. 20.435 (1) (cp), the department shall allocate award up to $750,000 in each fiscal year as grants to applying public local health agency departments. Grants under this subsection shall be awarded, under procedures and criteria developed by the department, for the provision, primarily by nurse practitioners who meet the qualifications for certification as medical assistance providers by the department and by public health nurses, of primary health care services in, among other places, maternal and child health clinics and community health settings. Award of a grant to a public local health agency department under this subsection is conditioned upon receipt by the department of an agreement by the county, city, town or village that has established the public local health agency department to pro-
vide funds or in-kind services to match 25% of the amount of a grant awarded.

(5) MAINTENANCE-OF-EFFORT REQUIREMENTS. Funds allocated under this section sub. (3) may not be used to provide payment for administration of a public local health agency department and may not be used to supplant any of the following, as of May 11, 1990:

(a) Any funds otherwise available to a public local health agency department.

(b) Any services provided by a public local health agency department under otherwise available funds.

(c) Any services provided by a public local health agency department on behalf of another public local health agency department.

SECTION 170. 140.05 (title) of the statutes is renumbered 250.04 (title) and amended to read:

250.04 (title) Powers and duties of the department.

SECTION 171. 140.05 (1) of the statutes is renumbered 250.04 (1) and amended to read:

250.04 (1) The department shall have has general supervision throughout the state of the health and life of citizens, and shall study especially the vital statistics of the state and endeavor to put the same to profitable use. It shall make sanitary investigations into the causes of disease, especially epidemics, the causes of mortality, and the effect on health of localities, employments, conditions, habits and circumstances, and make sanitary inspections and surveys in all parts of the state. It use the analysis of the vital statistics for health planning. The department shall have has power to execute what is reasonable and necessary for the prevention and suppression of disease. It shall voluntarily advise public boards or officers in regard to heating and ventilation of any public building or institution. The department may investigate the cause and circumstances of any special or unusual disease or mortality; inspect any public building; and shall have full authority to may do any act necessary therefore for the investigation.

(2) (a) The department shall possess all powers necessary to fulfill the duties prescribed in the statutes and to bring action in the courts for the enforcement of public health laws, statutes and health rules.

SECTION 172. 140.05 (2) of the statutes is repealed.

SECTION 173. 140.05 (3) of the statutes is renumbered 250.04 (7) and amended to read:

250.04 (7) The department shall have power to make may promulgate and enforce such rules, regulations and orders governing the duties of all local health officers and health local boards, of health and relating to any subject matter under its the department’s supervision, as shall be that are necessary to provide efficient administration and to protect health, and any person violating such. Whoever violates a rule, regulation or order specified under this subsection shall be fined not less than $10 nor more than $100 for each offense, unless a different penalty is provided.

SECTION 174. 140.05 (4) of the statutes is renumbered 250.04 (8) and amended to read:

250.04 (8) The department may administer oaths, certify to official acts, issue subpoenas and compel the attendance of witnesses, and the production of papers, books, documents and testimony. Witness fees and mileage shall be paid by the state and charged to the appropriation for the department under s. 20.435 (1) (a), but no witness subpoenaed at the instance of parties other than the department shall be is entitled to payment of fees or mileage from the state, unless the department certifies that his or her testimony was material.

SECTION 175. 140.05 (5) of the statutes is repealed.

SECTION 176. 140.05 (9) of the statutes is renumbered 250.04 (9) and amended to read:

250.04 (9) The department may establish, equip and operate a state branch laboratory of hygiene in a city accessible to physicians and local health officers in the northern part of the state for the conducting of to conduct bacteriological and chemical examinations of material from the various contagious and infectious diseases or material from suspected contagious and infectious diseases of persons and animals when public health is concerned. on condition that if suitable quarters for such the laboratory shall be are offered to the state free of charge for rent, light, heat and janitor service. The department may also establish and aid in maintaining in conjunction with the cities of the state not more than 7 state cooperative laboratories. All such of the cooperative laboratories shall be operated in such the manner and under such the conditions as that the department may determine establishes in its rules and regulations governing the state public health laboratories that the department may promulgate.

SECTION 177. 140.05 (12) of the statutes is repealed.

SECTION 178. 140.05 (14) of the statutes is renumbered 250.04 (3) (b) 3. and amended to read:

250.04 (3) (b) 3. The department may conduct investigations, studies, experiments and research pertaining to any public health problems which are a cause or potential cause of morbidity or mortality and methods for the prevention or amelioration of those public health problems. For the conduct of the investigations, studies, experiments and research, the department may on behalf of the state accept funds from any public or private agency, organization or person. It may conduct the investigations, studies, experiments and research independently or by contract or in cooperation with any public or private agency, organization or person including any political subdivision of the state. Individual questionnaires or surveys shall be treated as confidential patient health care records under ss. 146.81 to 146.835.

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Underscored, stricken, and vetoed text may not be searchable.
but the information in those questionnaires and surveys may be released in statistical summaries.

**Section 179.** 140.05 (14m) of the statutes is renumbered 250.04 (3) (b) 4. and amended to read:

250.04 (3) (b) 4. The department may use hospital emergency room and inpatient health care records, abstracts of these records and information the state or federal government collects to correlate exposure to certain occupational and high risk environments with resulting acute or chronic health problems. If the department finds that an occupational health hazard exists, it shall disseminate its findings and promote efforts to educate employees and employers about the health hazard.

**Section 180.** 140.05 (15) of the statutes is renumbered 250.04 (5) and amended to read:

250.04 (5) Where the use of any pesticide results in a threat to the public health, the department of health and social services shall take all measures necessary to prevent morbidity or mortality.

**Section 181.** 140.05 (16) (a), (b), (c), (cm), (d), (dm), (e), (f), (fm), (g) and (h) of the statutes are renumbered 252.04 (1) to (11), and 252.04 (1) to (3) and (5) to (11), as renumbered, are amended to read:

252.04 (1) The department shall carry out a statewide immunization program to eliminate mumps, measles, rubella (German measles), diphtheria, pertussis (whooping cough) and, poliomyelitis and other diseases that the department specifies by rule, and to protect against tetanus. Any person who immunizes a student an individual under this subsection section shall maintain records identifying the manufacturer and lot number of the vaccine used, the date of immunization and the name and title of the person who immunized the student individual. These records shall be available to the student individual or the student’s, if the individual is a minor, to his or her parent, guardian or legal custodian upon request.

(2) Any student admitted to any elementary, middle, junior or senior high school or into any day care center or nursery school shall, within 30 school days, present written evidence to the school, day care center or nursery school of having completed the first immunization for each vaccine required for the student’s grade and being on schedule for the remainder of the basic and recall (booster) immunization series for the diseases identified in par. (a) mumps, measles, rubella (German measles), diphtheria, pertussis (whooping cough), poliomyelitis, tetanus and other diseases that the department specifies by rule or shall present a written waiver under par. (c) sub. (3).

(3) The immunization requirement is waived if the student, if an adult, or the student’s parent, guardian or legal custodian submits a written statement to the school, day care center or nursery school objecting to the immunization for reasons of health, religion or personal conviction. At the time any school, day care center or nursery school notifies a student, parent, guardian or legal custodian of the immunization requirements, it shall inform the person in writing of the person’s right to a waiver under this paragraph subsection.

(5) (a) By the 15th and the 25th school day after the student is admitted to a school, day care center or nursery school, the school, day care center or nursery school shall notify in writing any adult student or the parent, guardian or legal custodian of any minor student who has not met the immunization or waiver requirements of this subsection section. The notices shall cite the terms of those requirements and shall state that court action and forfeiture penalty could result due to noncompliance. The notices shall also explain the reasons for the immunization requirements and include information on how and where to obtain the required immunizations.

(b) 1. A school, day care center or nursery school may exclude from the school, day care center or nursery school any student who fails to satisfy the requirements of par. (b) sub. (2).

2. Beginning on July 1, 1993, if the department determines that fewer than 98% of the students in a day care center, nursery school or school district who are subject to the requirements of par. (b) sub. (2) have complied with par. (b) sub. (2), the day care center or nursery school shall exclude any child who fails to satisfy the requirements of par. (b) sub. (2) and the school district shall exclude any student enrolled in grades kindergarten to 6 who fails to satisfy the requirements of par. (b) sub. (2).

3. Beginning on July 1, 1995, if the department determines that fewer than 99% of the students in a day care center, nursery school or school district who are subject to the requirements of par. (b) sub. (2) have complied with par. (b) sub. (2), the day care center or nursery school shall exclude any child who fails to satisfy the requirements of par. (b) sub. (2) and the school district shall exclude any student enrolled in grades kindergarten to 6 who fails to satisfy the requirements of par. (b) sub. (2).

4. No student may be excluded from public school under this subdivision paragraph for more than 10 consecutive school days unless, prior to the 11th consecutive school day of exclusion, the school board provides the student and the student’s parent, guardian or legal custodian with an additional notice, a hearing and the opportunity to appeal the exclusion, as provided under s. 120.13 (1) (c).

6. The school, day care center or nursery school shall notify the district attorney of the county in which the student resides of any minor student who fails to present written evidence of completed immunizations or a written waiver under par. (c) sub. (3) within 60 school days after being admitted to the school, day care center or nursery school. The district attorney shall petition the court exercising jurisdiction under ch. 48 for an order directing that the student be in compliance with the requirements of this subsection section. If the court grants the petition, the court may specify the date by
which a written waiver shall be submitted under par. (c) sub. (3) or may specify the terms of the immunization schedule. The court may require an adult student or the parent, guardian or legal custodian of a minor student who refuses to submit a written waiver by the specified date or meet the terms of the immunization schedule to forfeit not more than $25 per day of violation.

(7) If an emergency arises, consisting of a substantial outbreak as determined by the department by rule of one of the diseases listed under par. (a) specified in sub. (2) at a school or in the municipality in which the school is located, the department may order the school to exclude students who are not immunized until the outbreak subsides.

(8) The department shall provide the vaccines without charge, if federal or state funds are available for the vaccines, upon request of the governing body of a county, city, village or town of the school board district or a local health department. The department shall provide the necessary professional consultant services to carry out an immunization program, under the requirements of par. (fm) sub. (9) in the requesting county, municipality or school district jurisdiction of the requesting local health department. Persons immunized may not be charged for vaccines furnished by the department.

(9) (a) An immunization program under par. (f) sub. (8) shall be supervised by a physician, as defined in s. 448.01 (5), selected by the county, city, village or town or school board district or local health department. The department shall issue written orders for the administration of immunizations that are in accordance with written protocols issued by the department.

(b) If the physician under sub. (a) par. (a) is not an employe of the county, city, village or school district, receives no compensation for his or her services under sub. (a) par. (a) and acts under sub. (a) par. (a) in accordance with written protocols issued by the department, he or she is a state agent of the department for the purposes of ss. 165.25 (6), 893.82 (3) and 895.46.

(c) The department may disapprove the selection made under subd. 1 par. (a) or may require the removal of a physician under subd. 2 selected.

(10) The department shall, by rule, prescribe the mechanisms for implementing and monitoring compliance with this subsection. The department shall prescribe, by rule, the form that any person immunizing a student shall provide to the student under par. (a) sub. (1).

(11) Annually, by July 1, 1991, 1992, 1993 and 1994, the department shall submit a report to the chief clerk of each house of the legislature, for distribution to the appropriate standing committees under s. 13.172 (3), on the success of the statewide immunization program under this subsection.

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SECTION 182. 140.05 (17) of the statutes is renumbered 254.47, and 254.47 (1), (3), (4) (intro.) and (b) (intro.) and (5), as renumbered, are amended to read:

254.47 (1) The department of a village, city or county local health department granted agent status under s. 50.535 254.69 (2) shall issue permits to and regulate camps and swimming pools, recreational and educational camps and public swimming pools. No person, or state or local government who has not been issued a permit under this subsection may conduct, maintain, manage or operate a campground and camping resort, recreational camp and educational camp or public swimming pool, as defined by departmental rule.

(3) Anyone who violates this subsection or any rule of the department under this subsection shall be fined not less than $25 nor more than $250. Anyone who fails to comply with an order of the department shall forfeit $10 for each day of noncompliance after the order is served upon or directed to him or her. The department may also, after a hearing under ch. 227, refuse to issue a permit or suspend or revoke a permit for violation of this subsection or any rule or order the department issues to implement this subsection.

(4) (intro.) Permits issued under this subsection expire on June 30, except that permits initially issued during the period beginning on April 1 and ending on June 30 expire on June 30 of the following year. Except as provided in s. 50.535 254.69 (2) (d) and (e):

(b) (intro.) The annual nonreturnable and nonprorated permit fees under this subsection are as follows: [See Figure 140.05 (17) (d) 2 254.47 (4) (b) following]

(5) No permit may be issued under this subsection until all applicable fees have been paid. If the payment is by check or other draft drawn upon an account containing insufficient funds, the permit applicant shall, within 15 days after receipt of notice from the department of the insufficient pay, pay by cashier’s check or other certified draft, money order or cash the fees from the department, late fees and processing charges that are specified by rules promulgated by the department. If the permit applicant fails to pay all applicable fees, late fees and the processing charges within 15 days after the applicant receives notice of the insufficient, the permit is void. In an appeal concerning voiding of a permit under this paragraph, the burden is on the permit applicant to show that the entire applicable fees, late fees and processing charges have been paid. During any appeal process concerning payment dispute, operation of the establishment in question is deemed to be operation without a permit.

SECTION 183. 140.05 (18) of the statutes is renumbered 250.04 (11).
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SECTION 184. 140.051 of the statutes is renumbered 254.48.
SECTION 185. 140.053 of the statutes is renumbered 250.045.
SECTION 186. 140.055 (title) and (3) of the statutes are repealed.
SECTION 187. 140.055 (1) and (2) of the statutes are consolidated, renumbered 250.04 (10) and amended to read:

250.04 (10) The department shall may investigate and supervise the sanitary conditions of all the charitable, curative, reformatory and penal institutions of every county and other municipality, all detention homes for children and all industrial schools, and the hospitals, asylums and institutions, that are organized for the purposes set forth in s. 58.01. (2) The department shall annually and oftener, if necessary, and whenever required by the governor, may visit the jails, municipal prisons, houses of correction and all other places in which persons convicted or suspected of crime or insane mentally ill persons are confined and ascertain the sanitary conditions thereof of those places.

SECTION 188. 140.06 (title) of the statutes is renumbered 254.20 (title).
SECTION 189. 140.06 (1) (intro.) of the statutes is repealed.
SECTION 190. 140.06 (1) (a) to (d) of the statutes are renumbered 254.11 (1) to (4).
SECTION 191. 140.06 (1) (e) of the statutes is renumbered 254.11 (6).
SECTION 192. 140.06 (1) (f) and (g) of the statutes are renumbered 254.11 (11) and (12).
SECTION 193. 140.06 (2) to (11) of the statutes are renumbered 254.20 (2) to (11).
SECTION 194. 140.08 of the statutes is repealed.
SECTION 195. 140.09 (title) of the statutes is repealed.
SECTION 196. 140.09 (1) (intro.) of the statutes is renumbered 251.01 (intro.) and amended to read:

251.01 Definitions. (intro.) As used in this section chapter:
SECTION 197. 140.09 (1) (a) and (b) of the statutes are renumbered 251.01 (2) and (3) and amended to read:

251.01 (2) “County health department” and “county board of health” refer to means a local health department that is a single county health department or board of health, a multiple county health department or board of health, or a city–county health department or board of health.

(3) “County health officer” refers to means the position of a local health officer either in a county health department, multiple county health department or city–county health department.

SECTION 198. 140.09 (1) (c) of the statutes is repealed.
SECTION 199. 140.09 (2) of the statutes is repealed.

SECTION 200. 140.09 (3) of the statutes is repealed.
SECTION 201. 140.09 (4) (title) of the statutes is repealed.
SECTION 202. 140.09 (4) (a) of the statutes is repealed.
SECTION 203. 140.09 (4) (b) 1. of the statutes is renumbered 251.06 (4) (b) and amended to read:

251.06 (4) (b) In any county with a county executive or a county administrator which has a single county health department, the county executive or county administrator shall appoint and supervise the county health officer. The appointment is subject to confirmation by the county board unless the county board, by ordinance, elects to waive confirmation or unless the appointment is made under a civil service system competitive examination procedure established under s. 59.07 (20) or ch. 63. Such the county health officer appointed under this paragraph is subject only to the supervision of the county executive or the county administrator. In a county with such a county health officer, the local board of health shall be only a policy–making body determining the broad outlines and principles governing the administration of the county health department.
SECTION 204. 140.09 (4) (b) 2. of the statutes is repealed.
SECTION 205. 140.09 (5) of the statutes is repealed.
SECTION 206. 140.09 (6) (title) of the statutes is repealed.
SECTION 207. 140.09 (6) of the statutes is renumbered 251.11 (2) and amended to read:

251.11 (2) The county board of health when established in any county shall have all the powers and authority now vested in local boards of health and local health officers and shall have authority to enforce such rules and regulations as may be adopted by the department under the laws of the state. It may adopt such rules for its own guidance and for the government of the health department as may be deemed necessary to protect and improve public health, not inconsistent with state law nor with rules and regulations of the department. The county board of supervisors shall determine compensation of county health department employees and the local board of health of every multiple county health department established under s. 251.02 (3) and of every city–county health department established under s. 251.02 (1) shall, under this section, determine the salaries compensation for the employees of multiple county health departments and city–county health departments.
SECTION 208. 140.09 (7) (title) of the statutes is repealed.
SECTION 209. 140.09 (7) of the statutes is renumbered 251.06 (3) (h) and amended to read:

251.06 (3) (h) The county health officer shall have charge of the county local health department of health and perform the duties prescribed by the county local board of health. He shall enforce this section and
The local health officer and villages have no part of any expense incurred under this section. The local health officer shall submit to the board of health, county board of supervisors and city council an annual report of the administration of his the local health department to the local board of health.

SECTION 210. 140.09 (8) of the statutes is repealed.

SECTION 211. 140.09 (9) of the statutes is renumbered 251.135 and amended to read:

251.135 (title) Publication and effective date of orders and regulations. The orders and regulations of the county a local board of health shall be published as a class 1 notice, under ch. 985, and shall take effect immediately after publication. No local board of health is required to use the term “regulation” to refer to a regulation that is published under this section.

SECTION 212. 140.09 (10) of the statutes is repealed.

SECTION 213. 140.09 (11) of the statutes is renumbered 251.08 and amended to read:

251.08 (title) Jurisdiction of local health department. The jurisdiction of the county local health department of health shall extend to all towns, villages and cities within the county, other than those having a full-time health department. Towns, cities, the entire area represented by the governing body of the county, city, village or town that established the local health department, except that the jurisdiction of a county health department does not extend to cities, villages and towns that have local health departments. Cities, towns and villages having full-time local health departments may by vote of their governing bodies local boards of health determine to come under such the jurisdiction of the county health department. No part of any expense incurred under this subsection shall by section by a county health department may be levied against any property within any city, village or town which has a full-time that has a local health department and which has not determined to come under the jurisdiction of the county health department.

SECTION 214. 140.09 (12) of the statutes is repealed.

SECTION 215. 140.09 (13) of the statutes is renumbered 251.14 and amended to read:

251.14 (title) Gifts. The county a local board of health may receive gifts and donations for the purpose of carrying out the provisions of this section chapter.

SECTION 216. 140.09 (14) of the statutes is renumbered 251.11 (title) and amended to read:

251.11 (title) City–county health department and multiple county health department, how financed.

SECTION 217. 140.09 (14) of the statutes is renumbered 251.11 (1) and amended to read:

251.11 (1) The local board of health of every multiple county health department established under s. 251.02 (3) and of every city–county health department created established under this section s. 251.02 (1) shall annually prepare a budget of its proposed expenditures for the ensuing fiscal year and determine the proportionate cost to each participating county and city on the basis of equalized valuation. A certified copy of such the budget, which shall include a statement of the amount required from each county and city, shall be delivered to the county board of each participating county and to the mayor or city manager of each participating city. The appropriation to be made by each participating county and municipality city shall be determined by the governing body thereof of the county and city. No part of the cost apportioned to the county shall be levied against any property within such the city.

SECTION 218. 140.09 (15) of the statutes is renumbered 251.13 and amended to read:

251.13 (title) City–county health department and multiple county health department, joint funds. In the treasurer’s office of the county wherein is located the principal office of For each multiple county or city–county health department, or in the office of the city treasurer of a participating city, as determined by the board of health, there shall be created a joint health department fund shall be created either in the treasurer’s office where the principal office of the health department is located or in the office of the city treasurer of a city within the health department’s jurisdiction, as determined by the local board of health. The treasurer of each county and city participating in such the health department shall annually pay or cause to be paid into said the fund the share of such the county or city. This fund shall be expended by the treasurer in whose office said the fund is kept in the manner prescribed by the county local board of health pursuant to properly authenticated vouchers of such the health department signed by the county local health officer.

SECTION 219. 140.09 (16) of the statutes is repealed.

SECTION 220. 140.09 (17) of the statutes is renumbered 251.15 and amended to read:

251.15 Withdrawal of counties and cities. (1) After establishment of establishing a multiple county health department under s. 251.02 (3), any participating county board may withdraw by giving written notice to its county board of health and the county board of supervisors boards of all other participating counties. Such notice shall be given at least one year prior to commencement of the fiscal year at which it takes effect. Cities having full-time

(2) A city that had established a local health department prior to their decision deciding to participate in a city–county health department established under s. 251.02 (1) may withdraw therefrom in the same manner from the city–county health department if the common council of the city gives written notice to the county board of the participating county. The notice under sub. (1) or (2) shall be given at least one year prior to commencement of the fiscal year at which the withdrawal takes effect. Whenever the withdrawal
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The withdrawal of any county or city shall withdraw from any a city–county or multiple county health department established under this section takes effect, all provisions of law relating to local boards of health and local health officers shall immediately become applicable within such the county or city.

Section 221. 140.10 of the statutes is renumbered 251.16 and amended to read:

251.16 Local health department; evidence. The reports and employees of a city, county, city–county or multicounty, local health department are subject to s. 970.03 (12) (b).

Section 222. 140.42 of the statutes is renumbered 253.09.

Section 223. 140.45 of the statutes is renumbered 250.05, and 250.05 (1) (intro.) and (a) and (3), as renumbered, are amended to read:

250.05 (1) Definitions. (intro.) When used in this section:

(a) “Municipality” means a county, city, or village or town.

(3) Sanitarians; employment or contractual services. Any pertinent agency of the state or any municipality may employ or contract for the services of sanitarians, registered under this section, who shall enforce the public health statutes or rules or, if employed or contracted by a municipality, ordinances, concerning environmental factors affecting human health, safety and welfare.

Section 224. 140.50 of the statutes is repealed.

Section 225. 140.51 of the statutes is renumbered 254.33.

Section 226. 140.52 (intro.) of the statutes is repealed.

Section 227. 140.52 (3) to (12) of the statutes are renumbered 254.31 (3) to (12).

Section 228. 140.53 of the statutes is renumbered 254.34, and 254.34 (1) (b), (e), (g) and (h) 3. and 4. (2) (b) and (4), as renumbered, are amended to read:

254.34 (1) (b) Administer ss. 140.50 to 140.60 this subchapter and the rules promulgated thereunder under this subchapter.

(e) Encourage, participate in or conduct studies, investigations, training, research and demonstrations relating to the control of radiation hazards, the measurement of radiation, the effects on health of exposure to radiation and related problems as it deems necessary or advisable for the discharge of its duties under ss. 140.50 to 140.60 this subchapter.

(g) Review and approve plans and specifications for radiation sources submitted pursuant to rules promulgated under ss. 140.50 to 140.60 this subchapter; and inspect radiation sources, their shielding and immediate surroundings and records concerning their operation for the determination of any possible radiation hazard.

(h) 3. Work with staff of county, city–county or multiple county, health departments, county health committees or commissions or city, village or town boards of health under ch. 141; local health departments, building contractors and others in radon diagnosis and mitigation methods.

(2) (b) Accept and utilize grants or other funds or gifts from the federal government and from other sources, public or private, for carrying out its functions under ss. 140.50 to 140.60. Such this subchapter. The studies, investigations, training and demonstration may be conducted independently, by contract, or in cooperation with any person or any public or private agency, including any political subdivision of the state.

(4) The department shall develop standards of performance for the regional radon centers in Marathon and Waukesha counties and, from the appropriation under s. 20.435 (1) (ed), the department shall allocate funds based on compliance with the standards to provide radon protection information dissemination from the regional radon centers.

Section 229. 140.54 of the statutes is renumbered 254.35, and 254.35 (3) (d), as renumbered, is amended to read:

254.35 (3) (d) Before January 1, 1986, for each a dental site having an ionizing radiation installation, the fee shall be at least $25 for each site and at least $15 $20 for each X–ray tube. X–ray tube fees due on and after January 1, 1986, shall be at least $20.

Section 230. 140.56 of the statutes is renumbered 254.36, and 254.36 (1), as renumbered, is amended to read:

254.36 (1) The radiation protection council shall provide the department with technical advice and assistance in the administration of ss. 140.50 to 140.60 this subchapter and in the development of rules.

Section 231. 140.58 of the statutes is renumbered 254.37, and 254.37 (1), (2) and (4), as renumbered, are amended to read:

254.37 (1) Notification of violation and order of abatement. Whenever the department or the department of industry, labor and human relations finds, upon inspection and examination, that a source of radiation as constructed, operated or maintained results in a violation of ss. 140.50 to 140.60 this subchapter or of any rules promulgated thereunder under this subchapter, it shall notify the person in control that is causing, allowing or permitting such the violation as to the nature thereof of the
violation and order that, prior to a specified time such the person in control shall cease and abate causing, allowing or permitting such the violation and take such action as may be necessary to have the source of radiation constructed, operated, or maintained in compliance with ss. 140.50 to 140.60 this subchapter and rules promulgated thereunder under this subchapter.

(2) ORDERS. The department or the department of industry, labor and human relations shall issue and enforce such orders or modifications of previously issued orders as may be required in connection with proceedings under ss. 140.50 to 140.60. Such this subchapter. The orders shall be subject to review by the department upon petition of the persons affected. Whenever the department or the department of industry, labor and human relations finds that a condition exists which constitutes an immediate threat to health due to violation of ss. 140.50 to 140.60 this subchapter or any rule or order promulgated thereunder under this subchapter, it may issue an order reciting the existence of such the threat and the findings pertaining thereto to the threat. The department or the department of industry, labor and human relations may summarily cause the abatement of such the violation.

(4) ENFORCEMENT. All orders issued pursuant to ss. 140.50 to 140.60 under this subchapter shall be enforced by the attorney general. The circuit court of Dane county shall have jurisdiction to enforce such the orders by injunctive and other appropriate relief.

SECTION 232. 140.59 of the statutes is renumbered 254.38 and amended to read:

254.38 Impounding materials. The department or the department of industry, labor and human relations may impound or order the sequestration of sources of radiation in the possession of any person who is not equipped to observe or who fails to observe such safety standards to protect health as may have been that are established by rule in rules promulgated by the department or the department of industry, labor and human relations.

SECTION 233. 140.595 of the statutes is renumbered 254.39 and amended to read:

254.39 Exceptions. (1) Nothing in ss. 140.50 to 140.60 shall this subchapter may be interpreted as limiting intentional exposure of persons to radiation for the purpose of analysis, diagnosis, therapy, and medical, chiropractic or dental research as authorized by law.

(2) Sections 140.50 to 140.60 do This subchapter does not apply to on-site activities of any nuclear reactor plant licensed by the nuclear regulatory commission.

SECTION 234. 140.60 of the statutes is renumbered 254.45 and amended to read:

254.45 Penalties. Any person who violates any provision of ss. 140.50 to 140.60 this subchapter or any rule or order of the department, or of the department of industry, labor and human relations, issued pursuant thereto under this subchapter shall forfeit and pay into the state treasury not less than $10 nor more than $500. Each day of continued violation after notice of the fact that a violation is being committed shall be considered a separate offense. Should If the injury or death of an employee ensue due to a failure of an employer to observe or enforce any rule issued under ss. 140.50 to 140.60 this subchapter, compensation and death benefits shall be increased by 15 percent as provided in s. 102.57.

SECTION 235. 140.61 of the statutes is renumbered 254.41.

SECTION 236. 140.65 of the statutes is repealed.

SECTION 237. 140.66 of the statutes is renumbered 150.96, and 150.96 (intro.), as renumbered, is amended to read:

150.96 Definitions. (intro.) As used in ss. 140.65 to 140.76 in this subchapter, unless the context requires otherwise:

SECTION 238. 140.67 of the statutes is renumbered 150.963, and 150.963 (3) (intro.), (d) and (e), as renumbered, are amended to read:

150.963 (3) (intro.) The department, in carrying out the purposes of ss. 140.65 to 140.76 this subchapter, may:

(d) To the extent that it considers desirable to effectuate the purposes of ss. 140.65 to 140.76 this subchapter, enter into agreements for the utilization of facilities and services of other departments, agencies and institutions, public or private;

(e) Accept on behalf of the state and deposit with the state treasurer any grant, gift or contribution made to assist in meeting the cost of carrying out the purposes of ss. 140.65 to 140.76 this subchapter, and to expend the same funds for such the purposes of this subchapter:

SECTION 239. 140.69 of the statutes is renumbered 150.965.

SECTION 240. 140.70 of the statutes is renumbered 150.967 and amended to read:

150.967 State plans. The department shall prepare and submit to the secretary, state plans which shall include the programs for construction of facilities developed under ss. 140.65 to 140.76 this subchapter and which shall provide for the establishment, administration and operation of such the construction activities in accordance with the requirements of the federal act and regulations thereunder under the federal act. The department shall from time to time, but not less often than annually, review the state plans and submit to the secretary any modifications thereof of the state plans which it considers necessary and may submit to the secretary such modifications of the state plan not inconsistent with the requirements of the federal act, as it deems advisable.

SECTION 241. 140.71 of the statutes is renumbered 150.97.

SECTION 242. 140.72 of the statutes is renumbered 150.973.
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**SECTION 243.** 140.73 of the statutes is renumbered 150.975.

**SECTION 244.** 140.74 of the statutes is renumbered 150.977 and amended to read:

**150.977 Hearing; forwarding of applications.** The department shall afford to every applicant for a construction project an opportunity for a fair hearing. If the department, after affording reasonable opportunity for development and submission of applications, finds that a project application complies with the requirements of ss. 140.65 to 140.76 this subchapter and is otherwise in conformity with the state plan, it shall approve such the application and shall recommend and forward it to the secretary.

**SECTION 245.** 140.75 of the statutes is renumbered 150.98.

**SECTION 246.** 140.76 of the statutes is renumbered 150.983 and amended to read:

**150.983 Mental retardation facilities and community mental health centers construction funds.** The department may receive federal funds in behalf of, and transmit them to, such applicants. In the general fund there is hereby established, separate and apart from all public moneys of this state, a mental retardation facilities construction fund and a community mental health centers construction fund. Money received from the federal government for a construction project under ss. 140.65 to 140.76 this subchapter approved by the secretary shall be deposited to the credit of the appropriate fund and shall be used solely for payments to applicants for work performed, or purchases made, in carrying out approved project.

**SECTION 247.** 140.77 of the statutes is renumbered 250.09, and 250.09 (3), as renumbered, is amended to read:

250.09 (3) The pesticide review board shall submit to the governor and the chief clerk of each house of the legislature, for distribution to the legislature in the manner provided under s. 13.172 (2), and to the governor a report on any pesticide matters the pesticide review board finds are of vital concern for the protection of the health and well–being of people or for the protection of fish, wildlife, plants, soil, air and water from pesticide pollution. The report may include the pesticide review board’s recommendations for legislative or other governmental action.

**SECTION 248.** 140.81 of the statutes is renumbered 46.973.

**SECTION 249.** 140.82 (title) of the statutes is repealed.

**SECTION 250.** 140.82 (1) (intro.) of the statutes is renumbered 250.04 (12) and amended to read:

250.04 (12) The department is designated the state health planning and development agency and shall:

**SECTION 251.** 140.82 (1) (a) to (L), (2) and (3) of the statutes are repealed.

**SECTION 252.** 140.84 of the statutes is renumbered 46.974 and amended to read:

**46.974 Joint alcohol and drug abuse prevention plan.** The department in cooperation with the department of public instruction shall prepare, and the secretary and the superintendent of public instruction shall approve, a coordinated plan for the development, testing and implementation of cooperative and integrated school–community alcohol and drug abuse prevention, intervention, treatment and rehabilitation services. The department and the department of public instruction shall submit a report to the chief clerk of each house of the legislature, for distribution to the legislature under s. 13.172 (2), on the implementation of the plan in each calendar year.

**SECTION 253.** 140.85 (title) of the statutes is renumbered 50.037 (title).

**SECTION 254.** 140.85 (1) (intro.) and (b) of the statutes are consolidated, renumbered 50.037 (1) and amended to read:

50.037 (1) (title) DEFINITION. In this section—(b) “Total, “total monthly charges” means the total amount paid per month, including the basic monthly rate plus any additional fees, by a resident of a community–based residential facility for care, treatment and services provided by that community–based residential facility as a primary function of that community–based residential facility or provided by another community–based residential facility that provides care, treatment or services for the resident.

**SECTION 255.** 140.85 (1) (a) of the statutes is repealed.

**SECTION 256.** 140.85 (2) and (3) of the statutes are renumbered 50.037 (2) and (3).

**SECTION 257.** 140.86 of the statutes is renumbered 50.135, and 50.135 (1) and (3), as renumbered, are amended to read:

50.135 (1) DEFINITION. In this section, “inpatient health care facility” means any hospital, nursing home, county home, county mental hospital, tuberculosis sanatorium or other place licensed or approved by the department under ss. 49.14, 49.16, 49.171, 50.02, 50.03, 50.35, 51.08, 51.09, 58.06, 149.01, 252.073 and 149.02, 252.076, but does not include community–based residential facilities.

(3) EXEMPTION. The inpatient health care facilities under ss. 45.365, 48.62, 51.05, 51.06 and 149.06, 252.10 and ch. 142 are exempt from this section.

**SECTION 258.** 140.87 of the statutes is renumbered 250.10.

**SECTION 259.** Chapter 141 (title) of the statutes is renumbered chapter 251 (title).

**SECTION 260.** 141.01 (title) (1), (1m), (1r) and (2) of the statutes are repealed.

**SECTION 261.** 141.01 (3) (a) 1. of the statutes is renumbered 251.04 (8) and amended to read:
251.04 (8) Except as provided under subd. 2., or unless the manner of appointment, employment is otherwise provided for by ordinance, the commission shall elect a chairperson and a local board of health shall designate a employ qualified public health professional, as specified by the department by rule, to fulfill the requirements of a local health officer under ch. 143 and professionals, including a public health nurse to conduct general public health nursing programs under the direction of the commission local board of health and in cooperation with the department. The commission shall also designate a qualified public health professional, as specified by the department by rule, for the purposes of, and may employ one or more sanitarians to conduct environmental sanitation programs and other public health programs not specifically designated by statute as functions of the public health nurse. The commission may employ one or more sanitarians under s. 140.45 (3) and local board of health shall coordinate the activities of any sanitarian employed by the county board. The commission local board of health is not required to designate employ different persons to perform these functions. The commission may arrange for the provision of services of a physician as necessary and may provide reasonable compensation therefor.

Section 262m. 141.01 (3) (a) 2. of the statutes is repealed.

Section 263. 141.01 (3) (b) and (4) of the statutes are repealed.

Section 264. 141.01 (5) of the statutes is renumbered 251.04 (7) and amended to read:

251.04 (7) The commission A local board of health shall take such assure that measures as shall be most effectual for the preservation of the public health are taken to provide an environment in which individuals can be healthy.

Section 265. 141.01 (6) (intro.), (a) and (b) of the statutes are repealed.

Section 266. 141.01 (6) (c) of the statutes is renumbered 251.06 (3) (i) and amended to read:

251.06 (3) (i) Shall promote Promote the spread of information as to the causes, nature and prevention of prevalent diseases, and the preservation and improvement of health.

Section 267. 141.01 (6) (d) to (g) of the statutes are repealed.

Section 268. 141.01 (7) to (11) of the statutes are repealed.

Section 269. 141.015 of the statutes is repealed.

Section 270. 141.02 of the statutes is repealed.

Section 271. 141.04 of the statutes is renumbered 251.09 and amended to read:

251.09 Joint services. Towns, villages and cities Local health departments jointly may provide health services as agreed upon under s. 66.30, unless, notwith-stand ing s. 66.30, the agreement conflicts with a provision of this chapter.

Section 272. 141.045 (title) of the statutes is renumbered 250.06 (title).

Section 273. 141.045 (1) and (3) of the statutes are renumbered 250.06 (1) and (3) and amended to read:

250.06 (1) The qualifications of all public health nurses shall be prescribed by rules adopted promulgated by the department. All public health nurses shall be registered nurses. Practical Licensed practical nurses licensed under ch. 441 may be employed by local health agencies departments under the supervision of a public health nurse to perform services for which licensed. Public health nurses shall work under the direction of the local board of health and the local health officer and shall conduct a generalized public health nursing program in cooperation with the department.

(3) Every agency employing one or more public health nurses shall submit a written report monthly of work done on prescribed forms to the department. The department shall examine the report practice of public health nurses and make recommendations for the improvement and development of the public health nursing service. This subsection shall not apply to cities of the 1st class.

Section 274. 141.045 (4) of the statutes is repealed.

Section 275. 141.045 (6) of the statutes is renumbered 250.06 (6).

Section 276. 141.05 of the statutes is repealed.

Section 277. 141.07 of the statutes is repealed.

Section 278. 141.10 of the statutes is repealed.

Section 279. 141.15 of the statutes is renumbered 50.49, and 50.49 (9), as renumbered, is amended to read:

50.49 (9) Right of injunction. All orders issued by the department pursuant to s. 141.15 under this section shall be enforced by the attorney general. The circuit court of Dane county shall have jurisdiction to enforce such orders by injunction and other appropriate relief.

Section 280. Chapter 143 (title) of the statutes is renumbered chapter 252 (title).

Section 281. 143.01 (intro.) of the statutes is renumbered 252.01 (intro.).

Section 282. 143.01 (1m) of the statutes is repealed.

Section 283. 143.01 (2) of the statutes is renumbered 252.01 (3).

Section 284. 143.02 of the statutes is renumbered 252.02, and 252.02 (4) and (5), as renumbered, are amended to read:

252.02 (4) The department may adopt promulgate and enforce rules or issue orders for guarding against the introduction of any communicable disease into the state, for the control and suppression of communicable diseases, for the quarantine and disinfection of persons, localities and things infected or suspected of being infected by a communicable disease and for the sanitary
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care of jails, state prisons, mental health institutions, schools, hotels and public buildings and connected premises. Any rule or order may be made applicable to the whole or any specified part of the state, or to any vessel or other conveyance. Rules of general application shall be adopted under ch. 227. Orders may be made The department may issue orders for any city, village or county by service upon the local health officer. Rules or that are promulgated and orders adopted or that are issued under this subsection supersede conflicting or less stringent local rules, regulations, orders or ordinances.

(5) If any public officer or employe or any person in charge of any building, vessel, conveyance, jail, state prison, mental health institution or school fails to comply with a rule promulgated or order adopted or issued under sub. (4), the department may appoint an agent to execute its rules or orders. Expenses which that an agent incurs shall be paid by the unit of government that employs the person or of which the public officer is a member. If the building, vessel, conveyance, mental health institution or school is privately owned the state shall pay the expenses incurred that the agent incurs.

SECTION 285. 143.03 of the statutes is renumbered 252.03.

SECTION 286. 143.04 (title) of the statutes is renumbered 252.05 (title).

SECTION 287. 143.04 (1) of the statutes is renumbered 252.05 (1) and amended to read:

252.05 (1) Any person licensed, permitted, registered or certified under ch. 441 or 448 knowing or having reason to know that a person treated or visited by him or her has a communicable disease, or having a communicable disease, has died, shall report the appearance of the communicable disease or the death to the local health officer. The local health officer shall report this information to the department or shall direct the licensee person reporting to report to the department. Any licensee person directed to report shall submit this information to the department.

SECTION 288. 143.04 (2) to (4) of the statutes are renumbered 252.05 (2) to (4).

SECTION 289. 143.04 (5) of the statutes is renumbered 252.05 (5) and amended to read:

252.05 (5) All reports shall be made within 24 hours, unless otherwise specified by the department, either by telephone, telegraph, mail or electronic means or by deposit at the office of the local health officer.

SECTION 290. 143.04 (6) of the statutes is renumbered 252.05 (6) and amended to read:

252.05 (6) Any local health officer, upon receiving a report, shall cause a permanent record of the report to be made and upon demand of the department transmit the original or a copy to the department, together with other information the department requires. The department may store these records as paper or electronic records and shall treat them as patient health care records under ss. 146.81 to 146.835.

SECTION 291. 143.04 (7) of the statutes is renumbered 252.05 (7).

SECTION 292. 143.04 (8) of the statutes is repealed.

SECTION 293. 143.04 (9) of the statutes is renumbered 252.05 (9) and amended to read:

252.05 (9) Any person licensed, permitted, registered or certified under ch. 441 or 448 shall use ordinary skill in determining the presence of communicable diseases. If there is a dispute regarding disease determination, if the disease may have potential public health significance or if more extensive laboratory tests will aid in the investigation, the local health officer shall order the tests made by the state laboratory of hygiene or by a laboratory certified under s. 443.15 252.22.

SECTION 294. 143.04 (11) of the statutes is renumbered 252.05 (11).

SECTION 295. 143.05 of the statutes is renumbered 252.06, and 252.06 (3), as renumbered, is amended to read:

252.06 (3) If a local health officer suspects or is informed of the existence of any communicable disease, the officer shall at once investigate and make or cause such examinations to be made as are necessary. The diagnostic report of a physician, the notification or confirmatory report of a parent or caretaker of the patient, or a reasonable belief in the existence of a communicable disease requires shall require the local health officer immediately to quarantine, isolate, require restrictions or take other communicable disease control measures in the manner, upon the persons and for the time specified in rules promulgated by the department provides in its rules. If the local health officer is not a physician, he or she shall employ one to aid the local health officer consult a physician as speedily as possible where there is reasonable doubt or disagreement in diagnosis and where advice is needed. The local health officer shall investigate evasion of the laws and rules concerning communicable disease and shall act to protect the public.

SECTION 296. 143.06 of the statutes is renumbered 252.07, and 252.07 (1), (4) and (5), as renumbered, are amended to read:

252.07 (1) Tuberculosis is a communicable disease caused by mycobacterium tuberculosis and is subject to the reporting requirements specified in s. 143.04 252.05. Any laboratory that performs a test for tuberculosis shall report all positive results to the local health officer and to the department.

(4) Any court of record may commit a person infected with mycobacterium tuberculosis to a place that will provide proper care and prevent spread of the disease if the disease is diagnosed by a medical, laboratory or X-ray examination and if the person fails to comply with this chapter or with rules of the department concerning
tuberculosis. If the local health officer or any resident of the municipality in which an alleged violation of this subsection occurs petitions the court and states the facts of the alleged violation, the court shall summon the person infected with tuberculosis to appear in court on a date at least 48 hours, but not more than 96 hours, after service of the summons. The court may order the person discharged. If the administrative officer of the institution has good cause to believe that a person who is committed may leave without a court order, the officer may restrain the person from leaving. The administrative officer may segregate any person who is committed, as needed.

(5) Upon report of any person under sub. (1), the local health officer shall at once investigate and make and enforce the necessary orders.

**SECTION 297.** 143.07 of the statutes is renumbered 252.11, and 252.11 (1), (1m), (2), (5) and (11), as renumbered, are amended to read:

252.11 (1) In this section, “sexually transmitted disease” means syphilis, gonorrhea, chlamydia and other diseases the department includes by rule.

(1m) Any person infected with a sexually transmitted disease in a communicable form is a menace to the public health. A physician or other health care professional called to attend a person infected with any form of sexually transmitted disease, as specified in rules promulgated by the department by rule, shall report the disease to the local health officer and to the department in the manner directed by the department in writing on forms furnished by the department. A physician may treat a minor infected with a sexually transmitted disease or examine and diagnose a minor for the presence of such a disease without obtaining the consent of the minor’s parents or guardian. The physician shall incur no civil liability solely by reason of the lack of consent of the minor’s parents or guardian.

(2) An officer of the department or a local health officer having knowledge of any reported or reasonably suspected case or contact of a sexually transmitted disease for which no appropriate treatment is being administered, or of an actual contact of a reported case or potential contact of a reasonably suspected case, shall investigate or cause the case or contact to be investigated as necessary. If, following a request of an officer of the department or a local health officer, a person reasonably suspected of being infected with a sexually transmitted disease refuses or neglects examination by a physician or treatment, an officer of the department or a local health officer may proceed to have the person committed under sub. (5) to an institution or system of care for examination, treatment or observation.

(5) Any court of record may commit a person infected with a sexually transmitted disease to any institution or may require the person to undergo a system of care for examination, treatment or observation if the person ceases or refuses examination, treatment or observation under the supervision of a physician. The court shall summon the person to appear on a date at least 48 hours, but not more than 96 hours, after service if an officer of the department or a local health officer petitions the court and states the facts authorizing commitment. If the person fails to appear or fails to accept commitment without reasonable cause, the court may cite the person for contempt. The court may issue a warrant and may direct the sheriff, any constable or any police officer of the county immediately to arrest the person and bring the person to court if the court finds that a summons will be ineffectual. The court shall hear the matter of commitment summarily. Commitment under this subsection continues until the disease is no longer communicable or until other provisions are made for treatment that satisfy the department. The certificate of the petitioning officer is prima facie evidence that the disease is no longer communicable or that satisfactory provisions for treatment have been made.

(11) In each county with an incidence of gonorrhea, antibiotic resistant gonorrhea, chlamydia or syphilis exceeding that exceeds the statewide average per person, a program to diagnose and treat sexually transmitted diseases at no cost to the patient is required. The county board of supervisors is responsible for ensuring that such a program exists, but is only required to establish its own program only if no other public or private program is operating. The department shall compile statistics indicating the incidence of gonorrhea, antibiotic resistant gonorrhea, chlamydia and syphilis per person on a statewide basis for each county in the state.

**SECTION 298.** 143.08 of the statutes is renumbered 252.18 and amended to read:

252.18 Handling foods. No person in charge of any public eating place or other establishment where food products to be consumed by others are handled may knowingly employ any person handling food products who has a disease in a form that is communicable by food handling. If required by the local health officer or any officer of the department for the purposes of an investigation, any person who is employed in the handling of foods or is suspected of having a disease in a form that is communicable by food handling shall submit to an examination by the officer or by a physician designated by the officer. The expense of the examination, if any, shall be paid by the person examined. Any person knowingly infected with a disease in a form that is communicable by food handling who handles food products to be consumed by others and any persons knowingly employing or permitting such a person to handle food products to be consumed by others shall be punished as provided by s. 143.14 253.25.

**SECTION 299.** 143.10 of the statutes is renumbered 252.19.

**SECTION 300.** 143.11 of the statutes is renumbered 252.25 and amended to read:
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252.25 Violation of law relating to health. Any person who wilfully violates or obstructs or hinders the execution of any state statute or rule, county or municipal law, city or village ordinance, or departmental order or rule issued under this chapter and relating to the public health, for which no other penalty is prescribed, shall be imprisoned for not more than 30 days or fined not to exceed more than $500 or both.

SECTION 301. 143.12 of the statutes is renumbered 252.21.

SECTION 302. 143.14 of the statutes is repealed.

SECTION 303. 143.15 of the statutes is renumbered 252.22.

SECTION 304. 143.16 of the statutes is repealed.

SECTION 305. 143.17 of the statutes is repealed.

SECTION 306. 144.01 (15) of the statutes is amended to read:

144.01 (15) “Solid waste” means any garbage, refuse, sludge from a waste treatment plant, water supply treatment plant or air pollution control facility and other discarded or salvageable materials, including solid, liquid, semisolid, or contained gaseous materials resulting from industrial, commercial, mining and agricultural operations, and from community activities, but does not include solids or dissolved material in domestic sewage, or solid or dissolved materials in irrigation return flows or industrial discharges which are point sources subject to permits under ch. 147, or source material, as defined in s. 254.31 (10), special nuclear material, as defined in s. 254.31 (11), or by–product material, as defined under s. 140.52 in s. 254.31 (3).

SECTION 307. 144.025 (2) (k) of the statutes is amended to read:

144.025 (2) (k) The department may, under s. 254.59, order or cause the abatement of any nuisance affecting the waters of the state under ss. 146.13 and 146.14.

SECTION 308. 144.95 (2) of the statutes is amended to read:

144.95 (2) Coordination with department of health and social services. (a) The department shall submit to the department of health and social services for review and comment. These rules may not take effect unless they are approved by the department of health and social services within 6 months after submission.

(b) The department shall enter into a memorandum of understanding with the department of health and social services setting forth the responsibilities of each department in administering the laboratory certification programs under s. 143.15 252.22 (5) and this section. The memorandum of understanding shall include measures to be taken by each department to avoid duplication of application and compliance procedures for laboratory certification.

SECTION 309. 144.95 (5) (a) of the statutes is amended to read:

144.95 (5) (a) Laboratories certified by the department of health and social services. The department shall recognize the certification of a laboratory by the department of health and social services under s. 143.15 252.22 and shall accept the results of any test conducted by a laboratory certified to conduct that category of test under that section.

SECTION 310. 144.992 (1) of the statutes is amended to read:

144.992 (1) If a court imposes a fine or forfeiture for a violation of a provision of this chapter, ch. 147 or 162 or s. 146.13 (2) or 146.20 or a rule or order issued under this chapter, ch. 147 or 162 or s. 146.13 (2) or 146.20, the court shall impose an environmental assessment equal to 5% of the amount of the fine or forfeiture.

SECTION 311. 145.02 (3) (f) of the statutes is amended to read:

145.02 (3) (f) Issue special orders directing and requiring compliance with the rules and standards of the department promulgated under this chapter whenever, in the judgment of the department, the rules or standards are threatened with violation, are being violated or have been violated. The circuit court for any county where violation of such an order occurs has jurisdiction to enforce and shall enforce any order brought before it by injunctive and other appropriate relief. The attorney general or the district attorney of the county where the violation of the order occurs shall bring action for its enforcement. The department may issue an order under this paragraph to abate a violation of s. 146.13 or 146.14 254.59.

SECTION 312. 145.20 (2) (f) of the statutes is amended to read:

145.20 (2) (f) Investigate violations of the private sewage system ordinance and s. 146.13 or 146.14 254.59 (2), issue orders to abate the violations and submit orders to the district attorney, corporation counsel or attorney general for enforcement.

SECTION 313. 145.245 (1) (a) 3. of the statutes is amended to read:

145.245 (1) (a) 3. A written enforcement order issued under s. 146.13 254.59 (1) by a governmental unit.

SECTION 314. 146.01 of the statutes is renumbered 253.11, and 253.11 (2), as renumbered, is amended to read:

253.11 (2) In a confinement not attended by a physician or midwife, any infant becomes inflamed, swollen and red or show an unnatural discharge at any time within 2 weeks after birth, the nurse, parents, or other person in charge shall report the facts in writing within 6 hours to the local health officer who shall immediately warn the person of
the danger. The local health officer shall employ at the expense of the municipality local health department a competent physician to examine and treat the case.

**Section 315.** 146.015 of the statutes is renumbered 255.30.

**Section 316.** 146.02 of the statutes is renumbered 253.13.

**Section 317.** 146.021 of the statutes is renumbered 254.19.

**Section 318.** 146.022 (title) of the statutes is renumbered 252.12 (title).

**Section 319.** 146.022 (1) (intro.) of the statutes is renumbered 252.12 (1) (intro.).

**Section 320.** 146.022 (1) (a) and (b) of the statutes are renumbered 252.01 (1) and (2).

**Section 321.** 146.022 (1) (c) and (d) of the statutes are renumbered 252.12 (1) (c) and (d).

**Section 322.** 146.022 (1) (dm) of the statutes is renumbered 250.01 (6).

**Section 323.** 146.022 (1) (e), (2) and (3) of the statutes are renumbered 252.12 (1) (e), (2) and (3), and 252.12 (2) (a) 4., as renumbered, is amended to read:

> 252.12 (2) (a) 4. Information network. The department shall establish a network to provide information to local public health officers and other public officials who are responsible for acquired immunodeficiency syndrome prevention and training.

**Section 324.** 146.023 (title) and (1) of the statutes are repealed.

**Section 325.** 146.023 (1m) to (5) of the statutes are renumbered 252.13 (1m) to (5), and 252.13 (1m), as renumbered, is amended to read:

> 252.13 (1m) Except as provided under sub. (3), any blood bank, blood center or plasma center in this state that purchases or receives whole blood, blood plasma, a blood product or a blood derivative shall, prior to its distribution or use and with informed consent under the requirements of s. 146.025 252.15 (2) (b), subject that blood, plasma, product or derivative to a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under sub. (1r) (a) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. This subsection does not apply to a blood bank that purchases or receives whole blood, blood plasma, a blood product or a blood derivative from a blood bank, blood center or plasma center in this state if the whole blood, blood plasma, blood product or blood derivative has previously been subjected to a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under sub. (1r) (a) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV.

**Section 326.** 146.024 (title) and (1) (intro.), (ad) and (am) of the statutes are renumbered 252.14 (title) and (1) (intro.), (ad) and (am).

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**Section 327.** 146.024 (1) (ar) of the statutes, as affected by 1991 Wisconsin Act 269, is renumbered 252.14 (1) (ar).

**Section 328.** 146.024 (1) (b) of the statutes is repealed.

**Section 329.** 146.024 (1) (c) and (d) of the statutes are renumbered 252.14 (1) (c) and (d) and amended to read:

> 252.14 (1) (c) “Home health agency” has the meaning specified in s. 141.15 149.09 (1) (a).

(d) “Inpatient health care facility” means a hospital, nursing home, community-based residential facility, county home, county mental health complex, tuberculosis sanatorium or other place licensed or approved by the department under ss. 49.14, 49.16, 49.171, 50.02, 50.03, 50.35, 51.08, 51.09, 58.06, 149.01 252.073 and 149.02 252.076 or a facility under s. 45.365, 48.62, 51.05, 51.06 or 149.06 252.10 or ch. 142.

**Section 330.** 146.024 (1) (e) and (f) of the statutes are repealed.

**Section 331.** 146.024 (2) to (4) of the statutes are renumbered 252.14 (2) to (4), and 252.14 (2) (intro.), as renumbered, is amended to read:

> 252.14 (2) (intro.) No health care provider, peace officer, fire fighter, correctional officer, state patrol officer, home health agency, inpatient health care facility or person who has access to a validated test result as defined in s. 146.025 (1) (a), may do any of the following with respect to an individual who has acquired immunodeficiency syndrome or has a positive test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV, solely because the individual has HIV infection or an illness or medical condition that is caused by, arises from or is related to HIV infection:

**Section 332.** 146.025 (title) and (1) (intro.) and (ad) to (ar) of the statutes are renumbered 252.15 (title) and (1) (intro.) and (ad) to (ar).

**Section 333.** 146.025 (1) (b) and (c) of the statutes are repealed.

**Section 334.** 146.025 (1) (cm) to (e) of the statutes are renumbered 252.15 (1) (cm) to (e), and 252.15 (1) (cm), as renumbered, is amended to read:

> 252.15 (1) (cm) “Home health agency” has the meaning given in s. 444.15 50.49 (1) (a).

**Section 335.** 146.025 (1) (eb) of the statutes is renumbered 252.01 (4).

**Section 336.** 146.025 (1) (ed) of the statutes is repealed.

**Section 337.** 146.025 (1) (eg) and (em) of the statutes are renumbered 252.15 (1) (eg) and (em).

**Section 338.** 146.025 (1) (f) of the statutes is renumbered 252.01 (6) and amended to read:

> 252.01 (6) “State epidemiologist” means the individual designated appointed by the secretary state health officer under s. 250.02 (1) as the individual in charge of
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state epidemiologist for acute and communicable disease control for this state diseases.

SECTION 339. 146.025 (1) (fg) of the statutes is renumbered 252.01 (7).

SECTION 340. 146.025 (1) (fm) of the statutes is renumbered 252.15 (1) (fm).

SECTION 341. 146.025 (1) (g) of the statutes is renumbered 252.01 (8).

SECTION 342. 146.025 (2) to (9) of the statutes are renumbered 252.15 (2) to (9), and 252.15 (2) (a) 2. and (am) 1 and (7) (a) and (d), as renumbered, are amended to read:

252.15 (2) (a) 2. The department, a laboratory certified under s. 143.15 (4) 252.22 or a health care provider, blood bank, blood center or plasma center may, for the purpose of research and without first obtaining written consent to the testing, subject any body fluids or tissues to a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV if the testing is performed in a manner by which the identity of the test subject is not known and may not be retrieved by the researcher.

(am) 1. A health care provider who procures, processes, distributes or uses human sperm donated as specified under s. 157.06 (6) (a) or (b) shall, prior to the distribution or use and with informed consent under the requirements of par. (b), test the proposed donor for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV in order to assure medical acceptability of the gift for the purpose intended. The health care provider shall use as a test for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV a test or series of tests that the state epidemiologist finds medically significant and sufficiently reliable under s. 146.023 252.13 (1r) to detect the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV. The health care provider shall test the donor initially and, if the initial test result is negative, perform a 2nd test on a date that is not less than 180 days from the date of the procurement of the sperm. No person may use the donated sperm until the health care provider has obtained the results of the 2nd test. If any validated test result of the donor for the presence of HIV, antigen or nonantigenic products of HIV or an antibody to HIV is positive, the sperm donated for use may not be used and, if donated, shall be destroyed.

(7) (a) Notwithstanding ss. 227.01 (9) (13) and 227.10 (1), for the purposes of this subsection, the state epidemiologist shall determine, based on the preponderance of available scientific evidence, the procedures necessary in this state to obtain a validated test result and the secretary shall so declare under s. 140.05 250.04 (1) or (2) (a). The state epidemiologist shall revise this determination if, in his or her opinion, changed available scientific evidence warrants a revision, and the secretary shall declare the revision under s. 140.05 250.04 (1) or (2) (a).

(d) This subsection does not apply to the reporting of information under s. 143.04 252.05 with respect to persons for whom a diagnosis of acquired immunodeficiency syndrome has been made.

SECTION 343. 146.026 of the statutes is renumbered 253.14.

SECTION 344. 146.027 of the statutes is renumbered 255.05, and 255.05 (1) (a), as renumbered, is amended to read:

255.05 (1) (a) “Institution” means any hospital, nursing home, county home, county mental hospital, tuberculosis sanatorium, community–based residential facility or other place licensed or approved by the department under ss. 49.14, 49.16, 49.171, 50.02, 50.03, 50.35, 51.08, 51.09, 58.06, 149.01 252.073 and 149.02 252.076.

SECTION 345. 146.0275 of the statutes is renumbered 255.06, and 255.06 (2) (a) 2., as renumbered, is amended to read:

255.06 (2) (a) 2. For a woman for whom 3rd–party payment is not obtainable and whose income is above 150% of the poverty line, payment by the woman based on a sliding scale according to her income, as developed by the department of health and social services.

SECTION 346. 146.0277 of the statutes is renumbered 255.07.

SECTION 347. 146.028 (title) and (1) (intro.) and (a) to (e) of the statutes are renumbered 253.12 (title) and (1) (intro.) and (a) to (e).

SECTION 348. 146.028 (1) (f) of the statutes is repealed.

SECTION 349. 146.028 (1) (g) and (2) to (8) of the statutes are renumbered 253.12 (1) (g) and (2) to (8), and 253.12 (6) (a), as renumbered, is amended to read:

253.12 (6) (a) If a local health officer submits to the department a written request for receipt of information submitted under sub. (2), the department shall forward to the public local health officer an abstract of information received for an infant or child for whom the parent or guardian has provided informed, written consent to a release of the information and who resides in the area of jurisdiction of the public local health officer.

SECTION 350. 146.03 of the statutes is repealed.

SECTION 351. 146.04 of the statutes is repealed.

SECTION 352. 146.05 of the statutes is renumbered 254.56 and amended to read:

254.56 Public places. The owner and occupant and everyone in charge of a public building, as defined by in s. 101.01 (2) (a) to (i) (g), shall keep the same building clean and sanitary.

SECTION 353. 146.06 of the statutes is repealed.

SECTION 354. 146.07 of the statutes is repealed.

SECTION 355. 146.08 of the statutes is renumbered 255.08.
Section 356. 146.09 of the statutes is repealed.

Section 357. 146.10 of the statutes is renumbered 254.57 and amended to read:

254.57 Smoke. The common council of any city or the board of any village may regulate or prohibit the emission of dense smoke into the open air within its limits and one mile therefrom from its limits.

Section 358. 146.125 of the statutes is renumbered 254.58 and amended to read:

254.58 Powers of villages, cities and towns. Section 95.72 shall not be construed as depriving any city or village of the power of enacting any ordinance prohibiting the rendering of dead animals within the boundaries as defined in s. 66.052 nor as nullifying any existing law or ordinance prohibiting the rendering of dead animals within the area, nor is such the area, nor or as prohibiting any city or village from licensing, revoking the license, and regulating the business of rendering and transporting dead animals under sanitary conditions no less stringent than provided by said section under s. 95.72 and the rules of the department of agriculture, trade and consumer protection and any such. Any licensing and regulation shall be construed as by a city or village is supplementary to the provisions of this section and the rules of the department and may not be construed as excusing or justifying any failure or neglect to comply with this section and the rules of the department. Section 95.72 shall be expressly construed as modified by the powers granted to towns and any city, village or town is empowered to may take any action to be taken permitted under s. 146.44 and to 254.59, may institute and maintain court proceedings to prevent, abate or remove any nuisance the human health hazards under s. 254.59 and to may institute and maintain any action under ss. 823.01, 823.02 and 823.07.

Section 359. 146.13 of the statutes is repealed.

Section 360. 146.14 (title) of the statutes is repealed.

Section 361. 146.14 (1) and (2) of the statutes are renumbered 254.59 (1) and (2) and amended to read:

254.59 (1) A “nuisance,” under this section, is any source of filth or cause of sickness. The department may if a local health officer finds a health hazard, he or she shall order the abatement or removal of a nuisance the human health hazard on private premises, within a reasonable time period, and if the owner or occupant fails to comply, the department, or its agent, local health officer may enter upon the premises and abate or remove such nuisance the human health hazard.

(2) If a nuisance, caused by improper sewerage disposal facilities, human health hazard is found on private property, the local health officer or the chairman of the local board of health shall notify the owner and the occupant of such the property, by registered mail with return receipt requested, of the presence of such nuisance the human health hazard and order its abatement or removal within 30 days of receipt of the notice. The officer shall also notify the local governing body of the nuisance. If the nuisance human health hazard is not corrected abated or removed by that date, the local governing body health officer shall immediately enter upon the property and abate or remove the nuisance human health hazard or may contract to have the work performed. The nuisance human health hazard shall be abated in a manner which is approved by the department of industry, labor and human relations local health officer. The cost thereof of the abatement or removal may be recovered from the person permitting the violation or may be paid by the municipal treasurer and the account, after being paid by the treasurer, shall be filed with the municipal clerk, who shall enter the amount chargeable to the property in the next tax roll in a column headed “For Abatement of Nuisance” as a special tax on the lands upon which such nuisance the human health hazard was abated, which the tax shall be collected as are other taxes. In case of railroads or other lands not taxed in the usual way, the amount chargeable against the same shall be certified by the clerk to the state treasurer who shall add the amount designated therein in the certificate to the sum due from the company owning, occupying or controlling the land specified, and the treasurer shall collect the same amount as prescribed in subch. I of ch. 76 and return the amount collected to the town, city or village from which such the certificate was received. Anyone maintaining such a nuisance human health hazard may be fined not more than $300 or imprisoned for not more than 90 days or both. The only defenses an owner shall have against the collection of a tax under this subsection are that no nuisance human health hazard existed on the owner’s property, that no nuisance human health hazard was corrected on the owner’s property, that the procedure outlined in this subsection was not followed or any applicable defense under s. 74.33. If a nuisance resulted from any other cause or source, the board of health or town sanitary district commission shall order its abatement within 24 hours, and if the owner or occupant fails to comply, he or she shall forfeit not less than $25 nor more than $100, and the board or commission may abate or remove the nuisance.

Section 362. 146.14 (3) of the statutes is repealed.

Section 363. 146.14 (4) to (6) of the statutes are renumbered 254.59 (4) to (6) and amended to read:

254.59 (4) In cities under general charter, the local health commissioner or a person under the commissioner officer may enter into and examine any place at any time to ascertain health conditions, and anyone refusing to allow such entrance at reasonable hours shall be fined not less than $10 nor more than $100; and if, if the commissioner local health officer deems it necessary to abate or remove a nuisance human health hazard found on private property, the commissioner local health officer shall serve notice on the owner or occupant to abate or remove
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within a reasonable time, that is not less than 24 hours; and if he or she fails to comply, or if the nuisance human health hazard is on property whose owner is a nonresident, or cannot be found, the commissioner local health officer shall cause abatement or removal.

(5) The cost of abatement or removal of a nuisance human health hazard under this section may be at the expense of the municipality and may be collected from the owner or occupant, or person causing, permitting or maintaining the nuisance human health hazard, or may be charged against the premises and, upon certification of the local health official, assessed as are other special taxes. In cases of railroads or other lands not taxed in the usual way, the amount chargeable against the same shall be certified by the clerk to the state treasurer who shall add the amount designated therein in the certificate to the sum due from the company owning, occupying or controlling the land specified, and the treasurer shall collect the same amount as prescribed in subch. I of ch. 76 and return the amount collected to the town, city or village from which such the certificate was received. Anyone maintaining such a nuisance human health hazard may also be fined not more than $300 or imprisoned for not more than 90 days or both. The only defenses an owner shall may have against the collection of a tax under this subsection are that no nuisance human health hazard existed on the owner’s property, or that no nuisance human health hazard was corrected on the owner’s property, or that the procedure outlined in this subsection was not followed, or any applicable defense under s. 74.33.

(6) Cities of the first A 1st class city may, but shall not be is not required to, follow the provisions of this section. Cities of the first A 1st class city may follow the provisions of its charter.

SECTION 364. 146.145 (title) of the statutes is renumbered 254.21 (title).

SECTION 365. 146.145 (1) of the statutes is repealed.

SECTION 366. 146.145 (2), (2m), (3) and (4) of the statutes are renumbered 254.21 (2), (2m), (3) and (4).

SECTION 367. 146.16 of the statutes is amended to read:

146.16 Expenses. Expenses incurred under chs. 443 to 446, not made otherwise chargeable, shall be paid by the town, city or village.

SECTION 368. 146.18 (title) of the statutes is repealed.

SECTION 369. 146.18 (1) of the statutes is renumbered 253.03 and amended to read:

253.03 (title) State plan; reports. The department shall prepare and submit to the proper federal authorities a state plan for maternal and child health services. Such The plan shall conform with all requirements governing federal aid for this purpose and shall be designed to secure for this state the maximum amount of federal aid which can be secured on the basis of the available state, county, and local appropriations. The department shall make such reports, in such form and containing such information, as may from time to time be required by the federal authorities, and shall comply with all provisions which may be prescribed to assure the correctness and verification of such the reports. The secretary may appoint a maternal and child health program advisory committee under s. 15.04 (1) (c) to assist the department in meeting the requirements of this section.

SECTION 370. 146.18 (2) of the statutes is renumbered 253.04 and amended to read:

253.04 (title) Private rights. No official, agent or representative of the department, by virtue of may, under this section, shall have any right to enter any home over the objection of the owner thereof, or to take charge of any child over the objection of the parents, or either of them, parent or of the person standing in the place of a parent or having custody of such the child. Nothing in this section shall may be construed as limiting to limit the power of a parent or, guardian or person standing in the place of a parent to determine what treatment or correction shall be provided for a child or the agency or agencies to be employed for such that purpose.

SECTION 371. 146.18 (3) of the statutes is renumbered 253.05 and amended to read:

253.05 (title) Federal funds. The department shall use sufficient funds from the appropriation now made by under s. 20.435 (1) (a) for the promotion of the welfare and hygiene of maternity and infancy to match the federal funds received by the state from the United States under the provisions of such act of congress.

SECTION 372. 146.183 (1) (a) (intro.) of the statutes is amended to read:

146.183 (1) (a) (intro.) From the appropriation under s. 20.435 (1) (intro.) (ei), the department shall allocate grants in each fiscal year to local health care agencies that have applied for the grants, to provide all of the following services:

SECTION 373. 146.185 of the statutes is renumbered 253.06.

SECTION 374. 146.24 of the statutes is renumbered 254.89 and amended to read:

254.89 (title) Certification of Grade A dairy operations. The department shall conduct sampling evaluation surveys of milk sheds in Wisconsin grade A dairy operations in this state to the extent necessary to certify to the federal food and drug administration, out–of–state markets, the department of agriculture, trade and consumer protection, the U.S. federal public health service, and local health departments, the compliance rating of such milk sheds the grade A dairy operations, based upon the standards for grade A milk and grade A milk products of the department of agriculture, trade and consumer protection and the provisions sanitation and enforcement requirements of the recommended grade A pasteurized milk ordinance and code of the U.S. federal
public health service and its related documents. The department may set to monitor milk volume under this section, including requiring the monthly reporting of volume by individual dairy plants, and may promulgate rules establishing fees which may be charged to dairy plants to fund these activities.

**SECTION 375.** 146.40 (1) (b) of the statutes is amended to read:

146.40 (1) (b) “Home health agency” has the meaning specified in s. 141.15 50.49 (1) (a).

**SECTION 376.** 146.50 (12) (a) of the statutes, as affected by 1991 Wisconsin Act 238, is amended to read:

146.50 (12) (a) All records made by an ambulance service provider, an emergency medical technician or a first responder in administering emergency care procedures to and handling and transporting sick, disabled or injured individuals shall be maintained as confidential patient health care records subject to ss. 146.81 to 146.84 and, if applicable, s. 146.025 252.15 (5) (a) (intro.), (6), (8) and (9). For the purposes of this paragraph, an ambulance service provider, an emergency medical technician or a first responder shall be considered to be a health care provider under s. 146.81 (1). Nothing in this paragraph permits disclosure to an ambulance service provider, an emergency medical technician or a first responder under s. 146.025 252.15 (5) (a), except under s. 146.025 252.15 (5) (a) 11.

**SECTION 377.** 146.75 of the statutes is renumbered 253.08.

**SECTION 378.** 146.78 of the statutes is renumbered 253.10.

**SECTION 379.** 146.80 of the statutes is renumbered 253.07, and 253.07 (1) (b) and (2) (d), as renumbered, are amended to read:

253.07 (1) (b) “Family planning services” mean counseling by trained personnel regarding family planning; distribution of information relating to family planning; and referral to licensed physicians or local health agencies for consultation, examination, medical treatment and prescriptions for the purpose of family planning, but does not include the performance of voluntary termination of pregnancy.

(2) (d) The department shall encourage maximum coordination of family planning services between county social services departments, family planning agencies and local health agencies to maximize the use of health, social service and welfare resources.

**SECTION 380.** 146.81 (1) (m) of the statutes is amended to read:

146.81 (1) (m) An inpatient health care facility, as defined in s. 140.86 50.135 (1).

**SECTION 381.** 146.81 (1) (n) of the statutes is amended to read:

146.81 (1) (n) A community–based residential facility, as defined in s. 140.85 (1) 50.01 (1g).

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**SECTION 382.** 146.81 (4) of the statutes is amended to read:

146.81 (4) “Patient health care records” means all records related to the health of a patient prepared by or under the supervision of a health care provider, including the records required under s. 146.82 (2) (d) and (3) (c), but not those records subject to s. 51.30, reports collected under s. 69.186, records of tests administered under s. 146.025 252.15 (2) (a) 7., 343.305 or 968.38 (4), fetal monitor tracings, as defined under s. 146.817 (1), or a pupil’s physical health records maintained by a school under s. 118.125.

**SECTION 383.** 146.819 (4) (d), (e) and (f) of the statutes are amended to read:

146.819 (4) (d) A health plan department licensed under s. 141.15 50.49 (4).

(e) A tuberculosis sanatorium approved under s. 149.03 252.08.

(f) A public health agency department, as defined in s. 140.03 (1) to 250.01 (4), that ceases to practice or business and transfers the patient health care records in its possession to a successor public health agency department.

**SECTION 384.** 146.82 (2) (a) 8. of the statutes is amended to read:

146.82 (2) (a) 8. To the department under s. 46.73 255.04. The release of a patient health care record under this subdivision shall be limited to the information prescribed by the department under s. 46.73 255.04 (2).

**SECTION 385.** 146.83 (2) of the statutes is amended to read:

146.83 (2) The health care provider shall provide each patient with a statement paraphrasing the provisions of this section either upon admission to an inpatient health care facility, as defined in s. 140.86 50.135 (1), or upon the first provision of services by the health care provider.

**SECTION 386.** 146.88 (title) and (1) (intro.), (a) and (b) of the statutes are renumbered 252.16 (title) and (1) (intro.), (a) and (b).

**SECTION 387.** 146.88 (1) (c) and (d) of the statutes are repealed.

**SECTION 388.** 146.88 (1) (e) of the statutes is renumbered 252.16 (1) (e).

**SECTION 389.** 146.88 (2) to (6) of the statutes are renumbered 252.16 (2) to (6).

**SECTION 390.** 146.882 (title) and (1) (intro.) and (a) of the statutes are renumbered 252.17 (title) and (1) (intro.) and (a), and 252.17 (1) (a), as renumbered, is amended to read:

252.17 (1) (a) “Group health plan” has the meaning given in s. 146.88 252.16 (1) (b).

**SECTION 391.** 146.882 (1) (b) and (c) of the statutes are repealed.
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SECTION 392. 146.882 (1) (d) of the statutes is renumbered 252.17 (1) (d).

SECTION 393. 146.882 (1) (e) of the statutes is renumbered 252.17 (1) (e) and amended to read:

252.17 (1) (e) “Residence” has the meaning give in s. 146.88 252.16 (1) (e).

SECTION 394. 146.882 (2) to (6) of the statutes are renumbered 252.17 (2) to (6).

SECTION 395. 146.995 (1) (b) of the statutes is amended to read:

146.995 (1) (b) “Inpatient health care facility” has the meaning specified in s. 246.08 50.135 (1).

SECTION 396. Chapter 149 (title) of the statutes is repealed.

SECTION 397. 149.01 of the statutes is renumbered 252.073, and 252.073 (1) and (2), as renumbered, are amended to read:

252.073 (1) ESTABLISHMENT, GOVERNMENT. Every county may, under this section, establish a county tuberculosis sanatorium. In counties with a population of over 500,000 or more the institution shall be governed under s. 46.21. In all other counties it shall be governed under ss. 46.18, 46.19 and 46.20, except as otherwise provided in this section.

(2) SUPERINTENDENT. The superintendent shall be either a graduate trained nurse with a graduate degree in nursing or a regular licensed physician, and if a trained. If the superintendent is a registered nurse, the trustees shall appoint and fix the compensation of a visiting physician, and may appoint and fix the compensation of a business manager other than the superintendent, and a director of occupational therapy, the latter. The director of occupational therapy may be employed on a part–time basis jointly with other county or state institutions.

SECTION 398. 149.02 of the statutes is renumbered 252.076, and 252.076 (3) and (5), as renumbered, are amended to read:

252.076 (3) Management of the 2 jointly housed units shall be separate and distinct. The county home unit shall for all purposes be deemed part of, and managed and operated by the same authorities as any previously established and existing county home of the county. Except as herein otherwise provided by statute and so far as applicable, this section and ss. 149.01, 149.02, 252.073 and 252.08 shall continue to apply to a jointly housed county tuberculosis sanatorium and ss. 49.14 and 49.15 shall apply to a jointly housed county home or a unit thereof of a jointly housed county home.

(5) This section shall not apply to counties having a population of over 500,000 or more.

SECTION 399. 149.03 of the statutes is renumbered 252.08 and amended to read:

252.08 (title) Tuberculosis acute treatment centers; maintenance charges; liability of relatives. (1) Hospitals as defined in s. 50.33, tuberculosis sanatoria under ss. 149.01, 252.073 (1) and 149.02 252.076 (1) and private tuberculosis sanatoria under s. 58.06 may submit a request to the department for a certificate of approval as a tuberculosis acute treatment center. The department shall issue a certificate of approval if the hospital or sanatorium meets the standards of Title XIX of the social security act under 42 USC 1396 to 1397e and the rules promulgated and standards established by the department. The certification is to be renewed by the department as provided under ss. 50.32 to 50.39. The certificate of approval shall apply only for the premises, persons and services named in the application and shall may not be transferred or assigned. The department may not withhold, suspend or revoke a certificate of approval unless such a hospital or sanatorium substantially fails to comply with ss. 50.32 to 50.39 or, the standards of Title XIX of the social security act under 42 USC 1396 to 1397e or the rules promulgated and standards adopted established by the department, after having been given a reasonable notice, a fair hearing and an opportunity to comply. The rules and standards for the operation of the hospital or sanatoria providing care for acute tuberculosis patients with active tuberculosis shall be promulgated and established by the department after receiving the advice of the advisory committee on tuberculosis control.

(2) Community–based residential facilities under ch. 50 shall request a certificate of approval from the department in order to provide care for patients suffering from chronic tuberculosis based on rules promulgated and standards adopted established by the department after receiving the advice of the advisory committee on tuberculosis control.

(3) Inpatient care exceeding 30 days for pulmonary tuberculosis patients not eligible for Title XVIII or Title XIX of the social security act federal medicare benefits, for medical assistance or for general relief may be reimbursed if provided by a facility contracted by the department. If the patient has private health insurance, the state shall pay the difference between health insurance payments and total charges.

SECTION 400. 149.04 (title) of the statutes is repealed.

SECTION 401. 149.04 (4) of the statutes is renumbered 252.08 (4), and 252.08 (4) (a) and (b), as renumbered, are amended to read:

252.08 (4) (a) Care of patients transferred to facilities approved under s. 149.03 this section from state institutions or from state penal institutions pursuant to under s. 304.115.

(b) Care of any minor committed to the department in an approved facility under s. 149.03 this section.

SECTION 402. 149.04 (5) (intro.) of the statutes is renumbered 252.08 (5) (a) and amended to read:

252.08 (5) (a) The department shall ensure that charges to the state for care in facilities approved under s. 149.03 this section reflect reasonable and accurate expenses in providing such the care.
Section 403. 149.04 (5) (a) of the statutes is repealed.

Section 404. 149.04 (5) (b) of the statutes is renumbered 252.08 (5) (b) and amended to read:
252.08 (5) (b) The records and accounts of all other facilities approved under s. 149.03 this section shall be available to the department upon request and shall comply with accepted accounting practices.

Section 405. 149.04 (6) of the statutes is repealed.

Section 406. 149.06 (title) of the statutes is renumbered 252.10 (1) (title).

Section 407. 149.06 (1) of the statutes is renumbered 252.10 (1) and amended to read:
252.10 (1) Counties with populations in excess of more than 25,000 may establish and maintain public health dispensaries, and branches thereof, where necessary, branches of the dispensaries for the diagnosis and treatment of persons suffering from or suspected of having mycobacterium tuberculosis or other pulmonary diseases. Two or more counties may jointly establish, operate and maintain such public health dispensaries in order to serve a total population of not less than 25,000. Counties may contract with each other for public health dispensary services. The department and department of revenue shall be notified of the establishment of such public health dispensaries and any contracts pertaining thereto to the dispensaries. The department may establish, operate and maintain public health dispensaries and branches in areas of the state where local authorities have not provided such facilities public health dispensaries.

Section 408. 149.06 (2) of the statutes is repealed.

Section 409. 149.06 (3) of the statutes is renumbered 252.10 (3).

Section 410. 149.06 (4) of the statutes is repealed.

Section 411. 149.06 (5) of the statutes is renumbered 252.10 (5).

Section 412. 149.06 (6) of the statutes is renumbered 252.10 (6), and 252.10 (6) (b), (d), (e) and (f), as renumbered, are amended to read:
252.10 (6) (b) The state reimbursement for each visit for services as ordered by a physician shall be $6 or any greater amount prescribed in rules promulgated by the department. If an X–ray is taken, an additional $6 or any greater amount prescribed in rules promulgated by the department will be credited. Any X–ray taken outside an approved facility under this section or s. 149.03 outside a facility approved under s. 252.08 on positive reactors to the mantoux skin test, or who have a significant reaction to a test for mycobacterium tuberculosis shall qualify for state aid in the same manner as an X–ray taken inside a facility, and such the X–ray shall take the place of the first X–ray eligible for reimbursement as part of a case finding and preventive program under par. (e). The administration and reading of the mantoux skin test for mycobacterium tuberculosis for diagnostic purposes shall be considered one visit. Skin tests Tests for myco-

Section 413. 149.06 (7) of the statutes, as affected by 1991 Wisconsin Act 160, section 8rr, is renumbered 252.10 (7) and amended to read:
252.10 (7) Drugs necessary for the treatment of mycobacterium tuberculosis may be purchased by the department utilizing from the appropriation under s. 20.435 (1) (e) and dispensed to patients through the public health dispensaries or through health care providers, as defined in s. 146.81 (1), other than social workers, marriage and family therapists or professional counselors certified under ch. 457, speech–language pathologists or audiologists licensed under subch. II of ch. 459 or speech and language pathologists licensed by the department of public instruction.
the request of the circuit judge or the governor. Any person violating this section shall be liable to the department for the department and any other property pertaining to said institution the tuberculosis hospital and sanatorium, and all other matters and things pertaining to their usefulness and management; and recommend to the officers in charge of such the changes and additional provisions as it shall deem that the department considers proper.

(c) Inspect each such institution tuberculosis hospital and sanatorium annually, or oftener if necessary; and, whenever if directed by the governor make special investigation into their, investigate the past or present management, or anything connected therewith with the management, and report to him the governor the testimony taken, the facts found, and conclusions thereon made.

(d) Inform the governor, and the district attorney of the county in which the institution tuberculosis hospital and sanatorium is located, of any violation of law disclosed in any investigation of any such institution the tuberculosis hospital and sanatorium.

(2) All trustees, managers, directors, superintendents and other officers or employees of the institutions aforesaid shall at all times afford, to the department or its agents, unrestrained facility for inspection of and free access to all parts of the buildings and grounds and to all books and papers of such institutions, the tuberculosis hospital and sanatorium and shall give, either verbally or in writing, such information as the department requires. Any person violating this subsection shall forfeit not less than $10 nor more than $100. The department may administer oaths and take testimony and may cause depositions to be taken pursuant to law. All expenses of such the investigations, including fees of officers and witnesses, shall be charged to paid from the appropriation for the department under s. 20.435 (1) (a).
254.11 (9) “Lead poisoning or lead exposure” means a level of lead in the blood beyond 25 of 10 or more micrograms per 100 milliliters of blood, or the corresponding erythrocyte protoporphyrin level as determined by the department by rule.

 SECTION 430. 151.01 (5) of the statutes is renumbered 254.11 (10), and 254.11 (10) (a), as renumbered, is amended to read:

254.11 (10) (a) Has legal title to any dwelling or unit, with or without accompanying actual occupancy; or

 SECTION 431. 151.03 of the statutes is renumbered 254.12.

 SECTION 432. 151.05 of the statutes is renumbered 254.13 and amended to read:

254.13 Reports of lead poisoning or lead exposure. Every physician who diagnoses lead poisoning or lead exposure, or any nurse, hospital administrator, director of a clinical laboratory or public health officer who has verified information of the existence of any person found or suspected to have lead poisoning or lead exposure, shall report to the department or to the local health officer of the region in which the person resides within 48 hours after verifying this information. The local health officer shall report to the department the name, address, laboratory results, date of birth and any other information about the person that the department deems essential.

Any physician, nurse, hospital administrator, director of a clinical laboratory, public health officer or allied health professional making such a report in good faith shall be immune from any civil or criminal liability that otherwise might be incurred from making the report.

 SECTION 433. 151.07 of the statutes is renumbered 254.14.

 SECTION 434. 151.09 (intro.) and (1) to (6) of the statutes are renumbered 254.15 (intro.) and (1) to (6), and 254.15 (1), as renumbered, is amended to read:

254.15 (1) Provide for or support the monitoring and validation of all medical laboratories and private and public hospitals that perform lead and corresponding erythrocyte protoporphyrin determination tests on human blood or other tissues, under the provisions of s. 443.45 252.22.

 SECTION 435. 151.09 (7) (intro.) and (am) of the statutes are consolidated, renumbered 254.15 (7) and amended to read:

254.15 (7) From the appropriation under s. 20.435 (1) (ef) the department shall allocate all of the following, distribute, under criteria that ensure that funding is provided for areas with significant lead poisoning problems—(am) A total of $145,500 in fiscal year 1991–92 and a total of $259,100 in fiscal year 1992–93 as grants to county or city health departments to detect lead poisoning or lead exposure, to provide educational programs about the health dangers of lead poisoning or lead exposure and to perform related activities. Of these amounts, the department shall allocate not less than $98,900 in fiscal year 1991–92 and not less than $205,600 in fiscal year 1992–93 to a local board of health in a 1st class city. The department shall allocate grants under this paragraph under criteria that ensure that funding is provided for areas with significant incidence of lead poisoning.

 SECTION 436. 151.11 of the statutes is renumbered 254.16 and amended to read:

254.16 Local authority. This chapter subchapter does not prohibit any city, village, town or other political subdivision from enacting and enforcing ordinances establishing control that provides the same or higher standards than those set forth in this chapter subchapter. Nothing in this chapter subchapter may be interpreted or applied in any manner to impair the right of any person, entity, municipality or other political subdivision to sue for damages, or equitable relief or to restrain a violation of such an ordinance.

 SECTION 437. 151.12 (intro.) of the statutes is renumbered 254.28 (intro.).

 SECTION 438. 151.12 (1) of the statutes is renumbered 254.28 (1) and amended to read:

254.28 (1) Notwithstanding s. 451.01 (4) 254.11 (intro.), (8) and (9), whenever the center for disease control of the federal department of health and human services specifies a standard for the determination of lead–bearing paint or lead poisoning that differs from that specified in s. 451.01 (4) 254.11 (8) and (9), defining “lead–bearing paint” or “lead poisoning or lead exposure” to correspond to the specification of the center for disease control. Rules promulgated under this subsection shall supersede s. 145.01 (4) 254.11 (8) and (9) with respect to the requirements of this chapter.

 SECTION 439. 151.13 of the statutes is renumbered 254.30 and amended to read:

254.30 Enforcement; penalty. (1) Enforcement. The department shall report any violation of this chapter ss. 254.11 to 254.16 or rules promulgated under those sections to the district attorney of the county in which the person under the provisions of s. 443.45 252.22.

 SECTION 435. 151.09 (7) (intro.) and (am) of the statutes are consolidated, renumbered 254.15 (7) and amended to read:

254.15 (7) From the appropriation under s. 20.435 (1) (ef) the department shall allocate all of the following, distribute, under criteria that ensure that funding is provided for areas with significant lead poisoning problems—(am) A total of $145,500 in fiscal year 1991–92 and a total of $259,100 in fiscal year 1992–93 as grants to county or city health departments to detect lead poisoning or lead exposure, to provide educational programs about the health dangers of lead poisoning or lead exposure and to perform related activities. Of these amounts, the department shall allocate not less than $98,900 in fiscal year 1991–92 and not less than $205,600 in fiscal year 1992–93 to a local board of health in a 1st class city. The department shall allocate grants under this paragraph under criteria that ensure that funding is provided for areas with significant incidence of lead poisoning.

(2) Penalty. Any person who violates this chapter ss. 254.11 to 254.16 or rules promulgated under those sections may be required to forfeit not more than $1,000. Each day of continued violation constitutes a separate offense.

 SECTION 440. 154.01 (4) of the statutes is amended to read:

154.01 (4) “Inpatient health care facility” has the meaning provided under s. 140.86 50.135 (1) and
includes community–based residential facilities, as defined in s. 50.01 (1g).

SECTION 441. 155.01 (6) of the statutes is amended to read:

155.01 (6) “Health care facility” means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community–based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under ss. 49.14, 49.16, 49.171, 50.02, 50.03, 50.35, 51.08, 51.09, 58.06, 140.01 or 149.02 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06 or 149.06 252.10 or ch. 142.

SECTION 442. 155.01 (7) of the statutes is amended to read:

155.01 (7) “Health care provider” means a nurse licensed or permitted under ch. 441, a chiropractor licensed under ch. 446, a dentist licensed under ch. 447, a physician, podiatrist or physical therapist licensed or an occupational therapist or occupational therapy assistant certified under ch. 448, a person practicing Christian Science treatment, an optometrist licensed under ch. 449, a psychologist licensed under ch. 455, a partnership thereof, a corporation thereof that provides health care services, an operational cooperative sickness care plan organized under ss. 185.981 to 185.985 that directly provides services through salaried employees in its own facility, or a home health agency, as defined in s. 141.15 50.49 (1) (a).

SECTION 443. 165.25 (6) (c) of the statutes is amended to read:

165.25 (6) (c) Physicians under s. 140.05 (16) (fm) 2 252.04 (9) (b) are covered by this section and shall be considered agents of the department of health and social services for purposes of determining which agency head may request the attorney general to appear and defend them.

SECTION 444. 166.15 (1) (f) of the statutes is amended to read:

166.15 (1) (f) “Nuclear incident” means any sudden or nonsudden release of radiation, as defined under s. 140.52 254.31 (3g), from radioactive waste being stored or disposed of in a waste repository or transported. “Nuclear incident” does not include any release of radiation from radioactive waste being transported under routine operations.

SECTION 445. 182.004 (3) (a) of the statutes is amended to read:

182.004 (3) (a) To acquire land and plat the same, laying out streets, lots, playgrounds and such other subdivisions as it may deem best; but no plat shall be valid until approved by the public land commission or city planning commission of the city in which the property of such corporation is located, or if such land be located within 6 miles of a 1st class city of the first class, by the public land commission or city planning commission of such the 1st class city of the first class, if there be a public land commission or city planning commission in such the city, and until accepted by the common council of the city within which such the land is located, or if within 6 miles of a 1st class city of the first class, until accepted by the common council of such 1st class city of the first class, and no land shall be acquired by the corporation in any city or within 6 miles from the boundary of a city having that has a local health department or health officer, as specified in s. 250.01 (4) (a) 2. or 3. or (b), unless and until the location of such land has been approved by said the local health department or health officer as a healthful location.

SECTION 446. 185.981 (4t) of the statutes is amended to read:

185.981 (4t) A sickness care plan operated by a cooperative association is subject to ss. 146.024 (2) 252.14, 631.89 and 632.87 (2m), (3), (4) and (5) and ch. 155.

SECTION 447. 231.01 (10) of the statutes is amended to read:

231.01 (10) “State health planning and development agency” means the department of health and social services, as designated under s. 440.82 (1) 250.04 (12).

SECTION 448. Chapter 250 (title) of the statutes is created to read:

CHAPTER 250

HEALTH; ADMINISTRATION AND SUPERVISION

SECTION 449. 250.01 (1), (3), (4), (5), (7) and (9) of the statutes are created to read:

250.01 (1) “Chief medical officer” means a physician who is appointed by the state health officer under s. 250.02 (2).

(3) “Local board of health” means the policy–making body for a local health department.

(4) “Local health department” means any of the following:

(a) In a county with a population of less than 500,000, any of the following:

1. A county health department established under s. 251.02 (1), including a county health department whose powers and duties are transferred to a county department of human services under s. 46.23 (3) (b) 1. c.

2. A city–county health department established under s. 251.02 (1).

3. A city health department that was established before the effective date of this subdivision .... [revisor inserts date].

4. A village or town health department under s. 251.02 (3m).

(b) In a county with a population of 500,000 or more, a city health department or a village health department established under s. 251.02 (2).

(c) A multiple county health department established under s. 251.02 (3).

(5) “Local health officer” means the health officer who is in charge of a local health department.
(7) “Registered nurse” means a registered nurse who is licensed under s. 441.06 or permitted under s. 441.08.

(9) “State health officer” means the individual who is appointed by the secretary to develop public health policy for the state and direct state public health programs.

SECTION 450. 250.02 (title) and (2) of the statutes are created to read:

250.02 (title) State health officials.

(2) CHIEF MEDICAL OFFICERS; QUALIFICATIONS; DUTIES. The state health officer shall appoint chief medical officers in the classified service to provide public health consultation to, and leadership for, state health programs. The chief medical officers shall also serve as state epidemiologists under sub. (1), for acute and communicable diseases, occupational and environmental diseases, maternal and child health and chronic diseases. The chief medical officers shall be physicians who have training and expertise, as prescribed by the department, appropriate to their areas of assignment. The chief medical officers shall have all of the powers and duties that are designated to them by the state health officer to enforce the health laws of the state and to advise state and local officials as to health promotion, disease prevention and public health intervention strategies necessary to prevent morbidity and unnecessary mortality.

SECTION 451. 250.03 of the statutes is created to read:

250.03 Public health system. (1) The department shall:

(a) Maintain a public health system in cooperation with local health departments; community organizations; and medical clinics that are operated by the governing bodies, or agencies of the governing bodies, of federally recognized American Indian tribes or bands located in this state.

(b) Serve as the state lead agency for public health.

(c) Assess the health needs in the state based on statewide data collection.

(d) Advise the legislature on the development of an adequate statutory base for health activities in the state.

(e) Establish statewide health objectives and delegate power to local health departments to achieve the objectives as the department considers appropriate.

(f) Support local public health service capacity building through grants, consultation and technical assistance.

(g) Develop policy and provide leadership in public health throughout the state that fosters local involvement and commitment, that emphasizes public health needs and that advocates for equitable distribution of public health resources and complementary private activities commensurate with public health needs.

(h) Distribute state and federal public health funds under its control in a manner that will promote the development and maintenance of an integrated system of community health services.

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(i) Require, as a condition for distributing funds under par. (b) at the local level, that services at that level be coordinated.

(j) Advocate for the provision of reasonable and necessary public health services.

(2) The department may enter into agreements and provide consultation on matters relating to human health.

SECTION 452. 250.04 (2) (b) of the statutes is created to read:

250.04 (2) (b) If local health departments fail to enforce public health statutes or rules, the department may enforce those statutes and rules. If the department does this, the county, city or village for which the local health department has jurisdiction shall reimburse the department for expenses that the department incurs in enforcing communicable disease statutes and rules.

SECTION 453. 250.04 (3) (a) and (b) 1. and 2. of the statutes are created to read:

250.04 (3) (a) The department shall establish and maintain surveillance activities sufficient to detect any occurrence of acute, communicable or chronic diseases and threat of occupational or environmental hazards, injuries or changes in the health of mothers and children.

(b) 1. The department shall analyze occurrences, trends and patterns of acute, communicable or chronic diseases, maternal and child health, injuries and occupational and environmental hazards and distribute information based on the analyses.

2. The department shall, in cooperation with local health departments, maintain a public health data system.

SECTION 454. 250.04 (3) (c) of the statutes is created to read:

250.04 (3) (c) The department shall publish an annual maternal and child health report, including morbidity and mortality indicators for the state, regions of the state, counties, certain cities and subpopulations of the state.

SECTION 455. 250.04 (4) of the statutes is created to read:

250.04 (4) (a) The department shall administer programs for the control and prevention of public health problems.

(b) The department shall be responsible for follow-up investigations of unusual occurrences of acute, communicable and chronic diseases, occupational and environmental hazards, unusual injuries and unusual changes in maternal and child health.

SECTION 456. 250.04 (6) of the statutes is created to read:

250.04 (6) The department shall provide consultation, technical assistance and training regarding public health to local health departments, community organizations and others.

SECTION 457. 250.07 of the statutes is created to read:

250.07 Public health planning. The department shall:
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(1) At least once every 10 years, develop a successor document to healthier people in Wisconsin, a public health agenda for the year 2000, published by the department in February 1990.

(2) Initiate, conduct and periodically evaluate a process for planning to use the resources of the state to meet the health needs of residents and, in conjunction with other state agencies, to implement the objectives that relate to state government in statutes or in public health rules promulgated by the department. The process shall involve representatives from public health organizations, governmental agencies and the general public.

(3) Provide technical assistance to local units of government for the development of local public health plans.

(4) Serve as the state lead agency in coordinating the activities within state government involving the collection, retrieval, analysis, reporting and publication of statistical information and other information related to health and health care.

**SECTION 458.** 250.08 (6) of the statutes is created to read:

250.08 (6) DISTRIBUTION OF FUNDS. (a) The department shall distribute state and federal funds under its control under this section in a manner that will promote the development and maintenance of integrated community health services.

(b) The department shall require the coordination of services at the local level when distributing state and federal funds under this section that are under the department’s control.

**SECTION 459.** 251.001 of the statutes is created to read:

251.001 Legislative findings. The legislature finds that the provision of public health services in this state is a matter of statewide concern.

**SECTION 460.** 251.01 (1) of the statutes is created to read:

251.01 (1) “County board of health” means a board of health for a county health department.

**SECTION 461.** 251.02 of the statutes is created to read:

251.02 Local health department; establishment.

(1) In counties with a population of less than 500,000, the county board shall establish a county health department that meets the requirements of this chapter. The county health department shall serve all areas of the county that are not served by a city health department that was established prior to the effective date of this subsection .... [revisor inserts date].  No city health department established prior to the effective date of this subsection .... [revisor inserts date]. A village or town that does so shall establish a local health department and elect a local health officer consistent with this chapter.

(2) In a county with a population of 500,000 or more, the governing body of each city or village shall establish a local health department that meets the requirements of this chapter or shall contract with the local health department of another city or village in the county to have that local health department provide services in the city or village.

(3) A county board may establish a multiple county health department in conjunction with the county board of another county.

(3m) If a county has a population of at least 100,000 but less than 500,000 and the county board of that county has, by July 1, 1985, abolished a county health commission or committee established under s. 141.10, 1991 stats., a village board in that county may continue and establish as a local board of health a village board of health that was established prior to the effective date of this subsection .... [revisor inserts date], and a town board in that county may continue and establish as a local board of health a town board of health that was established prior to the effective date of this subsection .... [revisor inserts date]. A village or town that does so shall establish a local health department and elect a local health officer consistent with this chapter.

**SECTION 462.** 251.03 of the statutes is created to read:

251.03 Local board of health; members. (1) A local board of health shall consist of not more than 9 members. At least 3 of these members shall be persons who are not elected officials or employees of the governing body that establishes the local health department and who have a demonstrated interest or competence in the field of public health or community health. In appointing the members who are not elected officials or employees, a good faith effort shall be made to appoint a registered nurse and a physician. Members of the local board of health shall reflect the diversity of the community. A county human services board under s. 46.23 (4) may act as a county board of health if the membership of the county human services board meets the qualifications specified in this subsection and if the county human services board is authorized to act in that capacity by the board of supervisors. If a county human services board acts in this capacity, it shall use the word “health” in its title.

(2) The chief executive officer of a city or a village shall appoint members of a local board of health, subject to confirmation by the governing body. In a county with a county executive, the county executive shall appoint members of the county board of health, subject to confirmation by the county board of supervisors. In a county without a county executive, members of the county board of health shall be appointed by the chairperson of the county board of supervisors, subject to confirmation by the county board of supervisors. The person who appoints members of the local board of health may desig-
Subsections (1) to (4) do not apply to a village or town that establishes a local health department under s. 251.02 (3m). In a village or town that does so, the village board or town board shall establish itself as a local board of health or appoint either wholly or partially from its own members a local board of health that consists of a suitable number of competent persons. A local board of health under this subsection shall elect a chairperson and clerk.

(5) No governing body of a county, city, village or town is required to use the term “local board of health” to refer to a local board of health that is established under this section.

SECTION 463. 251.04 of the statutes is created to read:

251.04 Local board of health; powers and duties.

(1) A city or county board of health shall govern each local health department and assure the enforcement of state public health statutes and public health rules of the department as prescribed for a Level I local health department. A local board of health may contract or subcontract to provide public health services. The contractor’s staff shall meet the appropriate qualifications for positions in a Level I local health department.

(2) A city or county board of health shall assure that its local health department is a Level I, Level II or Level III local health department, as specified in s. 251.05 (1).

(3) A city or county board of health may adopt those regulations, for its own guidance and for the governance of the local health department, that it considers necessary to protect and improve public health. The regulations may be no less stringent than, and may not conflict with, state statutes and rules of the department.

(4) A local board of health shall report to the department as required by rule.

(5) A local board of health shall meet at least quarterly.

(6) A local board of health shall:

(a) Assess public health needs and advocate for the provision of reasonable and necessary public health services.

(b) Develop policy and provide leadership that fosters local involvement and commitment, that emphasizes public health needs and that advocates for equitable distribution of public health resources and complementary private activities commensurate with public health needs.

(9) In counties with a single county health department and either a county executive or a county administrator, the county executive or county administrator may assume the powers and duties of a local board of health under this section. If a county executive or a county administrator elects to assume those powers and duties, the local board of health shall be only a policy–making body determining the broad outlines and principles governing the administration of the county health department.

SECTION 464. 251.05 of the statutes is created to read:

251.05 Local health department; levels of service; duties. (1) A local health department shall meet the following requirements specified in par. (a) and may, unless sub. (6) applies, meet the following requirements specified in par. (b) or (c):

(a) As a Level I local health department, at least the level of services specified in sub. (2) (a) with a local health officer who at least meets the qualifications specified in s. 251.06 (1) (a) or with a person who meets the qualifications specified in s. 251.06 (1m).

(b) As a Level II local health department, at least the level of services specified in sub. (2) (b) with a local health officer who at least meets the qualifications specified in s. 251.06 (1) (b) or with a person who meets the qualifications specified in s. 251.06 (1m).

(c) As a Level III local health department, at least the level of services specified in sub. (2) (c) with a local health officer who at least meets the qualifications specified in s. 251.06 (1) (c) or with a person who meets the qualifications specified in s. 251.06 (1m).

(2) The services to be provided by the 3 levels of local health departments are as follows:

(a) A Level I local health department shall provide at least surveillance, investigation, control and prevention of communicable diseases, other disease prevention, health promotion and human health hazard control.

(b) A Level II local health department shall provide at least the services under par. (a) and additional services specified by the department by rule under s. 251.20 (2).

(c) A Level III local health department shall provide at least the services under par. (a) and additional services specified by the department by rule under s. 251.20 (2) and (3).

(3) A local health department shall:

(a) Regularly and systematically collect, assemble, analyze and make available information on the health of the community, including statistics on health status, community health needs and epidemiologic and other studies of health problems.

(b) Develop public health policies and procedures for the community.
(c) Involve key policymakers and the general public in determining a set of high priority public health services and assure access to these services to every member of the community.

(d) Submit data, as requested, to the local public health data system established by the department.

(4) Except as provided in sub. (6), a local health department is not required to provide the level of services that is specified in sub. (1) (b) or (c) or to have a local health officer who meets the qualifications specified in sub. (1) (b) or (c).

(5) Except as provided in sub. (6), the department may not require a local health department to provide the level of services that is specified in sub. (1) (b) or (c) or to have a local health officer who meets the qualifications specified in sub. (1) (b) or (c).

(6) A local health department may be required to provide the level of services that is specified in sub. (1) (b) or (c) if and only to the extent that these services and qualifications are funded from state and federal funds that are available and are additional to any funding available on the effective date of this subsection .... [revisor inserts date].

Section 465. 251.06 of the statutes is created to read:

251.06 Local health officer; qualifications; duties.  
(1) (a) 1. Except as provided in subd. 2, a local health officer of a Level I local health department shall have at least a bachelor’s degree from a nursing program accredited by the national professional nursing education accrediting organization or from a nursing program accredited by the board of nursing.

2. A local health officer of a village or town health department established under s. 251.02 (3m) shall be either a physician or a registered nurse. The local health officer shall be a voting member of the local board of health and shall take an oath of office. With respect to the levels of services of a Level I local health department, as specified in s. 251.05 (2) (a), the local health officer shall be authorized to act by and be directed by the county health officer of the county specified under s. 251.02 (3m).

(b) A local health officer of a Level II local health department shall have at least 3 years of experience in a full–time position with a public health agency, including responsibility for a communicable disease prevention and control program, preferably in a supervisory or other administrative position, and at least one of the following:

1. A bachelor’s degree from a nursing program accredited by the national professional nursing education accrediting organization or from a nursing program accredited by the board of nursing, either of which shall include preparation in public health nursing.

2. A bachelor’s degree in public health, environmental health, the physical or biological sciences or a similar field.

(c) A local health officer of a Level III local health department shall have at least one of the following:

1. A master’s degree in public health, public administration, health administration or, as defined in rules promulgated by the department, a similar field and 3 years of experience in a full–time administrative position in either a public health agency or public health work.

2. A bachelor’s degree and 16 graduate semester credits towards a master’s degree in public health, public administration, health administration or, as defined in rules promulgated by the department, a similar field and 5 years of experience in a full–time administrative position in either a public health agency or public health work.

3. A license to practice medicine and surgery under ch. 448 and at least one of the following:

a. Three years of experience in a full–time administrative position in either a public health agency or public health work.

b. Eligibility for certification by the American board of preventive medicine in public health or general preventive medicine.

c. A master’s degree in public health, public administration, health administration or, as defined in rules promulgated by the department, a similar field.

(1m) Notwithstanding sub. (1), in a county with a county department under s. 46.23, the local health officer need not meet the requirements under sub. (1) if that county department employs at least one person who meets the requirements under sub. (1).

(2) (a) Except as provided in par. (b), a local health officer shall be a full–time employee of a local health department.

(b) A local health officer of a county health department in a county under s. 251.02 (3m) shall be a full–time employee of the county who meets the qualifications of a local health officer of a Level I local health department.

(3) A local health officer shall:

(a) Administer the local health department in accordance with state statutes and rules.

(b) Enforce state public health statutes and rules.

(c) Enforce any regulations that the local board of health adopts and any ordinances that the relevant governing body enacts, if those regulations and ordinances are consistent with state public health statutes and rules.

(d) Administer all funds received by the local health department for public health programs.

(e) Appoint all necessary subordinate personnel, assure that they meet appropriate qualifications and have supervisory power over all subordinate personnel. Any public health nurses and sanitarians hired for the local health department shall meet any qualification requirements established in rules promulgated by the department.
(f) Investigate and supervise the sanitary conditions of all premises within the jurisdictional area of the local health department.

(g) Have access to vital records and vital statistics from the register of deeds, as specified in ch. 69.

(4) (a) Except as provided in pars. (b) and (c), a local health officer shall be appointed in the same manner as are members of a local board of health under s. 251.03 (2).

(c) A local health officer of a village or town health department established under s. 251.02 (3m) shall be appointed by the local board of health.

SECTION 466. 251.10 of the statutes is created to read: 251.10 County health department, how financed. The county board shall appropriate funds for the operation of a single county health department that is established under s. 251.02 (1) and determine compensation of county health department employees. The local board of health shall annually prepare a budget of the proposed expenditures of the county health department for the ensuing fiscal year.

SECTION 467. 251.12 of the statutes is created to read: 251.12 City health department, how financed. The common council shall appropriate funds for the operation of a city health department that is established as specified in s. 251.02 (1) and (2).

SECTION 468. 251.125 of the statutes is created to read: 251.125 Village health department, how financed. If a village health department is established under s. 251.02 (2) or (3m), the village board shall appropriate funds for the operation of the department.

SECTION 468m. 251.127 of the statutes is created to read: 251.127 Town health department, how financed. If a town health department is established under s. 251.02 (3m), the town board shall appropriate funds for the operation of the department.

SECTION 469. 251.20 of the statutes is created to read: 251.20 Rule making. The department shall promulgate rules that specify all of the following:

(1) Required services for each of Levels I, II and III local health departments under s. 251.05 (2).

(2) Additional required services for Level II local health departments under s. 251.05 (2) (b), including services that address at least one of the objectives from each section of healthier people in Wisconsin: a public health agenda for the year 2,000, published by the department in February 1990. The initial rules concerning these services shall correspond to the objectives set forth in each section of that document.

SECTION 470. 252.04 (title) of the statutes is created to read: 252.04 (title) Immunization program. SECTION 471. 252.05 (8) of the statutes is created to read:

252.05 (8) The department shall print and distribute, without charge, to all local health departments and, upon request, to health care providers and facilities a chart that provides information about communicable diseases.

SECTION 472. 252.07 (2) of the statutes is created to read:

252.07 (2) The department shall identify groups at risk for contracting or transmitting mycobacterium tuberculosis and shall recommend the protocol for screening members of those groups. If necessary to prevent or control the transmission of mycobacterium tuberculosis, the department may promulgate rules that require screening of members of specific groups that are at risk for contracting or transmitting mycobacterium tuberculosis.

SECTION 473. 252.13 (title) and (1) of the statutes are created to read:

252.13 (title) Blood tests for HIV. (1) In this section, “autologous transfusion” means the receipt by an individual, by transfusion, of whole blood, blood plasma, a blood product or a blood derivative, which the individual has previously had withdrawn from himself or herself for his or her own use.

SECTION 474. Chapter 253 (title) of the statutes is created to read:

CHAPTER 253
MATERNAL AND CHILD HEALTH

SECTION 475. 253.01 of the statutes is created to read: 253.01 Definition. In this chapter, “division” means the division within the department that has primary responsibility for health issues.

SECTION 476. 253.02 of the statutes is created to read: 253.02 Department; powers and duties. (1) In this section:

(a) “Children with special health care needs” means children who have health problems that require intervention beyond routine and basic care, including children with or at risk for disabilities, handicapping conditions, chronic illnesses and conditions, health–related educational problems and health–related behavioral problems.

(b) “Preventive health services for children” includes assessment and appropriate follow–up regarding a child’s growth and development, immunization status, nutrition, vision and hearing.

(2) The department shall maintain a maternal and child health program within the division, to promote the reproductive health of individuals and the growth, devel-
The program shall include all of the following:

(a) Reproductive health services, including health services prior to conception and family planning services.

(b) Pregnancy–related services to pregnant women from the time of confirmation of the pregnancy through the maternal postpartum period, including pregnancy information, referral and follow–up, early identification of pregnancy and prenatal services.

(c) Infant and preschool health services to children from birth to 5 years of age, including neonatal health services, preventive health services for children and parent education and support services.

(d) Child and adolescent health services to promote the physical and psychosocial health of children and adolescents, including preventive health services for children, adolescent health services, teen pregnancy prevention services, alcohol and other drug abuse prevention and mental health–related services.

(e) General maternal and child health services, including health education, oral health, nutrition, childhood and adolescent injury prevention and family health benefits counseling.

(f) Health services to children with special health care needs.

(g) Maternal and child health system coordination services that promote coordination of public and private sector activities in areas of the maternal and child health program described in pars. (a) to (f).

(2m) Nothing in this section authorizes the performance, promotion or encouragement of voluntary termination of pregnancy.

(3) The department shall designate a subunit within the division to have responsibility for the maternal and child health program. The subunit shall be comprised of an adequate number of interdisciplinary professional staff with expertise in maternal and child health who will assume responsibility for all of the following:

(a) Planning, coordination, data collection and evaluation of the program.

(b) Providing consultation and technical assistance to local health professionals.

(c) Coordinating the program activities with related activities conducted under the authority of other state and federal agencies.

SECTION 477. Chapter 254 of the statutes is created to read:

CHAPTER 254
ENVIRONMENTAL HEALTH

SUBCHAPTER I
GENERAL PROVISIONS

254.01 Definitions. In this chapter:

(1) “Environmental health” means the assessment, management, control and prevention of environmental factors that may adversely affect the health, comfort, safety or well–being of individuals.

(2) “Human health hazard” means a substance, activity or condition that is known to have the potential to cause acute or chronic illness or death if exposure to the substance, activity or condition is not abated.

254.015 Departmental power; designation. The department may designate a local health department to carry out a function of the department under this chapter.

254.02 Health risk assessments. (1) In this section:

(a) “Adverse health effect” means a condition that results in human morbidity, mortality, impaired reproductive function or toxicity or teratogenic, carcinogenic or mutagenic effects.

(b) “Health risk assessment” means the determination of the relationship between the magnitude of exposure to environmental hazards and the probability of occurrence of adverse health effects.

(2) The department is the lead state agency for health risk assessment.

(3) (a) The departments of agriculture, trade and consumer protection, corrections, industry, labor and human relations, and natural resources shall enter into memoranda of understanding with the department to establish protocols for the department to review proposed rules of those state agencies relating to air and water quality, occupational health and safety, institutional sanitation, toxic substances, indoor air quality, food protection or waste handling and disposal.

(b) The department shall review proposed rules in the areas under par. (a) and make recommendations to the appropriate state agency if public health would be adversely impacted or if prevention of human health hazards or disease is not adequately addressed by the proposed rules. The department shall make recommendations for enforcement standards to address public health concerns of the proposed rules.

(4) The department and the state laboratory of hygiene shall enter into a memorandum of understanding that delineates the public health testing and consultative support that the state laboratory of hygiene shall provide to local health departments.

(5) The department shall assess the acute or chronic health effect from occupational or environmental human health hazards exposure as follows:

(a) The chief medical officer for environmental health shall establish a system for assessment, collection and surveillance of disease outcome and toxic exposure data.

(b) State agencies and local health departments shall report known incidents of environmental contamination to the department. The department shall investigate human health implications of an incident and determine the need to perform a health risk assessment.
ment may require the party that is responsible for an incident to perform a health risk assessment.

(6) State agencies that require health risk assessments as part of their permit issuance or regulatory responsibilities shall enter into a memorandum of understanding with the department that permits the state health officer to establish a risk management protocol to review and make recommendations on the completeness of the health risk assessments.

SUBCHAPTER II
TOXIC SUBSTANCES

254.22 Indoor air quality. The department shall do all of the following:

(1) Investigate illness or disease outbreaks suspected of being caused by poor indoor air quality. The department shall promote or require control measures if indoor air quality is established to be the cause of illness or disease outbreaks.

(2) Assist local health departments in the adoption of regulations that establish standards for indoor air quality in public buildings to protect the occupants from adverse health effects due to exposure to chemical or biological contaminants.

(3) Provide training and technical support to local health departments for conducting indoor air quality testing and investigations.

(4) Assist the department of industry, labor and human relations with the enforcement of s. 101.123.

254.28 (2) The minimum standards that a local health department shall meet, including lead poisoning assessment, screening, education and abatement assistance, if it offers a lead detection and abatement program.

SUBCHAPTER III
RADIATION PROTECTION

254.31 Definitions. In this subchapter:

SUBCHAPTER IV
RECREATIONAL SANITATION

254.46 Beaches. The department or a local health department shall close or restrict swimming, diving and recreational bathing if a human health hazard exists in any area used for those purposes on a body of water and on associated land and shall require the posting of the area.

254.47 Recreational permits and fees.

SUBCHAPTER V
ANIMAL–BORNE AND VECTOR–BORNE DISEASE CONTROL

254.50 Definition. In this subchapter, “vector” means a carrier, including an arthropod or an insect, that transfers an infective agent from one host to another.

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254.51 Powers and duties. (1) The state epidemiologist for communicable disease shall take those measures that are necessary for the prevention, surveillance and control of human disease outbreaks associated with animal–borne and vector–borne transmission.

(2) The department shall enter into memoranda of understanding with the department of agriculture, trade and consumer protection, the department of industry, labor and human relations and the department of natural resources regarding the investigation and control of animal–borne and vector–borne disease.

(3) The department shall promulgate rules that establish measures for prevention, surveillance and control of human disease that is associated with animal–borne and vector–borne disease transmission.

(4) The local health department shall enforce rules that are promulgated under sub. (3).

(5) The local board of health may adopt regulations and recommend enactment of ordinances that set forth requirements for animal–borne and vector–borne disease control to assure a safe level of sanitation, human health hazard control or health protection for the community, including the following:

(a) The control of rats, stray animals, noise and rabies and other diseases.

(b) The control of wildlife, including the keeping of dangerous wild animals, disease transmission and human health hazard control and eradication.

(c) Pest control, including community sanitation, rodent and vector control, resident responsibilities and the health impact of pesticide use.

SUBCHAPTER VI
HUMAN HEALTH HAZARDS

254.55 Definitions. In this subchapter:

(1) “Dwelling” means any structure, all or part of which is designed or used for human habitation.

(2) “Owner” means any of the following:

(a) A person who has legal title to a dwelling.

(b) A person who has charge, care or control of a dwelling or unit of a dwelling as an agent of or as executor, administrator, trustee or guardian of the estate of a person under par. (a).

254.59 Human health hazards.

254.593 Authority of the department and local health departments. The department or a local health department may declare housing that is dilapidated, unsafe or unsanitary to be a human health hazard.

SUBCHAPTER VII
LODGING AND FOOD PROTECTION

254.62 Coordination; certification. (1) The department shall enter into memoranda of understanding with other state agencies to establish food protection measures.
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(2) The department shall promulgate rules that establish a food sanitation manager certification program.

CHAPTER 255

CHRONIC DISEASE AND INJURIES

SECTION 478. Chapter 255 (title) of the statutes is created to read:

CHAPTER 255

CHRONIC DISEASE AND INJURIES

SECTION 479. Subchapter I (title) [precedes 255.01] of chapter 255 of the statutes is created to read:

CHAPTER 255

SUBCHAPTER I

DEFINITIONS

SECTION 480. 255.01 of the statutes is created to read:

255.01 Definitions. In this chapter:

(1) “Chronic disease” means any disease, illness, impairment or other physical condition that requires health care and treatment over a prolonged period and, although amenable to treatment, is irreversible and frequently progresses to increasing disability or death.

(2) “Injury” means damage to the human body that is the result of some acute exposure to harm. “Injury” includes all of the following:

(a) Unintentional injuries including physical damage resulting from transportation–related crashes, fires, burns, submersion, suffocation, falls, natural and environmental factors and occupational hazards and exposures.

(b) Intentional injuries, including physical damage resulting from deliberate assault by one person on another or self–inflicted acts.

(3) “Risk assessment” means the measurement and evaluation of specific lifestyle and environmental conditions to determine the presence of, and the extent of, the threat resulting from, these factors that may increase the risk of developing chronic disease.

SECTION 481. Subchapter II (title) [precedes 255.02] of chapter 255 of the statutes is created to read:

CHAPTER 255

SUBCHAPTER II

CHRONIC DISEASE PREVENTION, ASSESSMENT AND CONTROL

SECTION 482. 255.02 of the statutes is created to read:

255.02 Duties of the state epidemiologist for chronic disease. The state epidemiologist for chronic disease shall do all of the following:

(1) Develop and maintain a system for detecting and monitoring chronic diseases within this state.

(2) Investigate and determine the epidemiology of those conditions that contribute to preventable or premature illness, disability and death.

SECTION 483. 255.03 of the statutes is created to read:

255.03 Duties of the department. The department shall:

(1) Conduct programs to prevent, delay and detect the onset of chronic diseases, including cancer, diabetes, cardiovascular and pulmonary disease, cerebrovascular disease and genetic disease, and other chronic diseases that the department determines are important to prevent, delay and detect in order to promote, protect and maintain the public’s health.

(2) Establish programs of community and professional education relevant to the detection, prevention and control of chronic diseases.

(3) Assist local health departments in performing activities related to chronic disease, including risk assessment, monitoring, surveillance and education.

SECTION 484. Subchapter III (title) [precedes 255.20] of chapter 255 of the statutes is created to read:

CHAPTER 255

SUBCHAPTER III

INJURY PREVENTION AND CONTROL

SECTION 485. 255.20 of the statutes is created to read:

255.20 Duties of the department. The department shall do all of the following:

(1) Maintain an injury prevention program that includes data collection, surveillance, education and the promotion of intervention.

(2) Assist local health departments and community agencies by serving as a focal point for injury prevention expertise and guidance and by providing the leadership for effective local program development and evaluation.

(3) Enter into memoranda of understanding with other state agencies to reduce intentional and unintentional injuries.

SECTION 486. 440.02 (4) of the statutes is amended to read:

440.20 (4) In addition to any grounds for discipline specified in chs. 440 to 459, the department or appropriate examining board or board in the department may reprimand the holder of a credential or deny, limit, suspend or revoke the credential of any person who intentionally violates s. 146.024 252.14 (2) or intentionally discloses the results of a blood test in violation of s. 146.025 252.15 (5) (a) or (5m).

SECTION 487. 447.06 (2) (a) 5. of the statutes is amended to read:

447.06 (2) (a) 5. For a county, city–county or multi–county local health department, a county health committee or commission, or a city, village or town board of health under ch. 144 as defined in s. 250.01 (4).

SECTION 488. 619.12 (3) (b) of the statutes is amended to read:

619.12 (3) (b) Persons for whom deductible or coinsurance amounts are paid or reimbursed under ch. 47 for vocational rehabilitation, under s. 49.48 for renal disease, under s. 49.485 (8) for hemophilia, or under s. 49.485 (8) for cystic fibrosis, or under s. 146.18 for special education,
are not ineligible for coverage under the plan by reason of such payments or reimbursements.

Section 489. 632.102 (3) (b) 6. a. of the statutes is amended to read:

632.102 (3) (b) 6. a. That for the 1st class city to qualify for reimbursement of expenses from the funds withheld under this section, the 1st class city must, after the loss occurs but within 90 days after delivery of the notice of withholding under this subsection, commence proceedings under s. 66.05, 254.595 or 823.04 or 823.22 or under a local ordinance relating to demolition or abatement of nuisances or obtain a release signed by the named insured consenting to demolition with respect to the building or other structure; that if the 1st class city commences the proceedings or obtains the release within that time period, a part or all of the withheld funds may be used to defray the 1st class city’s expenses; and that the withheld funds will be released to the named insured and other interests named in the policy if the 1st class city does not commence the proceedings or obtain the release within that time period.

Section 490. 632.103 (1) (a) 1. of the statutes is amended to read:

632.103 (1) (a) 1. Commence proceedings under s. 66.05, 254.595 or 823.04 or 823.22 or under a local ordinance relating to demolition or abatement of nuisances, with respect to the building or other structure for which the funds are withheld.

Section 491. 632.103 (2) (a) 3. of the statutes is amended to read:

632.103 (2) (a) 3. Costs incurred in abating a public nuisance under s. 254.595 or 823.04 or 823.22 or under a local ordinance relating to abating a public nuisance, with respect to the building or other structure for which the funds are withheld.

Section 492. 632.89 (2m) of the statutes is amended to read:

632.89 (2m) Liability to the state or county. For any insurance policy issued on or after January 1, 1981, any insurer providing hospital treatment coverage is liable to the state or county for any costs incurred for services a state or county owned or operated an inpatient health care facility, as defined in s. 50.135 (1), or community–based residential facility, as defined in s. 140.85 (4) (a) or 140.86 50.01 (1g), owned or operated by a state or county, provides to a patient regardless of the patient’s insurance coverage for the services, to the extent that the insurer is liable to the patient for services provided at any other inpatient health care facility or community–based residential facility.

Section 493. 823.22 of the statutes is renumbered 254.595, and 254.595 (1) to (6) and (8), as renumbered, are amended to read:

254.595 (1) If real property in counties having a population of 100,000 or more is in violation of those provisions of a municipal building code which concern health or safety or of an order or a regulation of the county local board of health department, county health commission or municipal health board or officer, the city, village or town in which such the property is located may commence an action to declare such the property a public nuisance human health hazard. A tenant or class of tenants of property which that is in violation of the municipal building code or of an order or regulation of the county local board of health department, county health commission or municipal health board or officer, or any other person or class of persons whose health, safety or property interests are or would be adversely affected by property which that is in violation of the municipal building code or of an order or regulation of the county local board of health department, county health commission or municipal health board or officer, may file a petition with the clerk of the city, village, or town requesting the governing body to commence an action to declare such the property a public nuisance. Upon refusal or failure of such human health hazard. If the governing body refuses or fails to commence such an action within 20 days after the filing of the petition, the a tenant, class of tenants, other person or other class of persons may commence such the action directly upon the filing of security for court costs. In any such case, the The court before which such the action of the case is commenced shall exercise jurisdiction in rem or quasi in rem over such the property and the owner of record of the property, if known, and all other persons of record holding or claiming any interest therein in the property shall be made parties defendant and service of process may be had upon them as provided by law. Any change of ownership subsequent to after the commencement of the action shall not affect the jurisdiction of the court over such the property. At the time of commencing that the action is commenced, the municipality or other parties plaintiff shall file a lis pendens. If the court finds that such a a violation exists, it shall adjudge the property a public nuisance human health hazard and such an the entry of judgment shall be a lien upon the premises.

(2) A property owner or any person of record holding or claiming any interest in such the property shall have 60 days after entry of judgment to eliminate the violation. If, within 60 days after entry of judgment under sub. (1), an owner of the property presents evidence satisfactory to the court, upon hearing, that the violation has been eliminated, the court shall set aside the judgment. It shall may not be a defense to this action that the owner of record of the property is a different person, partnership or corporate entity than the owner of record of the property on the date that the action was commenced or thereafter provided if a a lis pendens has been filed prior to the change of ownership. No hearing under this subsection shall may be held until notice has been given to the municipality and all the plaintiffs advising them of their right to appear. If the judgment is not so set aside within 60 days
Section 495. 893.82 (2) (d) 1r of the statutes is amended to read:

893.82 (2) (d) 1r. A physician under s. 140.05 (16) (fm) 2 252.04 (9) (b).

Section 496. 895.46 (5) (b) of the statutes is amended to read:

895.46 (5) (b) A physician under s. 140.05 (16) (fm) 2 252.04 (9) (b).

Section 497. 895.57 (1) (b) of the statutes is amended to read:

895.57 (1) (b) “Local health officer” has the meaning given in s. 143.01 (1m) 250.01 (5).

Section 498. 943.75 (1) (b) of the statutes is amended to read:

943.75 (1) (b) “Local health officer” has the meaning given in s. 143.01 (1m) 250.01 (5).

Section 499. 948.015 (4) of the statutes is amended to read:

948.015 (4) Section 446.04 253.11, relating to infant blindness.

Section 500. 948.015 (5) of the statutes is amended to read:

948.015 (5) Section 451.03 254.12, relating to applying lead–bearing paints or selling or transferring a fixture or other object containing a lead–bearing paint.

Section 501. 968.38 (1) (c) and (d) of the statutes are amended to read:

968.38 (1) (c) “Sexually transmitted disease” has the meaning given in s. 143.07 252.11 (1).

(d) “Significantly exposed” has the meaning given in s. 446.025 252.15 (1) (em).

Section 502. 968.38 (4) (intro.) of the statutes is amended to read:

968.38 (4) (intro.) The court shall set a time for a hearing on the matter under sub. (2) during the preliminary examination, if sub. (3) (a) applies; after the defendant is bound over for trial and before a verdict is rendered, if sub. (3) (b) applies; or before 60 days after conviction, if sub. (3) (c) applies. The court shall give the district attorney and the defendant notice of the hearing at least 72 hours prior to the hearing. The defendant may have counsel at the hearing, and counsel may examine and cross-examine witnesses. If the court finds probable cause to believe that the defendant has significantly exposed the victim or alleged victim, the court shall, except as provided in sub. (5), order the defendant to submit to a test or a series of tests administered by a health care professional to detect the presence of HIV, antigen or nonantigenic products of HIV, an antibody to HIV or a sexually transmitted disease. The court shall require the health care professional who performs the test to refrain from disclosing the test results to the defendant; to refrain, notwithstanding s. 146.025 252.15 (4) (c), from making the test results part of the defendant’s permanent

Section 494. 891.09 (1) of the statutes is amended to read:

891.09 (1) RECORDS AS EVIDENCE. The record of any marriage, birth, stillbirth, fetal death or death so recorded shall be received as presumptive evidence of the marriage, birth, stillbirth, fetal death or death so recorded.

Section 494. 891.09 (1) of the statutes is amended to read:

891.09 (1) RECORDS AS EVIDENCE. The record of any marriage, birth, stillbirth, fetal death or death kept in the office of any register of deeds or county local health officer of a local health department, as defined in s. 250.01 (4) (a) 2, or 3, or (b), or in the state bureau of vital statistics shall be received as presumptive evidence of the marriage, birth, stillbirth, fetal death or death so recorded.

Section 494. 891.09 (1) of the statutes is amended to read:

891.09 (1) RECORDS AS EVIDENCE. The record of any marriage, birth, stillbirth, fetal death or death kept in the office of any register of deeds or county local health officer of a local health department, as defined in s. 250.01 (4) (a) 2, or 3, or (b), or in the state bureau of vital statistics shall be received as presumptive evidence of the marriage, birth, stillbirth, fetal death or death so recorded.

Section 494. 891.09 (1) of the statutes is amended to read:

891.09 (1) RECORDS AS EVIDENCE. The record of any marriage, birth, stillbirth, fetal death or death kept in the office of any register of deeds or county local health officer of a local health department, as defined in s. 250.01 (4) (a) 2, or 3, or (b), or in the state bureau of vital statistics shall be received as presumptive evidence of the marriage, birth, stillbirth, fetal death or death so recorded.
medical record; and to disclose the results of the test to any of the following:

SECTION 503. 970.03 (12) (a) 2. of the statutes is amended to read:

970.03 (12) (a) 2. “Local health department” means a city, county, city–county, or multiple county health department has the meaning given in s. 250.01 (4).

SECTION 504. 970.03 (12) (b) of the statutes is amended to read:

970.03 (12) (b) At any preliminary examination, a report of one of the crime laboratory’s, the state laboratory of hygiene’s, a federal bureau of investigation laboratory’s, a hospital laboratory’s or a local health department’s findings with reference to all or any part of the evidence submitted, certified as correct by the attorney general, the director of the state laboratory of hygiene, the director of the federal bureau of investigation, the chief hospital administrator, the head of the local health department officer, as defined in s. 250.01 (5), or a person designated by any of them, shall, when offered by the state or the accused, be received as evidence of the facts and findings stated, if relevant. The expert who made the findings need not be called as a witness.

SECTION 505. Nonstatutory provisions; health and social services. (1) LOCAL HEALTH DEPARTMENTS. On the effective date of this subsection:

(a) Except as provided in section 251.02 (3m) of the statutes, as created by this act, all functions of a town board of health organized or appointed under section 141.01 (9) or 141.04, 1991 stats., and, in a county with a population of less than 500,000, of a village board of health appointed under section 141.015, 1991 stats., shall cease.

(b) All functions of a county, multiple county, city–county or city health department, or, in a county with a population of 500,000 or more, a village health department, established under chapters 140 and 141, 1991 stats., that meets the requirements of chapter 251 of the statutes, as affected by this act, shall continue as the functions of a local health department that is established in the identical jurisdictional area, under chapter 251 of the statutes, as affected by this act.

(c) All members of each of the following who are serving in that capacity on the effective date of this paragraph shall continue that service as members of the local board of health for the jurisdiction in which they now serve, unless the chief executive officer for the governing body of the jurisdiction appoints members to replace these members and the replacing membership is confirmed by the governing body of the jurisdiction:

1. County health commissions or committees under section 141.01 (1) (intro.), (2) and (10), 1991 stats.
2. City boards of health under section 141.015 (1), 1991 stats.
3. Village boards of health under section 141.015 (1), 1991 stats., in a county with a population of 500,000 or more or in a county that is specified under section 251.02 (3m) of the statutes, as created by this act.
4. City–county boards of health under section 140.09 (3) (c) 1. or 2., 1991 stats.
5. Multiple county boards of health under section 140.09 (3) (b) 1. or 2., 1991 stats.
6. County boards of health under section 140.09 (3) (a) 1. or 2., 1991 stats.
7. Town boards of health under section 141.01 (9m), 1991 stats.

(d) All of the following who are serving in the capacity of health officers, local health officers, county health officers or commissioners of health on the effective date of this paragraph shall continue in service as local health officers appointed under section 251.06 (4) of the statutes, as created by this act, unless the health officer, local health officer, county health officer or commissioner of health fails to meet the appropriate qualifications specified for a local health officer of a local health department that is established in the identical jurisdictional area under chapter 251 of the statutes, as created by this act:

1. Health officers appointed under section 140.09 (4) (a) or (b) 1., 1991 stats.
2. Local health officers designated under section 141.01 (1m) or (3) (a) 1., 1991 stats.
3. County health officers designated under section 141.01 (1r), 1991 stats.
4. Local health officers appointed under section 141.01 (3) (a) 2., 1991 stats.
5. Health officers elected under s. 141.015 (4) and (13), 1991 stats., by members of a city board of health or, in a county with a population of 500,000 or more, by a village board of health.
6. Health officers appointed for a city under section 141.015 (13m) or 141.02 (2) or (2m), 1991 stats.
8. Town health officers elected under section 141.01 (9m), 1991 stats.
9. Health officers appointed for a village under section 141.015 (13m), 1991 stats.

(e) All of the following who are serving in the capacity of appointed or elected health officers on the effective date of this paragraph shall terminate service on that effective date:

1. Health officers elected under section 141.01 (9), 1991 stats.
2. Health officers elected under section 141.015 (4) and (13), 1991 stats., by a village board of health in a county with a population of less than 500,000.

(f) All property, furniture, equipment, supplies, records and staff member positions for a county, city–county or multiple county health department, county health commission or county health committee and, in a county with a population of 500,000 or more, a city or village board of health, or a city or village health depart-
ment, established under chapters 140 and 141, 1991 stats., or a town board of health under section 141.01 (9m), 1991 stats., or a village board of health under section 141.015 (1), 1991 stats., that is located in a county that is specified under section 251.02 (3m) of the statutes, as created by this act, are those of a local health department that is established in the identical jurisdictional area, under chapter 251 of the statutes, as affected by this act. No right, privilege or benefit to which the staff members, as staff employes of the village, city, county, city–county or multiple county health department, county health commission, county health committee or city, village or town board of health, were entitled may be denied or abridged solely because of the transfer of their positions to the local health department.

(g) All orders or regulations of a county, city–county or multiple county health department, county health commission or county health committee or, in a county with a population of 500,000 or more, a city or village health department or a city or village board of health, or a town board of health, or a town board of health under section 141.01 (9m), 1991 stats., or a village board of health under section 141.015 (1), 1991 stats., that is located in a county that is specified under section 251.02 (3m) of the statutes, as created by this act, in effect on the date immediately prior to the effective date of this paragraph, are orders of a local health department that is established in the identical jurisdictional area, under chapter 251 of the statutes, as affected by this act, until modified or rescinded by the local health department.

(h) All administrative actions or proceedings by or against a county, city–county or multiple–county health department, county health commission or county health committee or, in a county with a population of 500,000 or more, a city or village health department or a city or village board of health, or a town board of health under section 141.01 (9m), 1991 stats., or a village board of health under section 141.015 (1), 1991 stats., that is located in a county that is specified under section 251.02 (3m) of the statutes, as created by this act, pending on the date immediately prior to the effective date of this paragraph shall be treated as actions or proceedings by or against a local health department that is established in the identical jurisdictional area under chapter 251 of the statutes, as affected by this act.

SECTION 506. Effective dates. This act takes effect on January 1 of the year following publication, except as follows:

(1) The treatment of sections 251.20, 254.28 (2) and 254.62 (2) of the statutes takes effect on the day after publication.