

19-196



State of Wisconsin
Department of Health and Family Services

Tommy G. Thompson, Governor
Joe Leean, Secretary

JUL 08 REC'D

July 2, 1999

The Honorable Judy Robson
Wisconsin State Senate
P.O. Box 7882
Madison, WI 53707-7882

Dear Senator Robson:

Thank you for your letter regarding the Health Insurance Risk Sharing Plan (HIRSP). Responses to your questions are presented below:

- I. Plan 2 Rates: You requested a copy of the actuarial study used to determine Plan 2 rates with an explanation regarding how the rates conform to state law. Your letter referenced s.149.143(1)(b)1.a., which requires that "premiums are set at 150 percent of the rate a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan . . ." I have enclosed a copy of the July 1998 version of HIRSP actuarial analysis. Information regarding Plan 2 premiums can be found on pages 8 and 9.

As you know, HIRSP Plan 2 is available to persons eligible for Medicare. HIRSP Plan 1 is a major medical plan. The "standard risk rate" is established only for Plan 1 based upon an annual survey of insurers offering a comparable plan. According to the HIRSP actuary, Plan 2 does not have a counterpart in the standard risk private market. Medicare supplement policies are not as comprehensive as HIRSP policies. Therefore, Plan 2 premiums continue to be set in relationship to Plan 1 premiums.

Prior to the transfer of HIRSP from the Office of the Commissioner of Insurance (OCI) to the Department of Health and Family Services (DHFS), premiums for Plan 2 policyholders were set by OCI and the HIRSP Board of Governors at 50 percent of Plan 1 Premiums. At that time, there was no mandatory lower or upper limit on premiums. Plan 1 premiums went as high as 198 percent of the "standard risk rate." Plan 2 premiums were maintained at 50 percent of Plan 1 premiums.

The actuary who had worked on HIRSP for the years prior to the transfer informed DHFS staff that, although previous analyses of HIRSP costs showed that Plan 2 claims costs accounted for approximately 66 percent of total HIRSP claims costs, the Board and OCI maintained Plan 2 premiums at 50 percent of Plan 1. The Board recognized that, with Plan 2 premiums set at 50 percent of Plan 1 premiums, Plan 1 policyholders were subsidizing Plan 2 policyholders if Plan 2 claims costs continued to account for such a

large proportion of total HIRSP claims costs. The Board agreed to revisit how Plan 2 premiums were to be established at some future date.

When DHFS began to review data for the premiums that became effective on July 1, 1998, we reviewed the analysis done by the HIRSP actuary along with HIRSP claims costs data. Consistent with previous years, Plan 2 claims costs accounted for roughly 66 percent of total HIRSP claims costs. This information was presented to the Board of Governors, and the Board approved an increase in Plan 2 premiums to more accurately reflect the ratio of Plan 2 costs to total HIRSP costs.

- II. Policyholder Premium Reduction: You inquired about the amount currently on deposit under s. 20.435(5)(gh), stats., HIRSP premium reduction. As you indicate in your letter, we have determined that \$3.8 million in excess HIRSP policyholder premium payments were collected for premiums paid in calendar year (CY) 1998. As required by statute, the Department is making accounting entries that will indicate the \$3.8 million in premium overpayment.

The calculation of excess premium payments was completed in April 1999 when the HIRSP Board of Governors approved a fiscal reconciliation of total HIRSP plan costs for the 1998 CY. At the same time, DHFS and the HIRSP Board of Governors were establishing the HIRSP budget, including policyholder premium levels, that would become effective July 1, 1999. It was determined that, in order to keep premiums at the lowest level permitted by law (150 percent of the standard risk rate), the full \$3.8 million of excess premiums collected in CY 1998 would need to be applied to fiscal year 2000 premiums. Therefore, the \$3.8 million was not transferred to the continuing appropriation, but rather immediately applied to future premiums. Had this adjustment not been made, policyholder premiums would have risen to 163% of standard risk rates.

- III. Administrative and Overall Program Costs: You asked what components led to the \$7 million increase in HIRSP costs from fiscal year 1997 to 1999 and what impact the increased costs has on policyholders. There are a number of factors that contribute to the increased HIRSP costs. These are explained in the paragraphs that follow. You asked if policyholder premiums would increase as a result of the increase in program costs. In general, the answer is yes, since 60 percent of plan costs are to be generated through policyholder premiums, any increase in plan costs would result in higher premiums. However, since DHFS assumed responsibility for administration of HIRSP, HIRSP Plan 1 policyholder premiums have remained at 150 percent of the standard risk rate, the lowest level permitted by law.

As you know, HIRSP offers health insurance to Wisconsin residents who, due to their medical conditions, are unable to find adequate health insurance coverage in the private market, i.e., they are uninsurable. Persons enrolled in HIRSP have greater risk for high medical expenses. It is reasonable to expect that claims costs for a plan like HIRSP would increase over the years.

It is also reasonable for claims in a high-risk plan like HIRSP to experience "spikes" in claims costs. These "spikes" can be caused by a very small number of HIRSP enrollees. In 1997, in fact, just before HIRSP was transferred from OCI to DHFS, the plan ran out of money. Information reviewed at the time suggested that this was due, in part, to an unanticipated spike in claims costs.

This contributed to the growing concern within the Legislature that HIRSP would become insolvent. At that time, the HIRSP Board of Governors approved a \$1.8 million emergency assessment on insurers. HIRSP claims were held for four months until insurer assessments and policyholder premiums generated enough cash to cover the claims being held.

The increase in HIRSP claims costs is due to medical inflation and the morbidity of the HIRSP population. For example, recent actuarial projections for HIRSP assume a 12 percent trend in HIRSP medical costs from the State Fiscal Year (SFY) 99 to SFY 2000. This trend is about 2 percent higher than health insurance industry trends and contributes to higher HIRSP claims payments. The HIRSP budget also includes an adjustment to account for the fact that when enrollment declines, there is likely to be an increase in the morbidity, or illness, of the enrolled population, resulting in higher claims costs. With medical cost inflation and this increase in morbidity, total claims are expected to increase over time.

For the nine-year period from SFY 1989 until the year HIRSP was transferred from OCI to DHFS in SFY 1998, average policyholder premiums increased by 156 percent from \$1,540 to \$3,936. Insurance assessments went from \$3.7 million to \$13 million. Average claims costs per policyholder increased from \$1,700 to almost \$6,000 per year. HIRSP enrollment declined dramatically from a high of 12,707 in 1992 to 7,318 in 1997, the year before HIRSP transferred to DHFS.

Since DHFS assumed responsibility for HIRSP, we have taken several steps to strengthen and stabilize the financial condition of HIRSP. Claims are now being processed in an average of 10 days. Year end 1998 enrollment statistics show no significant decline in enrollment for the first time since 1994. We have held policyholder premiums to the lowest level permitted by law. The Joint Committee on Finance recently unanimously recommended changes to HIRSP, including all components of a legislative agenda developed by the Department to strengthen the HIRSP program even more. (A copy of this legislative agenda is attached for your convenience.)

Your letter also addresses a \$2 million increase in administrative expenses. Additional resources are necessary to effectively manage HIRSP given the fact that the program is much more complex than it was prior to the changes made by the Legislature when the program transferred from OCI to DHFS. The most significant change was in how the plan was funded.

Prior to the transfer to DHFS, HIRSP was a much simpler self-funded insurance program. The plan was administered much like a private insurance plan under OCI's general oversight. HIRSP was funded through a straightforward 60/40 split of policyholder premiums and assessments on insurance companies. When the budgeted funding was not sufficient to fund the plan for the budget year, insurers were assessed to cover the shortfall.

Current HIRSP statutes, which significantly changed HIRSP, both from the prior program and the Governor's proposal, prescribe a complicated and convoluted funding mechanism along with a retrospective reconciliation of plan costs. These statutory provisions have required significant additional resources to construct the HIRSP budget in a manner consistent with state law, develop reports to monitor funding, develop reimbursement rates and payment methodology, and perform the reconciliation. In addition to the costs for the plan administrator, DHFS incurs costs for actuarial services and the annual audit of the plan's financial statements.

The Department has taken a very deliberate approach to controlling administrative expenditures for HIRSP. At the time HIRSP was transferred, we took every possible step to work within the expectation that administrative costs would not be increased significantly. Even though the Legislature had created a much more complex HIRSP for DHFS to administer, the Legislature did not provide any increase in funding levels to administer the new HIRSP. We scrutinized the estimated HIRSP implementation and ongoing costs of the Medicaid fiscal agent budget and negotiated those costs to a level consistent with the costs associated with the previous plan administrator.

We were forced to prioritize implementation tasks, which resulted in delays in completing some aspects of implementation. We made every effort to not increase administrative costs. However, when it became clear that the new HIRSP required additional resources, we acted promptly to provide additional resources to support HIRSP. Currently, even with the additional administrative costs we have approved to support HIRSP, our administrative costs are approximately 8 percent of benefits, less than the 10-15 percent industry average to administer insurance plans. As part of its audit, the Legislative Audit Bureau noted a need for additional resources given the more complex funding structure enacted in 1997 Wisconsin Act 27.

Despite the declining enrollment, HIRSP claims costs are increasing both overall and on a per capita basis. For CY 1997, an average of 7,603 policyholders incurred an average claims expense of \$414.80 per month. For CY 1998, that amount increased to \$430.67 per month for 7,261 policyholders. In the budget for SFY 2000, it is anticipated that 6,921 policyholders will incur an average of \$545.44 in claims expense per month. These figures do not include any administrative costs.

The Honorable Judy Robson
Wisconsin State Senate
July 2, 1999
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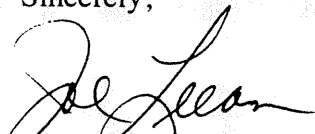
From CY 1998 to SFY 2000, it is estimated that administrative costs for operations will increase \$1.3 million. Again, even with the additional administrative costs we have approved to support HIRSP, our administrative costs are approximately 8 percent of benefits, well below the industry average. Not included in this calculated increase is \$1.1 million in transitional expenses paid in CY 1998.

The claims processing experience has been higher for EDS as well. Statistics show the average monthly volume of claims processed by Blue Cross/Blue Shield for the SFY 1998 was 17,600. For the six-month period July 1998 through December 1998, the average number of claims processed by EDS as the plan administrator has been 22,500 per month.

IV. Subsidy Information: I have enclosed copies of HIRSP monthly reports from July 1998 through March 1999. Although this is more information than you specifically requested, I thought you may find these reports informative. The payment and reconciliation information is presented according to fiscal year on pages 3a and 3b, and according to calendar year on pages 4a and 4b. A summary of the subsidy information you requested is presented on page 6. We have also provided a separate, more detailed report for March 1999 of subsidy information for your review. All of this information is maintained and accessible through a computerized system.

I hope this answers your questions. Please contact me if I may provide further information.

Sincerely,



Joe Llean
Secretary

Enclosures

SENATOR JUDITH B. ROBSON
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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

June 22, 1999

Secretary Joe Leean
Department of Health & Family Services
Room 650, West Wilson Street
INTER-D

Dear Secretary Leean:

Thank you for your letter requesting that I recede from my position regarding your proposal to increase premiums for Plan 2 policyholders. I oppose considering any increase for Plan 2 non-subsidized policyholders until I receive clarification on the basis for increasing these premiums.

At the May 27 hearing of the Joint Committee for Review of Administrative Rules, I questioned whether the base premium for Plan 2 policyholders conformed to statutory requirements. I noted that state law, Section 149.143(1)(b)1.a. requires premiums to be "set at 150% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan..." Yet, Kevin Lewis, in a May 26 memo explained that the rates "were adjusted in this rule to more accurately reflect the cost of Plan 2 policyholders to the HIRSP Plan. An actuarial study was completed that indicated Plan 2 participants incur health claims that are, on average, 67% of the health claims incurred by Plan 1 policyholders."

Your fiscal analyst said he did not have the information in hand to explain how the rates were set, but he would get an answer for me. **Please forward the actuarial study that was used to determine the Plan 2 rates and explain how the rates conform to state law.**

Because the premiums for HIRSP cannot be set at less than 150% of a standard risk rate, premium payments actually may pay more than 60% of HIRSP costs. This excess is supposed to be deposited in the appropriation account under s. 20.435 (5)(gh). Funds can be withdrawn from the account only to offset the need for future rate increases when rates may need to be set at greater than 150% of a standard risk rate in order to cover 60% of HIRSP costs.

We have been told that the Department collected approximately \$3.8 million in such "excess" premium revenue in calendar year 1998. According to s. 149.143 (2), this \$3.8 million should have been deposited in the appropriation account under s. 20.435 (5)(gh) when the Department set the January-June 1999, and the July 1998-June 1999 HIRSP budgets.

Page 2 Leean

Please provide the amount that is currently on deposit under s. 20.435 (5)(gh) as well as a record of the deposit and/or withdrawal transactions that have occurred since the appropriation account was established.

In your letter to the Joint Committee on Audit dated May 27 1999, you indicated that actual HIRSP costs were \$38.3 million in fiscal year 1997, which was the last full fiscal year that HIRSP was administered by the Office of the Commissioner of Insurance. You also projected HIRSP costs to be \$47.3 million in fiscal year 1999, which is the first full fiscal year after the Department assumed responsibility for HIRSP.

HIRSP enrollment declined by about 1,000 people from 1997 to 1999. Yet, we will be spending about \$9 million more in 1999. According to the Audit report, the Department had expected to produce annual cost savings of \$8.7 million using the Medicaid system of administration.

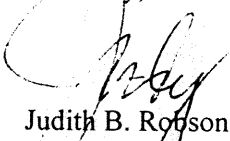
An estimated \$2 million has been identified in increased administrative costs. What are the other components that are leading to the additional \$7 million in increased costs? Will the \$9 million increase result in higher premiums because the policyholders have to pay 60% of program costs?

The HIRSP Board used to receive routine monthly reports from the plan administrator. One report provided demographic information on the subsidy population and the other report was entitled "Subsidy Allocations/General Purpose Revenue Fund Reconciliation." I understand these reports have not been publicly available since July 1998.

Please provide the information used by the plan administrator since July 1998 to determine subsidy eligibility by age, gender, and demography for each of the four income-levels and to document payment and reconciliation of HIRSP premium and deductible subsidies. Is this information maintained and accessible through a computerized or manual system of administration?

Your response to these concerns is appreciated.

Sincerely,



Judith B. Robson
Co-Chair
Joint Committee for Review
of Administrative Rules

JBR:kas

CC: Fiscal Bureau Director Bob Lang
State Auditor Janice Mueller
JCRAR Co-Chair Glenn Grothman
JCRAR Members: Senators Grobschmidt, Shibilski, Welch, and Darling
Representatives Gunderson, Seratti, Kreuser, and Black
Senate Health Committee Chair Rod Moen
Assembly Health Committee Chair Gregg Underheim



State of Wisconsin
Department of Health and Family Services

Tommy G. Thompson, Governor
Joe Leean, Secretary

June 2, 1999

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

Dear Senator Robson:

At the May 27, 1999, meeting of the Joint Committee for Review of Administrative Rules, the committee considered, and then failed to approve in full, the Department's Emergency Rule HFS 119 to extend the current Health Insurance Risk Sharing Plan (HIRSP) emergency rule by 60 days.

The action taken by the committee will exacerbate and compound the administrative complexity involved with running HIRSP. In addition, the action taken by the committee reverses the unanimous informed decision of the HIRSP Board of Governors, and arbitrarily reduces plan II premiums in direct contradiction of an actuarially sound and statutorily defined method for determining policyholder plan costs. If not reversed, the committee's action will add to the existing difficulty in bringing long-term financial solvency to HIRSP for the benefit of all its policyholders.

Specifically, the committee did not approve the portion of the rule relating to increasing HIRSP premiums for Plan II non-subsidized policyholders. This means that from May 31 through June 30, 1999, we are required to revert back to the Plan II premium schedule in effect prior to January 1, 1999. By not approving the 60-day extension, we will need to refund 30 days worth of the premium increase for those who have already paid the premiums through June 30, 1999. It should be noted that the increase in Plan II premiums was recommended by the Department's contracted actuary, and approved by the Board of Governors, in order to bring Plan II premiums up to the level consistent with the cost and claims experience of the Plan II policyholders. This was done within the statutory requirement that policyholder premiums be set no lower than 150 percent of standard market premiums.

We estimate that total premium collections would be reduced by approximately \$9,000 as a result of the Committee's action. However, the additional administrative cost to HIRSP to implement the premium "roll back" effective May 31, 1999 is estimated to be in excess of \$10,000. This amount includes costs for implementing premium file updates, temporary customer service staff to handle questions about changing premium amounts, and preparation, processing and postage for policyholder rate change and premium refund notices. This amount does not include the cost of diverting computer system development staff from other HIRSP related priorities and activities, including computer systems, claims processing, preparation of ad hoc financial and demographic reports. This one-month rebate of premiums which have

The Honorable Judy Robson, Co-Chairperson

June 2, 1999

Page 2

already been remitted by policyholders is administratively costly and creates inequity among policyholders.

We respectfully ask that you reconvene the committee to reconsider the action you have taken on HFS 119.

Sincerely,

A handwritten signature in cursive script, appearing to read "Joe Llean".

Joe Llean

Secretary

cc: Senator Glenn Grothman
Speaker Scott Jensen
Senator Chuck Chvala
Representative Peggy Krusick
Senator Mike Ellis

SENATOR JUDITH B. ROBSON
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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

May 27, 1999

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

Dear Secretary Llean:

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 119**, relating to the operation of the health insurance risk-sharing pool (HIRSP).

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

Carried unanimously, pursuant to §227.24(2)(a), *Stats.*, the Joint Committee for Review of Administrative Rules extend the effective date of **SECTION 2 HFS 119** by **60** 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

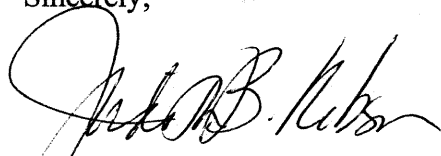
Noes: (0)

Absent: (0)

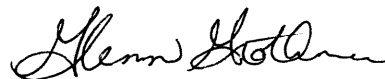
Motion Carried: Extension Granted.
10 Ayes, 0 Noes, 0 Absent.

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

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**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 Grothman, Seconded by Welch

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 119** by **60** days, at the request of the Department of Health and Family Services.

Section 1 by 30 days

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

Motion Carried

Motion Failed

SENATOR JUDITH B. ROBSON
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**JOINT COMMITTEE FOR
 REVIEW OF ADMINISTRATIVE RULES**

Emergency Rule Extension Motion Form

Last Modified May 2000

Date 11/15/00 Location 201 SE
 Moved by Robson, Seconded by Seratti

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 119 by ~~30~~ days, at the request of the Department of Health and Family Services. 34

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

Motion Carried

Motion Failed

* by Polling

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**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 Grobschmidt

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 119 SECTION 2** by **60** 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	X		X
4. Senator WELCH	X		
5. Senator DARLING	X		X
6. Representative GROTHMAN	X		
7. Representative GUNDERSON			X
8. Representative SERATTI	X		
9. Representative KREUSER	X		
10. Representative BLACK	X		
Totals			

Motion Carried

Motion Failed

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**JOINT COMMITTEE FOR
 REVIEW OF ADMINISTRATIVE RULES**

Emergency Rule Extension Motion Form

Last Modified January 1999

Date: January 19, 1999

Location: 201 SE State Capitol

Moved by Grothman, Seconded by Robson

THAT, pursuant to 227.24(2)(a), stats., the Joint Committee for the Review of Administrative Rules extend the effective period of emergency rule HFS 119, Wis. Adm. Code by 5 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	✓		
4. Senator WELCH	✓		
5. Senator DARLING	✓		
6. Representative GROTHMAN	✓		
7. Representative GUNDERSON			✓
8. Representative SERATTI			✓
9. Representative KREUSER	✓		
10. Representative BLACK	✓		
Totals	8	0	2

Motion Carried

Motion Failed

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**JOINT COMMITTEE FOR
 REVIEW OF ADMINISTRATIVE RULES**

Emergency Rule Extension Motion Form

Last Modified March, 1999

Date 11/18/99 Location Room 411 South
 Moved by Robson, Seconded by Grobschmidt

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 119 by 60 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	X		
4. Senator WELCH			X
5. Senator DARLING		X	
6. Representative GROTHMAN	X		
7. Representative GUNDERSON	X		
8. Representative SERATTI			X
9. Representative KREUSER			X
10. Representative BLACK	X		
Totals	6	1	3

*polled by phone
 *polled by paper ballot

Motion Carried

Motion Failed



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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

Emergency Rule Extension Motion Form

January 20, 2000
225 Northwest, State Capitol

Moved by Grothman, Seconded by Gunderson

THAT, pursuant to s. 227.24(2)(a), stats., the Joint Committee for Review of Administrative Rules extend the effective period of emergency rule ~~HFS 119~~ by ~~35 days~~, at the request of the Department of Health and Family Services.

HFS 119 by 35 days
HFS 101-108 60 days
CVRB 1 60 days

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

Motion Carried

Motion Failed

SENATOR JUDITH B. ROBSON
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REPRESENTATIVE GLENN GROTHMAN
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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

November 16, 2000

BY INTER-D

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

Re: Emergency Rule HFS 119


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 November 15, 2000. At that meeting, the JCRAR received public testimony regarding Emergency Rule HFS 119, relating to Health Insurance Risk-Sharing Plan (HIRSP) premium rates.

Based on that testimony, the committee adopted a motion extending the effective period of Emergency Rule HFS 119 for 34 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

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REPRESENTATIVE GLENN GROTHMAN
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JOINT COMMITTEE FOR REVIEW OF ADMINISTRATIVE RULES

November 19, 1999

Mr. Joe Leean
Secretary, Department of Health and Family Services
P.O. Box 7850
Madison, WI 53707-7850

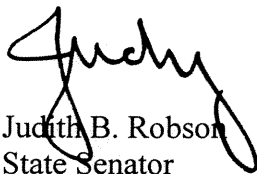
Dear Secretary Leean:

We are writing to inform you that the Joint Committee for the Review of Administrative Rules (JCRAR) held a public hearing and executive session on November 18, 1999. At that meeting, the JCRAR took the following action:

1. The committee voted to extend the effective period of Emergency Rule HFS 119 by 60 days;
2. The committee voted to extend the effective period of Emergency Rule HFS 101 to 103 and 108 by 60 days; and
3. The committee voted to extend the effective period of Emergency Rule HFS 105.39(4)(b)3 by 33 days.

Pursuant to §227.24(2)(c), *Stats.*, we are notifying the Secretary of State and the Revisor of Statutes of the committee's November 18, 1999 action through copies of this letter.

Sincerely,



Judith B. Robson
State Senator
15th Senate District



Glenn Grothman
State Representative
59th Assembly District

JBR:da

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