

ORDER OF THE
DEPARTMENT OF HEALTH AND FAMILY SERVICES
AMENDING, REPEALING AND RECREATING AND CREATING RULES

FINDING OF EMERGENCY

The Department of Health and Family Services finds that an emergency exists and that the rules included in this order are necessary for the immediate preservation of the public peace, health, safety or welfare. The facts constituting the emergency are as follows:

This rulemaking order amends ch. HFS 50, the Department's rules for facilitating the adoption of children with special needs, to implement changes to the adoption assistance program statute, s. 48.975, Stats., made by 1997 Wisconsin Act 308. Those changes include permitting a written agreement for adoption assistance to be made following an adoption, but only in "extenuating circumstances;" permitting the amendment of an adoption assistance agreement for up to one year to increase the amount of adoption assistance for maintenance when there is a "substantial change in circumstances;" and requiring the Department to annually review the circumstances of the child when the original agreement has been amended because of a substantial change in circumstances, with the object of amending the agreement again to either continue the increase or to decrease the amount of adoption assistance if the substantial change in circumstances no longer exists. The monthly adoption assistance payment cannot be less than the amount in the original agreement, unless agreed to by all parties.

The amended rules are being published by emergency order so that adoption assistance or the higher adoption assistance payments, to which adoptive parents are entitled because of "extenuating circumstances" or a "substantial change in circumstances" under the statutory changes that were effective on January 1, 1999, may be made available to them at this time, now that the rules have been developed, rather than 7 to 9 months later which is how long the promulgation process takes for permanent rules. Act 308 directs the Department to promulgate rules that, among other things, define extenuating circumstances, a child with special needs and substantial change in circumstances.

ORDER

Pursuant to authority vested in the Department of Health and Family Services by ss.48.975 (5) and 227.24 (1), Stats., the Department of Health and Family Services hereby amends, repeals and recreates and creates rules interpreting s. 48.975, Stats., as follows:

SECTION 1. HFS 50.01 (2) is amended to read:

HFS 50.01 (2) PURPOSE OF RULES. This chapter establishes criteria to be used by the department in determining when adoption assistance, as authorized by s. 48.975, Stats., may be provided, specifies limitations on the granting of adoption assistance, sets procedures for application applying for adoption assistance and for amending the adoption assistance agreement and establishes an adoption information exchange, as required by s. 48.55, Stats., to be operated

by the department directly or through a contract with an individual or private agency to assist in finding the best adoptive homes available for the placement of children with special needs.

SECTION 2. HFS 50.01 (4) is repealed and recreated to read:

HFS 50.01 (4) DEFINITIONS. In this chapter:

(a) "Administrative review" means a review of the plan of services for a child conducted by a panel of persons selected by the adoption agency, at least one of whom is not responsible for the case management or for the supervision or delivery of services to either the child who is subject to the review or the child's parents.

(b) "Adoption" means a method provided by law to establish the legal relationship of parent and child between persons who are not so related by birth, with the same mutual rights and obligations that exist between children and their birth parents.

(c) "Adoption agency" or "agency" means a county agency authorized to place children for adoption under s. 48.57, Stats., the department, an agency authorized under ss. 48.60 and 48.61, Stats. to accept guardianship and to place children under its guardianship for adoption or an American Indian tribal agency in this state.

(d) "Adoption assistance" means assistance provided under agreement by the department to the parents of an adopted child or the prospective adoptive parents of a child placed for adoption, when the family has signed and the department has approved the agreement that is designed to assist in the cost of care of the child after legal adoption or after the child has been placed for adoption.

(e) "Adoption assistance for medical care" means the program under Title XIX of the Social Security Act of 1935, as amended, 42 USC 1396, ss. 49.43 to 49.497, Stats., and chs. HFS 101 to 108.

(f) "Adoption information exchange" or "exchange" means a department program created to facilitate the adoption of special needs children by disseminating information about the children to adoption agencies and prospective adoptive families.

(g) "Adoption photo listing book" means a publication that lists individual special needs children and includes photographs and descriptions of them.

(h) "Adoptive family" means a husband and wife jointly or an unmarried adult.

(i) "Child" means a person under 18 years of age.

(j) "Child at high risk" means a child in the guardianship of a Wisconsin adoption agency who does not have a known special need under s. HFS 50.03 (1) (b) 1., 2., 3. or 4. but for

whom one or more of the following apply:

1. After diligent effort the guardianship agency has not been able to locate sufficient social and medical background information on the child or the child's birth family necessary to establish the existence of medical or genetic risk factors.

2. There is documented information that either or both birth parents have a medical diagnosis or medical history which could result in a condition for the child described in s. HFS 50.03 (1) (b) 3. at a later time.

3. The child has experienced 4 or more placements with extended family or foster homes that might affect the normal attachment process.

4. The child experienced neglect in the first 3 years of life or sustained physical injury that might have a long term effect on physical, emotional or intellectual development.

5. There is documented evidence that the birth mother used harmful drugs or alcohol or otherwise did not practice appropriate prenatal care which could later result in the child developing special needs as described in s. HFS 50.03 (1) (b) 3.

(k) "Department" means the Wisconsin department of health and family services.

(L) "Division" means the department's division of children and family services.

(m) "Extenuating circumstances" has the meaning established in s. HFS 50.065 (2) (a) 2.
a.

(n) "Guardian" has the meaning found in s. 48.02 (8), Stats.

(o) "Legal risk" means a condition of a child in which the severance of the legal rights of the child's birth parents through a termination of parental rights proceedings under the laws of the state or the federal government has not been completed or the court's decision is being legally contested.

(p) "Legally free" means the status of a child when the legal rights of the birth parents of the child have been severed through death of a parent or a termination of parental rights proceedings according to the laws of the state or the federal government, or both, and the court has transferred guardianship and custody of the child to a placement agency pending adoptive placement.

(q) "Medical adoption assistance card" means a card issued for the purpose of identifying a person as a recipient of adoption assistance for medical care.

(r) "Monthly adoption assistance payment" means a monthly payment amount described

in an adoption assistance agreement to help with the expense of raising the child made by the department to the parents of an adopted child with special needs or to the prospective adoptive parents of a child with special needs or to the adoptive parents of a child at high risk of developing a moderate or intensive level of special needs.

(s) "Registration" means the listing of information about special needs children or the listing of information about approved prospective adoptive families with the adoption information exchange for the purpose of locating a prospective adoptive family.

(t) "Special needs child" means a legally free child for whom it is difficult to find an adoptive home and who meets the eligibility criteria for adoption assistance under s. HFS 50.03.

(u) "Substantial change in circumstances" means that a progressive, documented change has occurred to the child in one or more areas of special needs, including physical, behavioral or emotional special needs, that would result in a change in the supplemental rate as determined by the uniform foster care rate schedule under s. HSS 56.09.

(v) "Sustaining care" means the placement of a child under s. 48.428, Stats.

SECTION 3. HFS 50.03 (1) (b) 3. and 4. are amended to read:

HFS 50.03 (1) (b) 3. The child exhibits special need characteristics judged to be moderate or intensive under the schedule of difficulty-of-care levels specified in s. HSS 56.09 (3); ~~or~~

4. The child belongs to a minority race and children of that minority race cannot be readily placed due to a lack of appropriate placement resources ~~or~~; or

SECTION 4. HFS 50.03 (1) (b) 5. is created to read:

HFS 50.03 (1) (b) 5. The child is a child at high risk of developing a moderate or intensive level of special needs under subd. 3.

SECTION 5. HFS 50.03 (2) is repealed and recreated to read:

HFS 50.03 (2) REASONABLE PLACEMENT EFFORTS TO ASSURE ADOPTION PLACEMENT. (a) Reasonable efforts shall be made to assure a timely placement of the child with the best available family without adoption assistance. The agency shall make efforts to consider a number of families in order to locate the most suitable family for the child, including a review of all approved families associated with the agency, and those efforts shall be documented in the child's record. If 2 or more appropriate families are not approved and available within the agency, a timely effort shall be made to locate additional families by contacting other adoption agencies or by registering the child with the adoption exchange or a national adoption exchange. Once the agency has determined that placement with a specific

family would be the most suitable for the child, the agency shall make a full disclosure to the family of the child's background, to the extent known, as well as any existing or potential problem known to the agency.

(b) If the child has a special need under s. HFS 50.03(1) (b) and if the circumstances of either s. HFS 50.03(2) or (3) exist, the agency shall inform the family of the adoption assistance program and ask the proposed adoptive parents whether they are willing to adopt without adoption assistance. If the family is not willing to adopt without adoption assistance, the requirement that a reasonable, but unsuccessful, effort to place the child without adoption assistance is met.

SECTION 6. HFS 50.04 (1) and (4) are amended to read:

HFS 50.04 (1) TIMING. An initial application for adoption assistance shall be completed and approved before an at the time the adoptive placement of the child occurs, except. The adoptive parents may file an application for adoption assistance under the circumstances noted in s. HFS 50.03 (3) (b) or in sub. (4) or may request an amendment to an existing agreement under s. HFS 50.044 or 50.045.

(4) ADOPTION ASSISTANCE AGREEMENT. The adoption assistance agreement shall be completed and signed by the prospective adoptive parent or parents, the adoption worker and a representative of the department designated for this purpose. If at any time prior to the legal adoption the family believes there has been a change in circumstances, the family may file an application for an agreement to replace a prior agreement. The agency shall assess the current special needs of the child and, as appropriate, shall offer to modify the agreement to replace the prior agreement. The replacement agreement shall be agreed to and signed by the prospective adoptive parent or parents, the adoption worker and a representative of the department designated for this purpose. Copies of the signed agreement shall be given to the adoptive parent or parents and placed in the child's adoption record. For purposes of amending an agreement following legal adoption, the agreement in effect at the time of adoption is considered the original agreement.

SECTION 7. HFS 50.044 is created to read:

HFS 50.044 Request to amend the adoption assistance agreement for a child at high risk of developing special needs. (1) REQUEST FOR REVIEW. At least 12 months after the date of legal adoption, the adoptive parents who signed an adoption assistance agreement for a child at high risk may request a review to determine whether a substantial change in circumstances has occurred. If the request results in an amended agreement, any subsequent request for an amended agreement shall be made under s. HFS 50.045. If the request does not result in an amended agreement, the adoptive parents may request a review no earlier than 12 months after the date of the last request for a review.

(2) FAMILY RESPONSIBILITY. The family shall do all of the following:

(a) Complete and return the request for adoption assistance amendment form available from the department to record the family's observations of the child's physical, behavioral and emotional needs.

(b) Provide documentation by appropriate professionals of the child's current special needs to the department at the time of filing the request for adoption assistance amendment form to verify any substantial change in circumstances. That documentation may be a statement by the professional indicating that he or she fully concurs with the nature and level of special needs identified on the request for adoption assistance form. The report or statement of an appropriate professional shall be dated within 6 months prior to the date of the request for an adoption assistance amendment.

(c) If requested by the department, provide additional information about the child's current functioning.

(d) If requested by the department, have the child evaluated by a specialist of the department's choice and at the department's expense to provide information necessary in making the determination.

(e) Sign and return an amended agreement offered by the department to authorize a payment amount other than the amount in the original agreement.

Note: A copy of the Request for Adoption Assistance Amendment form, CFS 2092, may be obtained from any regional office of the Department or by writing to: Bureau of Program and Policies, Division of Children and Family Services, P. O. Box 8916, Madison WI 53708-8916.

(3) DEPARTMENT RESPONSIBILITY. The department shall do all of the following:

(a) From a review of the information submitted by the family, determine whether a substantial change in circumstances exists to meet the eligibility requirements of s. HFS 50.03 (1) (b) 3. If additional information is needed to make the determination, the department shall notify the family of the need for the information and request that the information be submitted within 90 days from the date of the letter requesting the information and that failure to provide the requested information within 90 days may result in the request being denied by the department. The department may obtain technical assistance from a specialist or may require the family to have the child evaluated by a specialist of the department's choice and at the department's expense to provide information necessary in making the determination.

(b) Upon receiving an application to amend the agreement, contact the appropriate human service agency or agencies to request information concerning any substantiated report of abuse or neglect of the child by the adoptive or proposed adoptive parents.

(c) If having determined that there has been a substantial change in circumstances documented by uniform rate determination which establishes a moderate or an intensive level in one or more categories of the supplemental payments schedule, and there has not been a substantiated report of abuse or neglect of the child by the adoptive or proposed adoptive parents, offer to adjust the amount of adoption assistance for maintenance for up to one year based upon the uniform foster care rate currently in effect under s. HSS 56.09 (2) and (3). Payment shall include the current basic rate determined by the age of the child at the time the request for an amendment to the agreement was received in the department, plus any supplemental payment calculated under s. HSS 56.09 (2) and (3) indicated in the current uniform foster care rate. No exceptional payment may be established.

(d) If the adoptive or proposed adoptive parent agrees with the proposed amount of adoption assistance maintenance payment, offer to amend the original agreement in writing for up to one year to specify the new monthly adoption assistance maintenance payment amount.

(e) Review under s. HFS 50.045 (3) (e) the circumstances of a child with a previously amended adoption assistance agreement under this section by contacting the adoptive parent or parents prior to the expiration of the amended agreement.

SECTION 8. HFS 50.045 is created to read:

HFS 50.045 Request to amend the adoption assistance agreement following adoption. (1) REQUEST FOR REVIEW. Twelve months or more following adoption of a child with special needs under s. HFS 50.03 (1) (b) 1., 2., 3. or 4., at least 12 months since the denial of a previous request under this section, at least 12 months following an amended agreement under HFS 50.044, or within 90 days prior to the expiration of an amended agreement, adoptive parents with a current adoption assistance agreement and with a maintenance payment in the amount of \$0 or greater may file a request with the department to review the current circumstances of the child for the purpose of amending the amount of the monthly adoption assistance maintenance payment. An adoption assistance agreement may be amended more than once under the provisions of this section.

(2) FAMILY RESPONSIBILITY. The family shall do all of the following:

(a) Complete and return the request for adoption assistance amendment form available from the department to record the family's observations of the child's physical, behavioral and emotional needs.

(b) Provide documentation by appropriate professionals of the child's current special needs to the department at the time of filing the request for adoption assistance amendment form to verify any substantial change in circumstances. That documentation may be a statement by the professional indicating that he or she fully concurs with the nature and level of special needs identified on the request for adoption assistance form. The report or statement of an appropriate professional shall be dated within 6 months prior to the date of the request for an adoption

assistance amendment.

(c) If requested by the department, provide additional information about the child's current functioning.

(d) If requested by the department, have the child evaluated by a specialist of the department's choice and at the department's expense to provide information necessary in making the determination.

(e) Sign and return an amended agreement offered by the department to authorize a payment amount other than the amount in the original agreement.

Note: A copy of the Request for Adoption Assistance Amendment form, CFS 2092, may be obtained from any regional office of the Department or by writing to: Bureau of Program and Policies, Division of Children and Family Services, P. O. Box 8916, Madison WI 53708-8916.

(3) DEPARTMENT RESPONSIBILITY. The department shall do all of the following:

(a) From the information submitted by the family under sub. (2), determine whether a substantial change in circumstances exists. If additional information is needed to make the determination, the department shall notify the family of the need for the information and request that the information be submitted within 90 days from the date of the letter requesting the information and that failure to provide the requested information within 90 days may result in the request being denied by the department. The department may obtain technical assistance from a specialist or may require the family to have the child evaluated by a specialist of the department's choice and at the department's expense so that the department will have the information it needs to make the determination.

(b) Upon receiving an application to amend the agreement, contact the appropriate human services agency or agencies to request information concerning any substantiated report of abuse or neglect of the child by the adoptive parents.

(c) If having determined that there has been a substantial change in circumstances documented by uniform rate determination which establishes an increase in special needs to the moderate or intensive level in one or more categories of the supplemental payments schedule, or a new category of special needs at the minimum, moderate or intensive level, and there is no substantiated report of abuse or neglect of the child, offer to amend the amount of adoption assistance for maintenance for up to one year. The department may not increase the amount in the agreement above the amount allowed under 42 USC 673, as amended, or any other federal law. The new rate shall include the basic rate in the existing agreement and any exceptional rate in the existing agreement and an adjusted supplemental payment calculated under s. HSS 56.09 (2) and (3) indicated in the current uniform foster care rate. If the original or amended agreement has not established a basic rate, the new rate shall include the basic rate effective on the date the request was received in the department and an adjusted supplemental payment

calculated under s. HSS 56.09 (2) and (3) indicated in the current uniform foster care rate. If the current level of points in a supplemental rate category is at the highest number of points in an intensive level of need category, no increase in payment may be offered in that category. No adjustment may be made to an existing exceptional rate and no exceptional rate may be established.

(d) If the adoptive parent agrees with the proposed amount of the payment, offer to amend the agreement in writing to specify the new monthly adoption assistance amount.

(e) Review an amended adoption assistance agreement, as follows:

1. Prior to the expiration of the amended agreement and annually thereafter for the duration of the adoption assistance agreement the department shall contact the adoptive parent or parents to request information concerning the circumstances of the child.

2. The department may require the adoptive parent or parents to provide documentation of the current circumstances of the child. The department shall review the information to determine whether the reasons for the change in circumstances continue to exist or not and shall notify the family whether the amount of adoption assistance will be continued, reduced, or returned to the amount in the original agreement or previous amended agreement. If the adoptive parent or parents fail to provide the requested information within 60 days of the request, the department may adjust the monthly payment to the amount specified in the agreement at the time of the adoption or the previous amended agreement.

SECTION 9. HFS 50.05 (1) (b) is amended to read:

HFS 50.05 (1) (b) The amount of adoption assistance shall be the total monthly adoption assistance payment as indicated on the adoption assistance agreement ~~under s. HFS 50.06~~ or as revised by an amendment to the adoption assistance agreement signed by both the adoptive parent or parents and the department. The initial rate for a child at high risk is \$0 in the original adoption assistance agreement if no special needs category under s. HFS 50.03 (1) (b) 1., 2., 3. or 4. applies to the child. The rate may increase or decrease as described in an amendment to the original agreement and law.

SECTION 10. HFS 50.05 (1) (c) is created to read:

HFS 50.05 (1)(c). The effective date for a rate increase for an amended agreement shall be the first day of the month the department received the request to amend the adoption assistance agreement, except that no increase shall be made prior to 12 months from a prior rate increase. The effective date for a rate decrease for an amended agreement shall be the first day of the month following the month that the amended agreement expires. The effective date for discontinuing adoption assistance for any reason shall be the last day of the month that eligibility for benefits ends.

SECTION 11. HFS 50.05 (2) (a) and (3) are amended to read:

HFS 50.05 (2) (a) Adoption assistance for medical care shall be granted to all cases with an approved for monthly adoption assistance payments agreement.

(3) NON-RECURRING ADOPTION EXPENSES. When a child is adopted with an approved adoption assistance agreement. the department shall reimburse adoptive parents for non-recurring adoption expenses up to a \$2000 maximum. In this subsection, "non-recurring adoption expenses" means reasonable and necessary adoption fees, court costs, attorney fees and other expenses which are directly related to the legal adoption of a child with special needs and which are not incurred in violation of state or federal laws.

SECTION 12. HFS 50.06 (1) (d) is amended to read:

HFS 50.06 (1) (d) Circumstances under which the adoption assistance may be increased, decreased, terminated, temporarily suspended or reduced; and

SECTION 13. HFS 50.065 (2) (intro.) is amended to read:

HFS 50.065 (2) AFTER ADOPTION IS FINAL. (intro.) An adoptive parent, after an adoption has been declared final by a court, may appeal ~~either~~ any of the following under ch. 227, Stats.. to the department of administration's division of hearings and appeals:

SECTION 14. HFS 50.065 (2) (c) and (d) are created to read:

HFS 50.065 (2)(c) A department decision on a request under s. HFS 50.044 to amend an adoption assistance agreement regarding a child at high risk. A request for a hearing received more than 60 days following the date of the department's written decision shall be denied.

(d) A department decision on a request under s. HFS 50.045 to determine whether a substantial change in circumstances has occurred. A request for a hearing received more than 60 days following the date of the department's written decision shall be denied.

SECTION 15. HFS 50.08 (3) (c) is amended to read:

HFS 50.08 (3) (c) Be updated at least ~~monthly~~ quarterly to revise, add to, or delete from the listing of available special needs children; and

SECTION 16. HFS 50.09 (1) (intro.) is repealed and recreated to read:

HFS 50.09 (1) (intro.) If within 60 days of the date of the termination of parental rights an adoption agency is not able to meet the requirements for reasonable efforts described in s. HFS 50.03(2), the agency shall register the child on the adoption exchange if the child is not

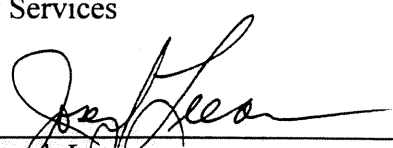
currently listed and shall include the following information about the child:

The rules contained in this order shall take effect as emergency rules upon publication in the official state newspaper as provided in s. 227.24 (1) (c), Stats.

Wisconsin Department of Health and
Family Services

Dated: **November 5, 1999**

By: _____


Joseph Lee
Secretary

SEAL:

SENATOR JUDITH B. ROBSON
CO-CHAIR
P.O. Box 7882
MADISON, WI 53707-7882
(608) 266-2253



REPRESENTATIVE GLENN GROTHMAN
CO-CHAIR
P.O. Box 8952
MADISON, WI 53708-8952
(608) 264-6486

JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

May 23, 2000

Secretary Joe Leean
Department of Health and Family Services
1 West Wilson Street
Madison, Wisconsin

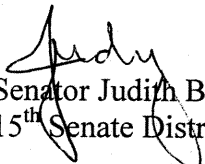
Re: Emergency Rule HFS 50


Dear Secretary Leean:

We are writing to inform you that the Joint Committee for the Review of Administrative Rules (JCRAR) held a public hearing and executive session on May 23, 2000. At that meeting, the JCRAR received public testimony regarding Emergency Rule HFS 50, relating to the adoption assistance program for families that adopt children with special needs. Based on that testimony, the committee adopted a motion extending Emergency Rule 50 for 50 days. The committee approved the motion on a 9 to 0 vote.

Pursuant to § 227.24(2)(c), *Stats.*, we are notifying the Secretary of State and the Revisor of Statutes of the Committee's action through copies of this letter.

Sincerely,


Senator Judith B. Robson
15th Senate District


Representative Glenn Grothman
59th Assembly District

JBR:GG:da

SENATOR JUDITH B. ROBSON
CO-CHAIR
P.O. BOX 7882
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(608) 266-2253



REPRESENTATIVE GLENN GROTHMAN
CO-CHAIR
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**JOINT COMMITTEE FOR
REVIEW OF ADMINISTRATIVE RULES**

Senator Fred Risser
Senate President

Representative Scott Jensen
Speaker of the Assembly

Re: Emergency Rule HFS 50

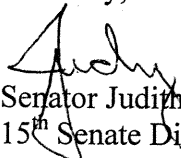
Dear Senator Risser and Representative Jensen:


We are writing to inform you that the Joint Committee for the Review of Administrative Rules (JCRAR) held a public hearing and executive session on May 23, 2000. At that meeting, the JCRAR received public testimony regarding Emergency Rule HFS 50, relating to the adoption assistance program for families that adopt children with special needs.

Based on the public testimony at the hearing, the committee adopted a motion extending Emergency Rule HFS 50 for 50 days. The committee approved the motion on a 9 to 0 vote.

We are giving you this notice of the committee's action pursuant to § 227.24(2)(c), *Stats.*, and we ask that you notify the appropriate standing committees of each house of the legislature of the JCRAR's actions.

Sincerely,


Senator Judith B. Robson
15th Senate District


Representative Glenn Grothman
59th Assembly District

JBR:GG:da

SENATOR JUDITH B. ROBSON
 CO-CHAIR
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 MADISON, WI 53707-7882
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REPRESENTATIVE GLENN GROTHMAN
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**JOINT COMMITTEE FOR
 REVIEW OF ADMINISTRATIVE RULES**

Emergency Rule Extension Motion Form

Last Modified May 2000

Date: May 23, 2000 Location: Room 201 Southeast, State Capitol

Moved by Grob, Seconded by Robson

THAT, pursuant to § 227.24(2)(a), *Wisconsin State Statutes*, the Joint Committee for the Review of Administrative Rules extend the effective period of Emergency Rule HFS 50 by 50 days, at the request of the Department of Health and Family Services.

COMMITTEE MEMBER	Aye	No	Absent
1. Senator ROBSON	✓		
2. Senator GROBSCHMIDT	✓		
3. Senator SHIBLISKI	X		AA
4. Senator WELCH	X		AA
5. Senator SCHULTZ	X		AA
6. Representative GROTHMAN	✓		
7. Representative GUNDERSON	✓		
8. Representative SERATTI			X
9. Representative KREUSER	✓		
10. Representative BLACK	✓		
Totals	9		1

all
 both polled
 AA

Motion Carried

Motion Failed

SENATOR JUDITH B. ROBSON
CO-CHAIR



REPRESENTATIVE GLENN GROTHMAN
CO-CHAIR

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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

April 12, 2000

Joe Leann, Secretary
Department of Health and Family Services
1 West Wilson Street, Ste. 650
Madison, WI 53702

Dear Secretary Leann:

The Joint Committee for the Review of Administrative Rules met in Executive Session on April, 11 2000 and adopted the following motion:

Moved by Representative Grothman, seconded by Senator Robson that pursuant to Section 227.24(2)(a), Stats., the Joint Committee for Review of Administrative Rules extend the effective period of emergency rule HFS 50 by 60 days, at the request of the Department of Health and Family Services. recommended, Ayes 7, Noes 2, Absent 1

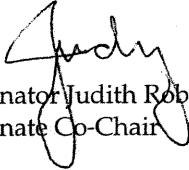
Ayes: (7) Representatives Grothman, Gunderson,
Seratti, and Black; Senators Robson, Grobschmidt, and
Shibilski

Noes: (2) Senators Schultz and Welch.

Absent: (1) Representative Kreuser

Pursuant to s. 227.24(2)(c) Stats, we are notifying the Secretary of State and the Revisor of Statutes of the Committee's action through copies of this letter.

Sincerely,


Senator Judith Robson
Senate Co-Chair

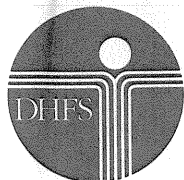


Representative Glenn Grothman
Assembly Co-Chair

JBR:GSG:mjg

cc: Secretary of State Doug LaFollette
Revisor of Statutes Gary Poulson

MAR 08 2000



State of Wisconsin
Department of Health and Family Services

Tommy G. Thompson, Governor
Joe Leean, Secretary

March 6, 2000

The Honorable Judy Robson, Co-Chairperson
Joint Committee for Review of Administrative Rules
Room 15 South, State Capitol
P.O. Box 7882
Madison, Wisconsin 53707-7882

Dear Senator Robson:

The Department of Health and Family Services has an emergency rulemaking order in effect that will expire before the emergency rules are replaced by permanent rules unless the effective periods of the emergency orders are extended. Pursuant to s. 227.24 (2), Stats., I ask the Joint Committee to extend the effective periods of the emergency orders by the number of days indicated below. The emergency rule is as follows:

Adoption Assistance. The emergency rulemaking order amending ch. HFS 50 was published and effective on November 16, 1999, and **will expire on April 13, 2000**, unless extended. The order amending ch. HFS 50, the Department's rules for facilitating the adoption of children with special needs, implemented changes to the adoption assistance program statute, s. 48.975, Stats., made by 1997 Wisconsin Act 308. Those changes include permitting a written agreement for adoption assistance to be made following an adoption, but only in "extenuating circumstances;" permitting the amendment of an adoption assistance agreement for up to one year to increase the amount of adoption assistance for maintenance when there is a "substantial change in circumstances;" and requiring the Department to annually review the circumstances of the child when the original agreement has been amended because of a substantial change in circumstances, with the object of amending the agreement again to either continue the increase or to decrease the amount of adoption assistance if the substantial change in circumstances no longer exists. The monthly adoption assistance payment cannot be less than the amount in the original agreement, unless agreed to by all parties.

Section 48.975 (5), Stats., as amended by Act 308, directed the Department to promulgate rules that, among other things, define extenuating circumstances, a child with special needs and substantial change in circumstances.

The rule changes were published by emergency order so that adoption assistance or the higher adoption assistance payments to which adoptive parents are entitled because of "extenuating circumstances" or a "substantial change in circumstances" under the statutory changes that were effective on January 1, 1999, could be made available to them as soon as possible rather than 7 to 9 months later which is how long the promulgation process takes for permanent rules.

Replacement permanent rules were sent to the Legislative Council for review on November 30, 1999 and taken to public hearings on February 24th and 28th of this year. The Department expects to send them to the Legislature for review later this month but, consequently, the Department will

Senator Robson

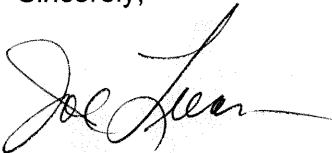
March 6, 2000

Page 2

not be able to file them until at least early May for a July 1, 2000 effective date. Therefore, I request an extension of the effective period of the emergency rules by **60 days**, through June 13, 2000. If the effective period of the emergency rules is not extended, in the interim, the Department will not have the authority to continue the implementation of the changes defined in Act 308.

A copy of the emergency rulemaking order is attached to this letter. If you have any questions about the emergency rules relating to the administration of the Adoption Assistance program, you may contact Jill Duerst of the Department's Division of Children and Family Services at 266-1142.

Sincerely,

A handwritten signature in black ink, appearing to read "Joe LEEAN". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Joe LEEAN
Secretary

Attachments

cc Representative Grothman
Representative Jensen
Senator Risser



State of Wisconsin
Department of Health and Family Services

MAY 11 2000

Tommy G. Thompson, Governor
Joe Lecaan, Secretary

May 11, 2000

The Honorable Judy Robson, Co-Chairperson
Joint Committee for Review of Administrative Rules
Room 15 South, State Capitol
P.O. Box 7882
Madison, Wisconsin 53707-7882

Dear Senator Robson:

The Department of Health and Family Services has three emergency rulemaking orders in effect that will expire before the emergency rules are replaced by permanent rules unless the effective period of the emergency order is extended. Pursuant to s. 227.24 (2), Stats., I ask the Joint Committee to extend the effective periods of the emergency orders by the number of days indicated below. The emergency rules are as follows:

Adoption Assistance. The emergency rulemaking order amending ch. HFS 50 was published and effective on November 16, 1999, and **was extended until June 11, 2000** by your Committee. The order amending ch. HFS 50, the Department's rules for facilitating the adoption of children with special needs, implemented changes to the adoption assistance program statute, s. 48.975, Stats., made by 1997 Wisconsin Act 308. Those changes include permitting the amendment of an adoption assistance agreement for up to one year to increase the amount of adoption assistance for maintenance when there is a "substantial change in circumstances;" and requiring the Department to annually review the circumstances of the child when the original agreement has been amended because of a substantial change in circumstances, with the object of amending the agreement again to either continue the increase or to decrease the amount of adoption assistance if the substantial change in circumstances no longer exists. The monthly adoption assistance payment cannot be less than the amount in the original agreement, unless agreed to by all parties. Section 48.975 (5), Stats., as amended by Act 308, also directed the Department to promulgate rules that, among other things, define extenuating circumstances, a child with special needs and substantial change in circumstances.

The rule changes were published by emergency order so that adoption assistance or the higher adoption assistance payments that adoptive parents are entitled to because of "extenuating circumstances" or a "substantial change in circumstances" under the statutory changes that were effective on January 1, 1999, could be made available to the parents as soon as possible.

Replacement permanent rules were sent to the Legislative Council for review on November 30, 1999 and taken to public hearings on February 24th and 28th of this year. However, a key staff retirement delayed the Department's earlier completion of the report

for legislative standing committees. The Department is sending the requisite materials to the Legislature for review on May 11th. Consequently, the Department will not be able to file the rules until at least June 10 for an August 1, 2000 effective date. Therefore, I request an extension of the effective period of the emergency rules by **50 days**, through July 31, 2000. If the effective period of the emergency rules is not extended, in the interim, the Department will not have the authority to continue the implementation of the changes defined in Act 308.

Family Care. The emergency rulemaking order creating ch. HFS 10 was published and effective on February 1, 2000, and **will expire on June 30, 2000**, unless extended. The order creating ch. HFS 10, the Department's rules for the family care program, allowed the Department to administer a flexible Family Care benefit to help arrange or finance long-term care services to older people and adults with physical or developmental disabilities. The Family Care program was enacted as part of 1999 Wisconsin Act 9. The benefit is an entitlement for those who meet established criteria. It may be accessed only through enrollment in Care Management Organizations (CMOs) that meet requirements specified in the legislation.

The Act also authorizes the Department of Health and Family Services to contract with Aging and Disability Resource Centers to provide broad information and assistance services, long-term care counseling, determinations of functional and financial eligibility for the Family Care benefit, assistance in enrolling in a Care Management Organization if the person chooses to do so, and eligibility determination for certain other benefits, including Medicaid and other services.

The emergency rules interpret 1999 Wisconsin Act 9, the main body of which is in ss. 46.2805 to 46.2895, Stats. The Department of Health and Family Services is specifically directed to promulgate rules by ss. 46.286 (4) to (7), 46.288 (1) to (3), 50.02 (2) (d) and 50.36 (2) (c), Stats. Non-statutory provisions in section 9123 of 1999 Wisconsin Act 9 require that the rules are to be promulgated using emergency rulemaking procedures and exempts the Department from the requirements under s. 227.24 (1) (a), (2) (b) and (3) of the Stats., to make a finding of emergency. The rules required under the provisions cited above accompany related rules intended to clarify and implement other provisions of the Family Care legislation that are within the scope of the Department's authority.

Replacement permanent rules were sent to the Legislative Council for review on March 8, 2000 and taken to several public hearings ending with the hearing held on May 8th. However, since permanent rules will not become effective by July 1, 2000, I request an extension of the effective period of the emergency rules by **60 days**, through August 29, 2000. If the effective period of the emergency rules is not extended, in the interim, the Department will not have the authority to continue the implementation of the changes defined in Act 9.

Caregiver background checks. The emergency rulemaking order repealing and recreating ch. HFS 12 was published on February 12, 2000 to be effective on February 13, 2000. The rules will expire on **July 12, 2000**, unless extended. The 1999-2001 Biennial

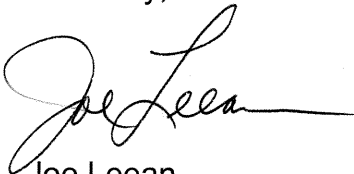
Senator Robson
May 11, 2000
Page 3

Budget Act, 1999 Wisconsin Act 9, made several changes to ss. 48.685 and 50.065, Stats., the Caregiver Law. These changes were effective on October 29, 1999. The Department's previous rules, effective July 1, 1999, as amended on September 16, 1999, were in large part made obsolete by those statutory changes. Consequently, the Department through its emergency rulemaking order repealed and recreated ch. HFS 12 to bring its rules for operation of the Caregiver Law into conformity with the revised statutes. This was done as quickly as possible by emergency order to remove public confusion resulting from administrative rules, which have been widely relied upon by the public for understanding the operation of the Caregiver Law, that are now in conflict with current statutes.

Replacement permanent rules were sent to the Legislative Council for review on March 7, 2000 and a hearing on the rules was held on April 13th. However, since permanent rules will not become effective by July 12, 2000, I request an extension of the effective period of the emergency rules by **51 days**, through August 31, 2000. If the effective period of the emergency rules is not extended, in the interim, the Department will not have the authority to continue the implementation of the changes defined in Act 9.

A copy of each emergency rulemaking order is attached to this letter. If you have any questions about the emergency rules relating to the administration of the Adoption Assistance program, you may contact Jill Duerst of the Department's Division of Children and Family Services at 266-1142. If you have any questions relating to the emergency rules relating to Family Care, you may contact Lorraine Barniskis at 267-5267. Questions related to the Caregiver Background Check rules should be directed to Susan Dow at 264-9893.

Sincerely,

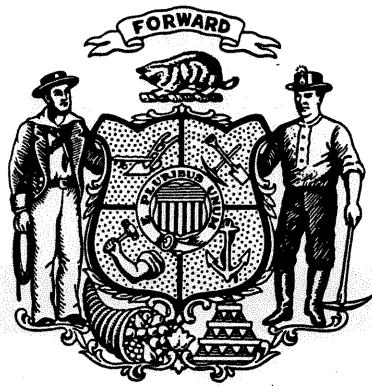


Joe Leean
Secretary

Attachments

cc Representative Grothman
Senator Risser
Representative Jensen

END



END

ORDER OF THE
DEPARTMENT OF HEALTH AND FAMILY SERVICES
CREATING RULES

The Legislature in s. 9122 (3tz) of 1997 Wisconsin Act 237 authorized the Department to promulgate rules required under s. 9122 (3ty) of 1997 Wisconsin Act 237 by using emergency rulemaking procedures but exempted the Department from the requirement under s.227.24 (1) and (3), Stats., to make a finding of emergency. These are the rules.

Analysis Prepared by the Department of Health and Family Services

Section 9122 (3ty) (b) of 1997 Wisconsin Act 237 directs the Department to distribute up to \$170,000 each year in state fiscal years 1999 and 2000 to provide up to 10 grants to public or private hospitals to pay for specialized training and on-site consultation and support of medical personnel of neonatal intensive care units in the principles and practice of developmentally supportive and family-centered care for high-risk infants and their families. Section 9122 (3ty) (c) of Act 237 directs the Department to promulgate rules that establish criteria and procedures for awarding grants. The rules are to define "specialized training and on-site consultation and support," which must include a minimum of 40 hours of formal training and 160 hours of practice work.

This order creates ch. HFS 114 relating to distribution of grants to applicant public or private hospitals' neonatal intensive care units to pay for training of staff in the principles and practice of developmentally supportive and family-centered care. The rules include a process by which hospitals may apply for training funds, requirements relating to the training and requirements relating to training center record-keeping and reporting.

ORDER

Pursuant to authority vested in the Department of Health and Family Services by ss.227.11(2) and 227.24(1)(c), Stats., and s.9122(3ty)(c) and (3tz) of 1997 Wisconsin Act 237, the Department of Health and Family Services hereby creates rules interpreting s.9122(3ty) of 1997 Wisconsin Act 237. as follows:

SECTION 1. Chapter HFS 114 is created to read:

Chapter HFS 114

NEONATAL INTENSIVE CARE UNIT TRAINING GRANTS

HFS 114.01	Authority and purpose
HFS 114.02	Applicability
HFS 114.03	Definitions
HFS 114.04	Application for training grants
HFS 114.05	Training
HFS 114.06	Reports

HFS 114.01 AUTHORITY AND PURPOSE. This chapter is promulgated under the authority of s.227.11(2), Stats., and s.9122(3ty)(c) and (3tz) of 1997 Wisconsin Act 237 to implement the neonatal intensive care unit training grant program under s. 9122(3ty) of 1997 Wisconsin Act 237 by establishing criteria and procedures for awarding grants to public and private hospitals to pay for specialized training and on-site consultation to medical personnel of neonatal intensive care units in the principles and practice of developmentally supportive and family-centered care for high-risk infants and their families, and defining "specialized training and on-site consultation and support."

HFS 114.02 APPLICABILITY This chapter applies to the department, to the provider of the specialized training and on-site consultation and support and to all public and private hospitals that request the specialized training and on-site consultation in the principles and practice of developmentally supportive and family-centered care for high risk infants and their families.

HFS 114.03 DEFINITIONS. In this chapter:

- (1) "Department" means the Wisconsin department of health and family services.
- (2) "Developmentally supportive and family-centered care" means all of the following:
 - (a) Caregiving that is individualized, flexible and responsive to each infant, based on continuous skillful monitoring of the infant's behavioral and physiologic responses.
 - (b) Modifications to the caregiving environment to minimize infant stress and promote optimal infant adjustment to his or her neonatal intensive care unit experience.
 - (c) Support of the developing parent or family and infant relationship throughout the infant's neonatal intensive care unit stay and after discharge, using strategies that focus on developing parental competence in infant care through parental education, support and guidance in the practice of appropriate care.
- (3) "Division" means the department's division of public health.
- (4) "High-risk infant" means a neonatal child who has or is at risk of having serious physical disorders, biological complications or developmental impairment.

(5) "Hospital" has the meaning given in s. 50.33(2), Stats.

(6) "Medical personnel" means neonatologists, nurses, respiratory therapists, social workers, physical therapists, occupational therapists, speech and language therapists, educators, pediatricians, psychiatrists, neurologists and other health care professionals responsible for the care of infants and their families in the NICU.

(7) "Neonatal" means within 4 weeks after birth.

(8) "NICU" or "neonatal intensive care unit" means a hospital unit on which are concentrated special equipment and skilled medical personnel for the care of high-risk infants requiring immediate or continuous attention.

(9) "NIDCAP" means the Newborn Individualized Developmental Care and Assessment Program, an education and training program for health care professionals.

Note: The NIDCAP Guide may be reviewed at the Division of Public Health, 1414 E. Washington Avenue, Madison, Wisconsin, or purchased from the National NIDCAP Training Center, Children's Hospital, 320 Longwood Avenue, Boston, Massachusetts, 02115.

(10) "Specialized training and on-site consultation and support" means the training requirements for the NIDCAP level I developmental care education and observational training program for individual professionals.

(11) "State fiscal year" means the 12 month period beginning July 1 and ending June 30.

(12) "Training center" means a NIDCAP-certified training center.

(13) "Work plan" means an outline of the goals, objectives and implementation steps for a designated training center during one funding year and against which the department will monitor the center.

HFS 114.04 APPLICATION FOR TRAINING GRANTS. (1) SOLICITATION OF APPLICATIONS. The department shall solicit applications for training funds by direct written correspondence addressed to hospitals that have NICUs.

(2) APPLICATION. A public or private hospital wanting to apply for training funds shall submit a written application to the department on a form provided by the department, which shall include all of the following:

(a) Documented evidence of interdisciplinary planning and commitment to the implementation of developmentally supportive and family centered care in the NICU. This shall include a summary of site consultation or planning meetings that demonstrate interdisciplinary involvement, identification of an interdisciplinary group of trainees and designation of an interdisciplinary developmental care committee to provide leadership for the ongoing implementation of developmentally supportive care.

(b) A statement that the applicant hospital will maintain salaries and appropriate work schedules for its medical personnel employees for the duration of the 16 month training process to facilitate the employees' successful completion of the training program.

(c) The number of medical personnel employees to be enrolled in the training program.

Note: Send a completed application to the MCH Unit, Bureau of Family and Community Health, Division of Public Health, 1414 E. Washington Avenue, Madison, WI 53703.

(3) REVIEW OF APPLICATIONS. The department shall review all applications for a grant for compliance with the content specifications under sub. (2). The department may reject any application failing to meet the content specifications. Rejection of an application for failure to meet the content specifications is not subject to appeal.

(4) MAKING AWARDS. The department shall make awards based on an applicant's ability to demonstrate a commitment to implement and provide continuing support for the principles and practice of developmentally supportive and family centered care in the NICU.

(5) NOTIFICATION. The department shall notify in writing all applicants of award decisions.

(6) AVAILABILITY OF FUNDS. (a) All funding decisions shall be contingent upon the availability of funds under s.20.435(5)(er), Stats. Any changes in the amount available which were unforeseen at the time of the department's release of grant application materials shall be accommodated by the department, as appropriate, by means of reduction, elimination or increase in existing awards, by awarding of funds to applicants previously denied due to insufficient funds or by release of new grant application materials.

(b) Any funds that become available due to denial of an award to a selected grantee as a result of failure of the selected grantee to comply with the application criteria or as a result of termination of a grant by either party shall be reallocated by the department at its discretion but within the limits of the intent of the appropriation and this chapter.

HFS 114.05 TRAINING . (1) Training shall consist of the training elements of the NIDCAP Level I developmental care education and observational program for individual professionals.

(2) Training shall include a minimum of 40 hours of formal training and 160 hours of clinical practice.

(3) Recipients of training shall include any or all of the medical personnel of an NICU.

(4) Training shall be provided through a certified NIDCAP training center. An individual who has been certified as a NIDCAP trainer and who has demonstrated proficiency in training professional caregivers in developmentally supportive and family-centered care shall conduct the training.

(5) The training center shall conduct training on site at the public or private hospital that has requested the training.

(6) (a) The designated training center shall submit a work plan and budget to the department for approval no later than January 2, 1999 for state fiscal year 1999 and no later than June 1, 1999 for state fiscal year 2000.

(b) The work plan shall include a plan for making training available to public and private hospitals who request training by submitting a letter of interest.

(c) If the work plan and budget indicate that the training center is not meeting the requirements of this chapter, the department may withhold all or part of an annual distribution of funds until requirements are met.

(7) A hospital that has requested the training shall incur no additional training expense.

(8) The training center shall provide documentation of certification of competency for the NIDCAP Level I program to participants who successfully complete the training program.

HFS 114.06 REPORTS. (1) The training center shall submit to the department reports required by the department. The reports shall be submitted to the department no later than the end of each state fiscal year, beginning with the year ending July 31, 1999.

(2) The reports shall include all of the following:

(a) A record of all training conducted, including date, site and names and professional classification of all medical personnel who have successfully completed the program.

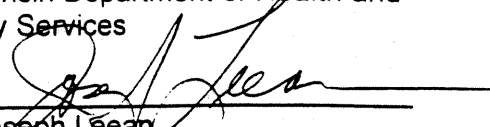
(b) A description of progress on attaining the goals, objectives and implementation steps outlined in the approved work plan.

(3) Failure of the training center to maintain records or to submit the reports required under this section may result in the department's withdrawal of the training center's designation.

The rules contained in this order shall take effect as emergency rules upon publication in the official state newspaper, as provided in s. 227.24(1)(c), Stats.

Wisconsin Department of Health and
Family Services

Dated: January 11, 1999

By: 

Joseph Leean
Secretary

SEAL:

The rules contained in this order shall take effect as emergency rules on January 1, 1999.

Wisconsin Department of Health and
Family Services

Dated: December 21, 1998

By: 

Joseph L. Dean
Secretary

SEAL:

LRB or Bill No./Adm. Rule No.
HFS 119.07(6)&119.15
Amendment No. if Applicable

FISCAL ESTIMATE
DOA-2048 N(R10/96)

- ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

Subject
HEALTH INSURANCE RISK-SHARING PLAN (HIRSP)

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

- Increase Existing Appropriation Increase Existing Revenues
 Decrease Existing Appropriation Decrease Existing Revenues
 Create New Appropriation

Decrease Costs

Local: No local government costs

1. Increase Costs
 Permissive Mandatory
2. Decrease Costs
 Permissive Mandatory

3. Increase Revenues
 Permissive Mandatory
4. Decrease Revenues
 Permissive Mandatory

5. Types of Local Governmental Units Affected:
 Towns Villages Cities
 Counties Others _____
 School Districts WTCS Districts

Fund Sources Affected

- GPR FED PRO PRS SEG SEG-S

Affected Ch. 20 Appropriations

Assumptions Used in Arriving at Fiscal Estimate

This order updates Health Insurance Risk-Sharing Plan (HIRSP) premium rates effective January 1, 1999 for HIRSP policies that provide supplemental health insurance coverage for persons eligible for Medicare, and adjusts total HIRSP insurer assessments and provider payment rates for the 6-month period beginning January 1, 1999.

To cover Plan costs, the Department is authorized under s. 149.143 (3) (a), Stats., to increase premium rates for the remainder of the Plan year, to increase the total insurer assessments for that period and to adjust the provider payment rate for that period. That is being done through this order for the period January 1, 1999 through June 30, 1999.

The rule changes will not by themselves affect the expenditures or revenues of state government or local governments. They adjust premiums as expected under the program statute to help offset program costs and adjust the total insurer assessments and the provider payment rate in accordance with a statute-specified methodology, also to offset program costs.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)

H&FS/Randy McElhose, 267-7127

Authorized Signature/Telephone No.

Richard W. Lorang
Richard W. Lorang, 266-9622

Date

12-21-98

FISCAL ESTIMATE

DOA-2048 N(R10/96)

- ORIGINAL
- CORRECTED
- UPDATED
- SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
HFS 114

Amendment No. if Applicable

Subject

NEONATAL INTENSIVE CARE UNIT TRAINING GRANTS

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

- Increase Existing Appropriation
- Decrease Existing Appropriation
- Create New Appropriation
- Increase Existing Revenues
- Decrease Existing Revenues

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

Decrease Costs

Local: No local government costs

- 1. Increase Costs
 - Permissive
 - Mandatory
- 2. Decrease Costs
 - Permissive
 - Mandatory

- 3. Increase Revenues
 - Permissive
 - Mandatory
- 4. Decrease Revenues
 - Permissive
 - Mandatory

5. Types of Local Governmental Units Affected:
 Towns Villages Cities
 Counties Others _____
 School Districts WTCS Districts

Fund Sources Affected

- GPR FED PRO PRS SEG SEG-S

Affected Ch. 20 Appropriations
20.435 (5) (er)

Assumptions Used in Arriving at Fiscal Estimate

This order establishes criteria and procedures for implementation of the neonatal intensive care unit training grant program established by s. 9122 (3ty) (c) of 1997 Wisconsin Act 237. The Department is to distribute up to \$170,000 each year in state fiscal years 1999 and 2000 in the form of up to 10 grants each year to applicant hospitals to pay for specialized training and on-site consultation and support of medical personnel in the principles and practice of developmentally supportive and family-centered care for high-risk infants.

The rules will not affect the expenditures or revenues of state government or local governments. The Department will administer this new program with existing staff. Local governments are not involved in program administration. A local government could operate an applicant hospital that is awarded a training grant, but the training grant is specific for a type of training and consultation and covers the cost of that training and consultation.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)

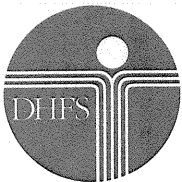
H&FS/Laurie Tellier, 267-9662

Authorized Signature/Telephone No.

Richard W. Lorang, 266-9622

Date

1-11-99



State of Wisconsin
Department of Health and Family Services

Tommy G. Thompson, Governor
Joe Leean, Secretary

April 30, 1999

The Honorable Judy Robson, Co-Chairperson
Joint Committee for Review of Administrative Rules
Room 15 South, State Capitol
Madison, Wisconsin

Dear Senator Robson:

The Department of Health and Family Services has two emergency rulemaking orders in effect that will expire before the emergency rules are replaced by permanent rules unless the effective periods of the emergency rules are extended. Pursuant to s. 227.24(2), Stats., I ask the Joint Committee to extend the effective periods of the emergency rules by the number of days indicated below. The emergency rules are as follows:

(1) Operation of the Health Insurance Risk-Sharing Plan (HIRSP). These emergency rules, amendments to HFS 119, were published to take effect on January 1, 1999, and will expire on May 31, 1999, unless extended. The order increases premium rates for policies that provide supplemental coverage for persons eligible for Medicare, and adjusts total insurer assessments and provider payment rates. The Department's authority to increase HIRSP premium rates and adjust total insurer assessments and the provider payment rate during a plan year is set out in s. 149.143 (3), Stats. The Department is authorized by s. 149.143 (4), Stats., to promulgate these rule changes by using emergency rulemaking procedures but without having to make a finding of emergency. Identical replacement permanent rules were sent to the Legislative Council for review on January 15, 1999, taken to public hearing on March 11, 1999, and submitted to the Legislature on April 27, 1999, for review by standing committees, but cannot be filed until mid-June 1999 for an August 1, 1999 effective date. Therefore, I request an extension of the effective period of the emergency rules by 60 days, through July 29, 1999.

(2) Neonatal Intensive Care Unit Training Grants. These emergency rules, HFS 114, were published on January 21, 1999, and will expire on June 20, 1999, unless extended. The order establishes criteria and procedures for awarding grants to hospitals with neonatal intensive care units to pay for specialized and on-site consultation and support of medical personnel of those units in the principles and practices of a training program called "developmentally supportive and family-centered care for high-risk infants and their families." Section 9122 (3ty) (c) of 1997 Wisconsin Act 237 directed the Department to promulgate rules for the grant program, and s. 9122 (3tz) of Act 237 authorized the Department to promulgate the rules by using emergency rulemaking procedures but without having to make a finding of emergency. Replacement permanent rules were sent to the Legislative Council for review on February 9, 1999, taken to

Senator Robson

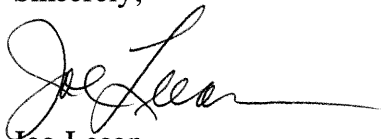
April 7, 1999

Page 2

public hearing on April 7, 1999, and submitted to the Legislature on April 27, 1999, for review by standing committees, but cannot be filed until mid-June 1999 for an August 1, 1999 effective date. Therefore, I request an extension of the effective period of the emergency rules by 42 days, through July 31, 1999.

Copies of the emergency orders are attached to this letter. If you have any questions about the emergency rules relating to operation of HIRSP, you may contact Randy McElhose of the Department's Division of Health Care Financing at 267-7127. If you have any questions about the emergency rules relating to neonatal intensive care unit training grants, you may contact Laurie Tellier of the Department's Division of Public Health at 267-9662.

Sincerely,

A handwritten signature in black ink, appearing to read "Joe LEEAN", with a long horizontal flourish extending to the right.

Joe LEEAN
Secretary

Attachments

cc Representative Grothman

ORDER OF THE
DEPARTMENT OF HEALTH AND FAMILY SERVICES
AMENDING RULES

Section 149.143 (4), Stats., as affected by 1997 Wisconsin Act 27, permits the Department to promulgate rules required under s. 149.143(2) and (3), Stats., as affected by Act 27, by using emergency rulemaking procedures except that the Department is specifically exempted from the requirement under s. 227.24(1) and (3), Stats., that it make a finding of emergency. These are the rules. Department staff consulted with the HIRSP Board of Governors on December 11, 1998 on the proposed rules, as required by s. 149.20, Stats.

Analysis Prepared by the Department of Health and Family Services

The State of Wisconsin in 1981 established a Health Insurance Risk-Sharing Plan (HIRSP) for the purpose of making health insurance coverage available to medically uninsured residents of the state. One type of coverage provided by HIRSP is supplemental coverage for persons eligible for Medicare. This coverage is called Plan 2. Medicare (Plan 2) has a \$500 deductible. Approximately 17% of the 7,123 HIRSP policies in effect on October 31, 1998 were of the Plan 2 type.

The Department through this rulemaking order is amending ch. HFS 119 in order to update HIRSP Plan 2 premium rates by just over 10% in accordance with the authority and requirements set out in s. 149.143 (3) (a), Stats. The Department is required to set premium rates by rule and the rates must be calculated in accordance with generally accepted actuarial principles.

The Department through this order is also adjusting the total HIRSP insurer assessments and provider payment rates in accordance with the authority and requirements set out in s. 149.143 (2)(a)3. and 4., Stats., as affected by Act 27.

ORDER

Pursuant to authority vested in the Department of Health and Family Services by s. 149.143 (2) (a) 2., 3. and 4., (3) and (4), Stats., as affected by 1997 Wisconsin Act 27, the Department of Health and Family Services hereby amends rules interpreting s. 149.143, Stats., as affected by 1997 Wisconsin Act 27, as follows:

SECTION 1. HFS 119.07 (6) (b) (intro.) and Medicare Plan tables, as repealed and recreated by emergency order effective July 1, 1998, and by permanent order effective February 1, 1999, are amended to read:

HFS 119.07(6)(b) Annual premiums for major medical plan policies with standard deductible. (intro.) The schedule of annual premiums beginning July 1, 1998 January 1, 1999, for persons not entitled to a premium reduction under s. 149.165, Stats., is as follows:

MEDICARE PLAN – Males

Age Group	Zone 1	Zone 2	Zone 3
0-18	<u>\$888972</u>	<u>\$792876</u>	<u>\$708780</u>
19-24	<u>888972</u>	<u>792876</u>	<u>708780</u>
25-29	<u>888972</u>	<u>792876</u>	<u>708780</u>
30-34	<u>1,0201,128</u>	<u>9121,008</u>	<u>816900</u>
35-39	<u>1,1401,260</u>	<u>1,0201,128</u>	<u>900996</u>
40-44	<u>1,3801,524</u>	<u>1,2481,368</u>	<u>1,0921,200</u>
45-49	<u>1,7161,884</u>	<u>1,5361,692</u>	<u>1,3801,524</u>
50-54	<u>2,2082,424</u>	<u>1,9922,196</u>	<u>1,7641,944</u>
55-59	<u>2,8923,180</u>	<u>2,6162,880</u>	<u>2,3122,544</u>
60+	<u>3,5523,912</u>	<u>3,1923,516</u>	<u>2,8323,120</u>

MEDICARE PLAN – Females

Age Group	Zone 1	Zone 2	Zone 3
0-18	<u>\$888972</u>	<u>\$792876</u>	<u>\$708780</u>
19-24	<u>1,2241,344</u>	<u>1,1161,224</u>	<u>9721,068</u>
25-29	<u>1,2841,416</u>	<u>1,1561,272</u>	<u>1,0321,140</u>
30-34	<u>1,4041,548</u>	<u>1,2721,404</u>	<u>1,1281,236</u>
35-39	<u>1,5121,668</u>	<u>1,3681,500</u>	<u>1,2121,332</u>
40-44	<u>1,6801,848</u>	<u>1,5121,668</u>	<u>1,3321,464</u>
45-49	<u>1,9442,136</u>	<u>1,7521,932</u>	<u>1,5601,716</u>
50-54	<u>2,1842,400</u>	<u>1,9562,148</u>	<u>1,7521,932</u>
55-59	<u>2,4962,748</u>	<u>2,2442,472</u>	<u>1,9922,196</u>
60+	<u>2,9403,240</u>	<u>2,6402,904</u>	<u>2,3402,580</u>

SECTION 2. HFS 119.15, as created by emergency order effective July 1, 1998, and by permanent order effective February 1, 1999, is amended to read:

HFS 119.15 INSURER ASSESSMENTS AND PROVIDER PAYMENT RATES.

(1) PURPOSE. This section implements s. 149.143 (2) (a) 3. and 4., Stats.

(2) INSURER ASSESSMENTS. The insurer assessments for the time period ~~July 1, 1998~~ January 1, 1999 through ~~December 31, 1998~~ June 30, 1999 total ~~\$4,266,874~~ \$4,043,589.

(3) PROVIDER PAYMENT RATES. The total adjustment to the provider payment rates for the time period ~~July 1, 1998~~ January 1, 1999 through ~~December 31, 1998~~ June 30, 1999 is ~~\$4,266,874~~ \$ 4,043,589.

ORDER OF THE
DEPARTMENT OF HEALTH AND FAMILY SERVICES
CREATING RULES

The Legislature in s. 9122 (3tz) of 1997 Wisconsin Act 237 authorized the Department to promulgate rules required under s. 9122 (3ty) of 1997 Wisconsin Act 237 by using emergency rulemaking procedures but exempted the Department from the requirement under s.227.24 (1) and (3), Stats., to make a finding of emergency. These are the rules.

Analysis Prepared by the Department of Health and Family Services

Section 9122 (3ty) (b) of 1997 Wisconsin Act 237 directs the Department to distribute up to \$170,000 each year in state fiscal years 1999 and 2000 to provide up to 10 grants to public or private hospitals to pay for specialized training and on-site consultation and support of medical personnel of neonatal intensive care units in the principles and practice of developmentally supportive and family-centered care for high-risk infants and their families. Section 9122 (3ty) (c) of Act 237 directs the Department to promulgate rules that establish criteria and procedures for awarding grants. The rules are to define "specialized training and on-site consultation and support," which must include a minimum of 40 hours of formal training and 160 hours of practice work.

This order creates ch. HFS 114 relating to distribution of grants to applicant public or private hospitals' neonatal intensive care units to pay for training of staff in the principles and practice of developmentally supportive and family-centered care. The rules include a process by which hospitals may apply for training funds, requirements relating to the training and requirements relating to training center record-keeping and reporting.

ORDER

Pursuant to authority vested in the Department of Health and Family Services by ss.227.11(2) and 227.24(1)(c), Stats., and s.9122(3ty)(c) and (3tz) of 1997 Wisconsin Act 237, the Department of Health and Family Services hereby creates rules interpreting s.9122(3ty) of 1997 Wisconsin Act 237, as follows:

SECTION 1. Chapter HFS 114 is created to read:

Chapter HFS 114

NEONATAL INTENSIVE CARE UNIT TRAINING GRANTS

HFS 114.01	Authority and purpose
HFS 114.02	Applicability
HFS 114.03	Definitions
HFS 114.04	Application for training grants
HFS 114.05	Training
HFS 114.06	Reports

HFS 114.01 AUTHORITY AND PURPOSE. This chapter is promulgated under the authority of s.227.11(2), Stats., and s.9122(3ty)(c) and (3tz) of 1997 Wisconsin Act 237 to implement the neonatal intensive care unit training grant program under s. 9122(3ty) of 1997 Wisconsin Act 237 by establishing criteria and procedures for awarding grants to public and private hospitals to pay for specialized training and on-site consultation to medical personnel of neonatal intensive care units in the principles and practice of developmentally supportive and family-centered care for high-risk infants and their families, and defining "specialized training and on-site consultation and support."

HFS 114.02 APPLICABILITY This chapter applies to the department, to the provider of the specialized training and on-site consultation and support and to all public and private hospitals that request the specialized training and on-site consultation in the principles and practice of developmentally supportive and family-centered care for high risk infants and their families.

HFS 114.03 DEFINITIONS. In this chapter:

- (1) "Department" means the Wisconsin department of health and family services.
- (2) "Developmentally supportive and family-centered care" means all of the following:
 - (a) Caregiving that is individualized, flexible and responsive to each infant, based on continuous skillful monitoring of the infant's behavioral and physiologic responses.
 - (b) Modifications to the caregiving environment to minimize infant stress and promote optimal infant adjustment to his or her neonatal intensive care unit experience.
 - (c) Support of the developing parent or family and infant relationship throughout the infant's neonatal intensive care unit stay and after discharge, using strategies that focus on developing parental competence in infant care through parental education, support and guidance in the practice of appropriate care.
- (3) "Division" means the department's division of public health.
- (4) "High-risk infant" means a neonatal child who has or is at risk of having serious physical disorders, biological complications or developmental impairment.

(5) "Hospital" has the meaning given in s. 50.33(2), Stats.

(6) "Medical personnel" means neonatologists, nurses, respiratory therapists, social workers, physical therapists, occupational therapists, speech and language therapists, educators, pediatricians, psychiatrists, neurologists and other health care professionals responsible for the care of infants and their families in the NICU.

(7) "Neonatal" means within 4 weeks after birth.

(8) "NICU" or "neonatal intensive care unit" means a hospital unit on which are concentrated special equipment and skilled medical personnel for the care of high-risk infants requiring immediate or continuous attention.

(9) "NIDCAP" means the Newborn Individualized Developmental Care and Assessment Program, an education and training program for health care professionals.

Note: The NIDCAP Guide may be reviewed at the Division of Public Health, 1414 E. Washington Avenue, Madison, Wisconsin, or purchased from the National NIDCAP Training Center, Children's Hospital, 320 Longwood Avenue, Boston, Massachusetts, 02115.

(10) "Specialized training and on-site consultation and support" means the training requirements for the NIDCAP level I developmental care education and observational training program for individual professionals.

(11) "State fiscal year" means the 12 month period beginning July 1 and ending June 30.

(12) "Training center" means a NIDCAP-certified training center.

(13) "Work plan" means an outline of the goals, objectives and implementation steps for a designated training center during one funding year and against which the department will monitor the center.

HFS 114.04 APPLICATION FOR TRAINING GRANTS. (1) SOLICITATION OF APPLICATIONS. The department shall solicit applications for training funds by direct written correspondence addressed to hospitals that have NICUs.

(2) APPLICATION. A public or private hospital wanting to apply for training funds shall submit a written application to the department on a form provided by the department, which shall include all of the following:

(a) Documented evidence of interdisciplinary planning and commitment to the implementation of developmentally supportive and family centered care in the NICU. This shall include a summary of site consultation or planning meetings that demonstrate interdisciplinary involvement, identification of an interdisciplinary group of trainees and designation of an interdisciplinary developmental care committee to provide leadership for the ongoing implementation of developmentally supportive care.

(b) A statement that the applicant hospital will maintain salaries and appropriate work schedules for its medical personnel employees for the duration of the 16 month training process to facilitate the employees' successful completion of the training program.

(c) The number of medical personnel employees to be enrolled in the training program.

Note: Send a completed application to the MCH Unit, Bureau of Family and Community Health, Division of Public Health, 1414 E. Washington Avenue, Madison, WI 53703.

(3) **REVIEW OF APPLICATIONS.** The department shall review all applications for a grant for compliance with the content specifications under sub. (2). The department may reject any application failing to meet the content specifications. Rejection of an application for failure to meet the content specifications is not subject to appeal.

(4) **MAKING AWARDS.** The department shall make awards based on an applicant's ability to demonstrate a commitment to implement and provide continuing support for the principles and practice of developmentally supportive and family centered care in the NICU.

(5) **NOTIFICATION.** The department shall notify in writing all applicants of award decisions.

(6) **AVAILABILITY OF FUNDS.** (a) All funding decisions shall be contingent upon the availability of funds under s.20.435(5)(er), Stats. Any changes in the amount available which were unforeseen at the time of the department's release of grant application materials shall be accommodated by the department, as appropriate, by means of reduction, elimination or increase in existing awards, by awarding of funds to applicants previously denied due to insufficient funds or by release of new grant application materials.

(b) Any funds that become available due to denial of an award to a selected grantee as a result of failure of the selected grantee to comply with the application criteria or as a result of termination of a grant by either party shall be reallocated by the department at its discretion but within the limits of the intent of the appropriation and this chapter.

HFS 114.05 TRAINING. (1) Training shall consist of the training elements of the NIDCAP Level I developmental care education and observational program for individual professionals.

(2) Training shall include a minimum of 40 hours of formal training and 160 hours of clinical practice.

(3) Recipients of training shall include any or all of the medical personnel of an NICU.

(4) Training shall be provided through a certified NIDCAP training center. An individual who has been certified as a NIDCAP trainer and who has demonstrated proficiency in training professional caregivers in developmentally supportive and family-centered care shall conduct the training.

(5) The training center shall conduct training on site at the public or private hospital that has requested the training.

(6) (a) The designated training center shall submit a work plan and budget to the department for approval no later than January 2, 1999 for state fiscal year 1999 and no later than June 1, 1999 for state fiscal year 2000.

(b) The work plan shall include a plan for making training available to public and private hospitals who request training by submitting a letter of interest.

(c) If the work plan and budget indicate that the training center is not meeting the requirements of this chapter, the department may withhold all or part of an annual distribution of funds until requirements are met.

(7) A hospital that has requested the training shall incur no additional training expense.

(8) The training center shall provide documentation of certification of competency for the NIDCAP Level I program to participants who successfully complete the training program.

HFS 114.06 REPORTS. (1) The training center shall submit to the department reports required by the department. The reports shall be submitted to the department no later than the end of each state fiscal year, beginning with the year ending July 31, 1999.

(2) The reports shall include all of the following:

(a) A record of all training conducted, including date, site and names and professional classification of all medical personnel who have successfully completed the program.

(b) A description of progress on attaining the goals, objectives and implementation steps outlined in the approved work plan.

(3) Failure of the training center to maintain records or to submit the reports required under this section may result in the department's withdrawal of the training center's designation.

The rules contained in this order shall take effect as emergency rules upon publication in the official state newspaper, as provided in s. 227.24(1)(c), Stats.

Wisconsin Department of Health and
Family Services

Dated: **January 11, 1999**

By: 

Joseph Lee
Secretary

SEAL:

The rules contained in this order shall take effect as emergency rules on January 1, 1999.

Wisconsin Department of Health and
Family Services

Dated: December 21, 1998

By: 

Joseph L. Lee
Secretary

SEAL:

FISCAL ESTIMATE

DOA-2048 N(R10/96)

- ORIGINAL
- CORRECTED
- UPDATED
- SUPPLEMENTAL

Subject

HEALTH INSURANCE RISK-SHARING PLAN (HIRSP)

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

- Increase Existing Appropriation
- Decrease Existing Appropriation
- Create New Appropriation
- Increase Existing Revenues
- Decrease Existing Revenues

Decrease Costs

Local: No local government costs

- | | | |
|--|--|--|
| 1. <input type="checkbox"/> Increase Costs
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory
2. <input type="checkbox"/> Decrease Costs
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | 3. <input type="checkbox"/> Increase Revenues
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory
4. <input type="checkbox"/> Decrease Revenues
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory | 5. Types of Local Governmental Units Affected:
<input type="checkbox"/> Towns <input type="checkbox"/> Villages <input type="checkbox"/> Cities
<input type="checkbox"/> Counties <input type="checkbox"/> Others _____
<input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts |
|--|--|--|

Fund Sources Affected

- GPR
- FED
- PRO
- PRS
- SEG
- SEG-S

Affected Ch. 20 Appropriations

Assumptions Used in Arriving at Fiscal Estimate

This order updates Health Insurance Risk-Sharing Plan (HIRSP) premium rates effective January 1, 1999 for HIRSP policies that provide supplemental health insurance coverage for persons eligible for Medicare, and adjusts total HIRSP insurer assessments and provider payment rates for the 6-month period beginning January 1, 1999.

To cover Plan costs, the Department is authorized under s. 149.143 (3) (a), Stats., to increase premium rates for the remainder of the Plan year, to increase the total insurer assessments for that period and to adjust the provider payment rate for that period. That is being done through this order for the period January 1, 1999 through June 30, 1999.

The rule changes will not by themselves affect the expenditures or revenues of state government or local governments. They adjust premiums as expected under the program statute to help offset program costs and adjust the total insurer assessments and the provider payment rate in accordance with a statute-specified methodology, also to offset program costs.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)

H&FS/Randy McElhose, 267-7127

Authorized Signature/Telephone No.

Richard W. Lorang
Richard W. Lorang, 266-9622

Date

12-21-98

FISCAL ESTIMATE

DOA-2048 N(R10/96)

- ORIGINAL
- CORRECTED
- UPDATED
- SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
HFS 114

Amendment No. if Applicable

Subject

NEONATAL INTENSIVE CARE UNIT TRAINING GRANTS

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation.

- Increase Existing Appropriation
- Decrease Existing Appropriation
- Create New Appropriation
- Increase Existing Revenues
- Decrease Existing Revenues

Increase Costs - May be possible to Absorb Within Agency's Budget Yes No

Decrease Costs

Local: No local government costs

- 1. Increase Costs
 - Permissive
 - Mandatory
- 2. Decrease Costs
 - Permissive
 - Mandatory

- 3. Increase Revenues
 - Permissive
 - Mandatory
- 4. Decrease Revenues
 - Permissive
 - Mandatory

5. Types of Local Governmental Units Affected:
- Towns
 - Counties
 - School Districts
 - Villages
 - Others _____
 - WTCS Districts

Fund Sources Affected

- GPR
- FED
- PRO
- PRS
- SEG
- SEG-S

Affected Ch. 20 Appropriations
20.435 (5) (er)

Assumptions Used in Arriving at Fiscal Estimate

This order establishes criteria and procedures for implementation of the neonatal intensive care unit training grant program established by s. 9122 (3ty) (c) of 1997 Wisconsin Act 237. The Department is to distribute up to \$170,000 each year in state fiscal years 1999 and 2000 in the form of up to 10 grants each year to applicant hospitals to pay for specialized training and on-site consultation and support of medical personnel in the principles and practice of developmentally supportive and family-centered care for high-risk infants.

The rules will not affect the expenditures or revenues of state government or local governments. The Department will administer this new program with existing staff. Local governments are not involved in program administration. A local government could operate an applicant hospital that is awarded a training grant, but the training grant is specific for a type of training and consultation and covers the cost of that training and consultation.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)

H&FS/Laurie Tellier, 267-9662

Authorized Signature/Telephone No.

Richard W. Lorang, 266-9622

Date

1-11-99

SENATOR JUDITH B. ROBSON
CO-CHAIR
PO BOX 7882
MADISON, WI 53707-7882
(608) 266-2253



REPRESENTATIVE GLENN GROTHMAN
CO-CHAIR
PO BOX 8952
MADISON, WI 53708-8952
(608) 264-8486

**JOINT COMMITTEE FOR
REVIEW OF ADMINISTRATIVE RULES**

Emergency Rule Extension Motion Form

Last Modified March, 1999

Date: May 27, 1999

Location: 417 North; GAR Room; Wisconsin State Capitol; Madison, WI

Moved by Robson, Seconded by Grothman

THAT, pursuant to § 227.24(2)(a), *Wisconsin State Statutes*, the Joint Committee for the Review of Administrative Rules extend the effective period of Emergency Rule **HFS 114** by **42** days, at the request of the Department of Health and Family Services.

COMMITTEE MEMBER	Aye	No	Absent
1. Senator ROBSON	X		
2. Senator GROBSCHMIDT	X		
3. Senator SHIBLISKI			
4. Senator WELCH	X		
5. Senator DARLING			
6. Representative GROTHMAN	X		
7. Representative GUNDERSON			
8. Representative SERATTI	X		
9. Representative KREUSER	X		
10. Representative BLACK	X		
Totals			

Motion Carried

Motion Failed

SENATOR JUDITH B. ROBSON
CO-CHAIR
PO BOX 7882
MADISON, WI 53707-7882
(608) 266-2253



REPRESENTATIVE GLENN GROTHMAN
CO-CHAIR
PO BOX 8952
MADISON, WI 53708-8952
(608) 264-8486

JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

May 27, 1999

Secretary Joe Leean
Department of Health and Family Services
PO Box 7850
1 West Wilson Street
Madison, WI 53707-7850

Dear Secretary Leean:

We are writing to inform you that the Joint Committee for the Review of Administrative Rules (JCRAR) held a public hearing on May 27, 1999. At that meeting, JCRAR received public testimony regarding **Emergency Rule HFS 114**, relating to neonatal intensive care unit training grants.

The Joint Committee for the Review of Administrative Rules met in Executive Session on May 27, 1999 and adopted the following motion:

Carried unanimously by voice vote, pursuant to §227.24(2)(a), *Stats.*, the Joint Committee for Review of Administrative Rules extend the effective date of **HFS 114** by 42 days, at the request of the Department of Health and Family Services.

Ayes: (10) Senators Robson, Grobschmidt, Shibilski, Welch, and Darling; Representatives Grothman, Seratti, Gunderson, Kreuser, and Black

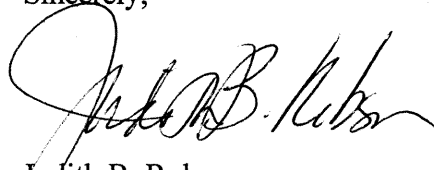
Noes: (0)

Absent: (0)

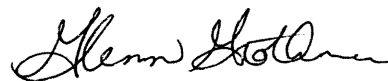
Motion Carried: Extension Granted.
10 Ayes, 0 Noes, 0 Absent.

Pursuant to §227.24(2)(c), *Stats.*, we are notifying the Secretary of State and the Revisor of Statutes of the Committee's action through copies of this letter.

Sincerely,



Judith B. Robson
State Senator
15th Senate District



Glenn Grothman
State Representative
59th Assembly District

JBR:chmiv

cc: Secretary of State La Follette
Revisor of Statutes Gary Poulson