

State of Misconsin 1999 - 2000 LEGISLATURE

999 - 2000 LEGISLATURE

LRB−0183/**1** ~ TAY:jlg:ijs

Rm

DOA:.....Jablonsky – TB/communicable diseases

FOR 1999-01 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: tuberculosis and other communicable diseases.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

HEALTH

This bill removes from the statutes outdated references to tuberculosis sanitoriums and hospitals. The bill also does all of the following with respect to tuberculosis:

1. Requires that laboratories that perform primary culture for mycobacteria also perform organism identification for mycobacterium tuberculosis and conduct antimicrobial drug susceptibility tests on the mycobacterium tuberculosis bacteria. The results of that test must be reported to the department of health and family services (DHFS).

2. Creates a process by which a person with infectious tuberculosis or with a suspected case of tuberculosis may be confined pending a hearing if the confinement is to be longer than 72 hours.

3. Permits local health departments to request from DHFS certification to establish and maintain a public health dispensary.

For further information see the **state** and **local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1.	20.435	(5) (e) of the	statutes is	amended	to read:
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- 20.435 (5) (e) Disease aids. Biennially, the amounts in the schedule for assisting victims of diseases, as provided in ss. 49.68, 49.683, 49.685, $\frac{58}{96}$, $\frac{252.08}{96}$
- 4 (4) and (5) and 252.10 (6) and (7), as allocated by the department.

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

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

Section 3. 46.18 (1) of the statutes is amended to read:

46.18 (1) TRUSTEES. Every county home, infirmary, hospital, tuberculosis hospital or sanatorium, or similar institution, shall, subject to regulations approved by the county board, be managed by a board of trustees, electors of the county, chosen by ballot by the county board. At its annual meeting, the county board shall appoint an uneven number of trustees, from 3 to 9 at the option of the board, for staggered 3—year terms ending the first Monday in January. Any vacancy shall be filled for the unexpired term by the county board; but the chairperson of the county board may appoint a trustee to fill the vacancy until the county board acts.

SECTION 4. 46.20 (1) of the statutes is amended to read:

46.20 (1) Any 2 or more counties may jointly, by majority vote of all the members of each county board, provide for a county home, infirmary, hospital, tuberculosis hospital or sanatorium, or similar institution, or juvenile detention home, which shall be established, maintained and operated pursuant to all the

statutes relating to the establishment, maintenance and operation of similar
institutions, respectively, by any single county whose population is less than
250,000, except as otherwise provided in this section; and in all respects, except as
herein specified, each such institution shall be the county institution of each of the
counties so joining.
SECTION 5. 46.20 (3) of the statutes is amended to read:
46.20 (3) Upon approval of the site, plans and specifications, as provided in s.
252.073 as to tuberculosis sanatoriums and ss. 46.17 and 301.37, as to other
institutions, the joint committee shall report to the several county boards the
estimated cost of the site and buildings, and the amount thereof chargeable to each
county on the basis set forth in sub. (6) (a), appending to each report a copy of the
plans and specifications and all matter relating to the site and buildings. If the report
is approved by each county board, the joint committee shall purchase the site and
cause the buildings to be erected in accordance with the plans and specifications.
SECTION 6. 46.20 (8) of the statutes is repealed.
SECTION 7. 46.20 (10) of the statutes is repealed.
SECTION 8. 48.60 (2) (d) of the statutes is amended to read:
48.60 (2) (d) A hospital, maternity hospital, maternity home, or nursing home
or tuberculosis sanatorium licensed, approved or supervised by the department;
SECTION 9. 49.015 (1m) 5. of the statutes is created to read:
49.015 (1m) 5. The individual has infectious tuberculosis, as defined in s.
252.07 (1g) (a), or suspect tuberculosis, as defined in s. 252.07 (1g) (d).
SECTION 10. 49.08 of the statutes is amended to read:
49.08 Recovery of relief and other assistance. If any person is the owner
of property at the time of receiving general relief under ch. 49, 1993 stats., relief

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funded by a relief block grant or other assistance as an inmate of any county or municipal institution in which the state is not chargeable with all or a part of the inmate's maintenance or as a tuberculosis patient provided for in ss. 58.06 and 252.07 to 252.10, or at any time thereafter, or if the person becomes self-supporting, the authorities charged with the care of the dependent, or the board in charge of the institution, may sue for the value of the relief or other assistance from the person or the person's estate. Except as otherwise provided in this section, the 10-year statute of limitations may be pleaded in defense in an action to recover relief or other assistance. Where the recipient of relief or other assistance is deceased, a claim may be filed against the decedent's estate and the statute of limitations specified in s. 859.02 shall be exclusively applicable. The court may refuse to render judgment or allow the claim in any case where a parent, spouse, surviving spouse or child is dependent on the property for support. The court in rendering judgment shall take into account the current family budget requirement as fixed by the U.S. department of labor for the community or as fixed by the authorities of the community in charge of public assistance. The records kept by the municipality, county or institution are prima facie evidence of the value of the relief or other assistance furnished. This section shall not apply to any person who receives care for pulmonary tuberculosis as provided in s. 252.08 (4).

SECTION 11. 50.135 (1) of the statutes is amended to read:

50.135 (1) Definition. In this section, "inpatient health care facility" means any hospital, nursing home, county home, county mental hospital, tuberculesis sanatorium or other place licensed or approved by the department under ss. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, and 51.09, 58.06, 252.073 and 252.076, but does not include community—based residential facilities.

1	SECTION 12. 50.39 (2) of the statutes is amended to read:
2	50.39 (2) The use of the title "hospital" to represent or identify any facility
3	which does not meet the definition of a "hospital" as provided herein or is not subject
4	to approval under ss. 50.32 to 50.39 is prohibited, except that institutions governed
5	by ss. <u>s.</u> 51.09 and <u>252.073</u> are exempt.
6	SECTION 13. 50.39 (3) of the statutes is amended to read:
7	50.39 (3) Facilities governed by ss. 45.365, 48.62, 49.70, 49.72, 50.02, 51.09,
8	58.06, 252.073, 252.076 and 252.10, secured correctional facilities as defined in s.
9	938.02 (15m), correctional institutions governed by the department of corrections
10	under s. 301.02 and the offices and clinics of persons licensed to treat the sick under
11	chs. 446, 447 and 448 are exempt from ss. 50.32 to 50.39. Sections 50.32 to 50.39 do
12	not abridge the rights of the medical examining board, physical therapists affiliated
13	credentialing board, podiatrists affiliated credentialing board, dentistry examining
14	board, pharmacy examining board, chiropractic examining board and board of
15	nursing in carrying out their statutory duties and responsibilities.
16	SECTION 14. 58.06 of the statutes is repealed.
17	SECTION 15. 101.123 (1) (b) of the statutes is amended to read:
18	101.123 (1) (b) "Inpatient health care facility" means a county home
19	established under s. 49.70, a county infirmary established under s. 49.72, or a
20	community-based residential facility or a nursing home licensed under s. 50.03 or
21	a tuberculosis sanatorium established under s. 58.06, 252.073 or 252.076.
22	SECTION 16. 102.26 (2m) of the statutes is repealed.
23	SECTION 17. 102.42 (6) of the statutes is amended to read:
24	102.42 (6) TREATMENT REJECTED BY EMPLOYE. Unless the employe shall have
25	elected Christian Science treatment in lieu of medical, surgical, dental, or hospital

SECTION 17

or sanatorium treatment, no compensation shall be payable for the death or disability of an employe, if the death be caused, or insofar as the disability may be aggravated, caused or continued by an unreasonable refusal or neglect to submit to or follow any competent and reasonable medical, surgical or dental treatment or, in the case of tuberculosis, by refusal or neglect to submit to or follow hospital er sanatorium or medical treatment when found by the department to be necessary. The right to compensation accruing during a period of refusal or neglect to submit to or follow hospital or sanatorium or medical treatment when found by the department to be necessary in the case of tuberculosis shall be barred, irrespective of whether disability was aggravated, caused or continued thereby.

SECTION 18. 146.819 (4) (e) of the statutes is repealed.

Section 19. 150.84 (2) of the statutes is amended to read:

150.84 (2) "Health care facility" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

SECTION 20. 155.01 (6) of the statutes is amended to read:

155.01 (6) "Health care facility" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

1	SECTION 21. 252.07 (1) of the statutes is renumbered 252.07 (1m) and amended
2	to read:
3	252.07 (1m) Tuberculosis is a communicable disease caused by mycobacterium
4	tuberculosis and is Infectious tuberculosis and suspect tuberculosis are subject to the
5	reporting requirements specified in s. 252.05. Any laboratory that performs a test
6	receives a specimen for tuberculosis testing shall report all positive results obtained
7	by any appropriate procedure, including a procedure performed by an out-of-state
8	laboratory, to the local health officer and to the department.
9	SECTION 22. 252.07 (1g) of the statutes is created to read:
10	252.07 (1g) In this section:
11	(a) "Infectious tuberculosis" means tuberculosis disease of the respiratory
12	tract, capable of producing infection or disease in others as demonstrated by the
13	presence of acid-fast bacilli in the sputum or bronchial secretions or by chest
14	radiograph and clinical findings.
15	(b) "Isolate" means a population of mycobacterium tuberculosis bacteria that
16	has been obtained in pure culture medium.
17	(c) "Isolation" means the separation from other persons of a person with
18	infectious tuberculosis in a place and under conditions that prevent the transmission
19	of the infection.
20	(d) "Suspect tuberculosis" means an illness marked by symptoms and
21	laboratory tests that may be indicative of tuberculosis, such as a prolonged cough,
22	prolonged fever, hemoptysis, compatible roentgenographic findings or other
23	appropriate medical imaging findings.
24	SECTION 23. 252.07 (1p) of the statutes is created to read:

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252.07 (1p) Any laboratory that performs primary culture for mycobacteria
shall also perform organism identification for mycobacterium tuberculosis complex
using an approved rapid testing procedure specified by the department by rule.
SECTION 24. 252.07 (1t) of the statutes is created to read:
252.07 (1t) Any laboratory that identifies mycobacterium tuberculosis shall
ensure that antimicrobial drug susceptibility tests are performed on the initial
isolate. The laboratory shall report the results of these tests to the local health officer
and the department.
SECTION 25. 252.07 (2) of the statutes is amended to read:
252.07 (2) The department shall identify groups at risk for contracting or
transmitting mycobacterium tuberculosis and shall recommend the protocol for
screening members of those groups. If necessary to prevent or control the
transmission of mycobacterium tuberculosis, the department may promulgate rules
that require screening of members of specific groups that are at risk for contracting
or transmitting mycobacterium tuberculosis.
SECTION 26. 252.07 (4) of the statutes is repealed.
SECTION 27. 252.07 (5) of the statutes is amended to read:
252.07 (5) Upon report of any person under sub. $(1)(1m)$ or $(1t)$, the local health
officer shall at once investigate and make and enforce the necessary orders. If any
person does not voluntarily comply with any order made by the local health officer
with respect to that person, the local health officer or the department may order a
medical evaluation, directly observed therapy or home isolation of that person.
SECTION 28. 252.07 (7) of the statutes is repealed.
SECTION 29. 252.07 (8) of the statutes is created to read:

- 252.07 (8) (a) The department or a local health officer may order the confinement to a facility of an individual who has a confirmed diagnosis of infectious tuberculosis or suspect tuberculosis if all of the following conditions are met:
- 1. The department or local health officer notifies a court in writing of the confinement.
- 2. The department or local health officer provides to the court a written statement from a physician that the individual has infectious tuberculosis or suspect tuberculosis.
- 3. The department or local health officer provides to the court evidence that the individual has refused to follow a prescribed treatment regimen or, in the case of an individual with suspect tuberculosis, has refused to undergo a medical examination to confirm whether the individual has infectious tuberculosis.
- 4. In the case of an individual with a confirmed diagnosis of infectious tuberculosis, the department or local health officer determines that the individual poses an imminent and substantial threat to himself or herself or to the public health. The department or local health officer shall provide to the court a written statement of that determination.
- (b) If the department or local health officer orders the confinement of an individual under this subsection, a law enforcement officer, or other person authorized by the local public health officer, shall transport the individual, if necessary, to a facility that the department or local health officer determines will meet the individual's need for medical evaluation, isolation and treatment.
- (c) No individual may be confined under this subsection for more than 72 hours, excluding Saturdays, Sundays and legal holidays, without a court hearing under sub. (9) to determine whether the confinement should continue.

SECTION 30. 252.07 (9) of the statutes is created to read:

252.07 (9) (a) The department or a local health officer may petition any court for a hearing to determine whether an individual with infectious or suspect tuberculosis should be confined for longer than 72 hours in a facility where proper care and treatment will be provided and spread of the disease will be prevented. The department or local health officer shall include in the petition documentation that demonstrates all of the following:

- 1. That the individual named in the petition has infectious tuberculosis; that the individual has noninfectious tuberculosis but is at high risk of developing infectious tuberculosis; or that the individual has suspect tuberculosis.
- 2. That the individual has failed to comply with the prescribed treatment regimen or with any rules promulgated by the department under sub. (11); or that the disease is resistant to the medication prescribed to the individual.
- 3. That all other reasonable means of achieving voluntary compliance with treatment have been exhausted and no less restrictive alternative exists; or that no other medication to treat the resistant disease is available.
- 4. That the individual poses an imminent and substantial threat to himself or herself or to the public health.
- (b) The department or local health officer shall give the individual written notice of a hearing at least 48 hours before a scheduled hearing is to be held. Notice of the hearing shall include all of the following information:
 - 1. The date, time and place of the hearing.
- 2. The grounds, and underlying facts, upon which confinement of the individual is being sought.
 - 3. An explanation of the individual's rights specified under par. (d).

- 4. The proposed actions to be taken and the reasons for each action.
- (c) If the court orders confinement of an individual under this subsection, the individual shall remain confined until the department or local health officer, with the concurrence of a treating physician, determines that treatment is complete or that the individual is no longer a substantial threat to himself or herself or to the public health. If the individual is to be confined for more than 6 months, the court shall review the confinement every 6 months.
- (d) An individual who is the subject of a petition for a hearing under this subsection has the right to appear at the hearing, the right to present evidence and cross—examine witnesses and the right to be represented by adversary counsel. At the time of the filing of the petition the court shall assure that the individual who is the subject of the petition is represented by adversary counsel. If the individual claims or appears to be indigent, the court shall refer the individual to the authority for indigency determinations specified under s. 977.07(1). If the individual is a child, the court shall refer that child to the state public defender who shall appoint counsel for the child without a determination of indigency, as provided in s. 48.23(4). Unless good cause is shown, a hearing under this subsection may be conducted by telephone or live audiovisual means, if available.
- (e) An order issued by the court under this subsection may be appealed as a matter of right. An appeal shall be heard within 30 days after the appeal is filed. An appeal does not stay the order.

SECTION 31. 252.07 (11) of the statutes is created to read:

252.07 (11) The department may promulgate any rules necessary for the administration and enforcement of this section, including, if necessary to prevent or control the transmission of mycobacterium tuberculosis, rules that require screening

1	of members of specific groups that are at risk for contracting or transmitting
2	mycobacterium tuberculosis.
3	SECTION 32. 252.073 of the statutes is repealed.
4	SECTION 33. 252.076 of the statutes is repealed.
5	SECTION 34. 252.08 (1) of the statutes is repealed.
6	SECTION 35. 252.08 (2) of the statutes is repealed.
7	SECTION 36. 252.08 (3) of the statutes is renumbered 252.07 (10) and amended
8	to read:
9	252.07 (10) Inpatient care for isolated pulmonary tuberculosis patients, and
10	inpatient care exceeding 30 days for other pulmonary tuberculosis patients, who are
11	not eligible for federal medicare benefits, for medical assistance under subch. Ψ \underline{IV}
12	of ch. 49 or for health care services funded by a relief block grant under subch. II of
13	ch. 49 may be reimbursed if provided by a facility contracted by the department. If
14	the patient has private health insurance, the state shall pay the difference between
15	health insurance payments and total charges.
16	SECTION 37. 252.08 (4) of the statutes is repealed.
17	SECTION 38. 252.08 (5) of the statutes is repealed.
18	SECTION 39. 252.08 (6) of the statutes is repealed.
19	SECTION 40. 252.09 of the statutes is repealed.
20	SECTION 41. 252.10 (1) of the statutes is amended to read:
21	252.10 (1) Counties with populations of more than 25,000 may establish and
22	maintain public health dispensaries and, where necessary, branches of the
23	dispensaries A local health department may request from the department
24	certification to establish and maintain a public health dispensary for the diagnosis
25	and treatment of persons suffering from or suspected of having mycobacterium

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tuberculosis or other pulmonary diseases. Two or more counties local health departments may jointly establish, operate and maintain public health dispensaries in order to serve a total population of not less than 25,000. Counties. The department shall certify a local health department to establish and maintain a public health dispensary if the local health department meets the standards established by the department by rule. The department of health and family services may withhold, suspend or revoke a certification if the local health department fails to comply with any rules promulgated by the department. The department shall provide the local health department with reasonable notice of the decision to withhold, suspend or revoke certification. The department shall offer the local health department an opportunity to comply with the rules and an opportunity for a fair hearing. Certified local health departments may contract with each other for public health dispensary The department and department of revenue shall be notified of the establishment of public health dispensaries and any contracts pertaining to the dispensaries. If the provider of those services fails to comply, the department may suspend or revoke the local health department's certification. The department may establish, operate and maintain public health dispensaries and branches in areas of the state where local authorities have not provided public health dispensaries.

SECTION 42. 252.10 (3) of the statutes is repealed.

SECTION 43. 252.10 (5) of the statutes is repealed.

SECTION 44. 252.10 (6) (a) of the statutes is amended to read:

252.10 (6) (a) The state shall credit or reimburse each dispensary on an annual or quarterly basis for the operation of public health dispensaries established and maintained in accordance with this section and rules promulgated by the department.

SECTION 45. 252.10 (6) (b) of the statutes is amended to read:

252.10 (6) (b) The state department shall determine by rule the reimbursement for each visit rate under par. (a) for services as ordered by a physician shall be \$6 or a greater amount prescribed in rules promulgated by the department. If an X-ray is taken, an additional \$6 or any greater amount prescribed in rules promulgated by the department will be credited. Any X-ray taken outside a facility under this section or outside a facility approved under s. 252.08 on individuals who have a significant reaction to a test for mycobacterium tuberculosis shall qualify for state aid in the same manner as an X-ray taken inside a facility, and the X-ray shall take the place of the first X-ray eligible for reimbursement as part of a case finding and preventive program under par. (e). The administration and reading of the test for mycobacterium tuberculosis for diagnostic purposes shall be considered one visit. Tests for mycobacterium tuberculosis given in school programs, employment health programs, community preventive and case finding programs are not reimbursable as a clinic visit.

SECTION 46. 252.10 (6) (c) of the statutes is repealed.

SECTION 47. 252.10 (6) (d) of the statutes is repealed.

SECTION 48. 252.10 (6) (e) of the statutes is repealed.

SECTION 49. 252.10 (6) (f) of the statutes is repealed.

SECTION 50. 252.10 (6) (g) of the statutes is amended to read:

252.10 (6) (g) The reimbursement by the state under pars. (a) to (f) and (b) shall apply only to funds that the department allocates for the reimbursement under the appropriation under s. 20.435 (5) (e).

SECTION 51. 252.10 (7) of the statutes, as affected by 1997 Wisconsin Act 156, is amended to read:

252.10 (7) Drugs necessary for the treatment of mycobacterium tuberculosis shall be purchased by the department from the appropriation under s. 20.435 (5) (e) and dispensed to patients through the public health dispensaries or through health care providers, as defined in s. 146.81 (1), other than massage therapists or bedyworkers issued a license of registration under subch. X of ch. 440, social workers, marriage and family therapists or professional counselors certified under ch. 457, speech—language pathologists or audiologists licensed under subch. II of ch. 459, speech and language pathologists licensed by the department of public instruction or dictitians certified under subch. V of ch. 448, local health departments, physicians or advanced practice nurse prescribers.

SECTION 52. 252.10 (9) of the statutes is amended to read:

252.10 (9) Public health dispensaries shall maintain such records as are required by the department to enable them to carry out their responsibilities designated in this section and in rules promulgated by the department. Records shall be submitted annually to the department as soon as possible after the close of each fiscal year and not later than August 15 following may be audited by the department.

SECTION 53. 252.14 (1) (d) of the statutes is amended to read:

252.14 (1) (d) "Inpatient health care facility" means a hospital, nursing home, community—based residential facility, county home, county mental health complex, tuberculosis sanatorium or other place licensed or approved by the department under ss. s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 and 252.076 or a facility under s. 45.365, 48.62, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

SECTION 54. 255.05 (1) (a) of the statutes is amended to read:

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255.05 (1) (a) "Institution" means any hospital, nursing home, county home,
county mental hospital, tuberculosis sanatorium, community-based residential
facility or other place licensed or approved by the department under ss. s. 49.70,
49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 and 252.076.
SECTION 55. 610.70(1)(e) of the statutes, as created by 1997 Wisconsin Act 231,
is amended to read:
610.70 (1) (e) "Medical care institution" means a facility, as defined in s. 647.01
(4), or any hospital, nursing home, community-based residential facility, county
home, county infirmary, county hospital, county mental health center, tuberculosis
sanatorium, adult family home, assisted living facility, rural medical center, hospice
or other place licensed, certified or approved by the department of health and family
services under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.032, 50.033, 50.034, 50.35,
$50.52, 50.90, 51.04, 51.08, \underline{\text{or}} 51.09, \underline{58.06}, \underline{252.073} \text{ or } \underline{252.076} \text{ or a facility under s.}$
45.365, 51.05, 51.06 or 252.10 or under ch. 233 or licensed or certified by a county
department under s. 50.032 or 50.033.
SECTION 9423. Effective dates; health and family services.
(1) Tuberculosis. The treatment of sections 252.10 (7) and 610.70 (1) (e) of the
statutes take effect on June 1, 1999, or on the day after publication, whichever is

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-0183/2dn TAY;

This draft reconciles LRB-0028 and LRB-0183. The treatment of s. 20.435 (5) (e) has been deleted from this draft and appears in LRB-0028. Both of these drafts should continue to appear in the compiled bill.

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LRB-0183/2dn TAY:jlg:hmh

Tuesday, February 2, 1999

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State of Misconsin 1999 - 2000 LEGISLATURE

LRB-0183/2 TAY:jlg:hmh

DOA:....Jablonsky - TB/communicable diseases FOR 1999-01 BUDGET — NOT READY FOR INTRODUCTION

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HEALTH

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2. Creates a process by which a person with infectious tuberculosis or with a suspected case of tuberculosis may be confined pending a hearing if the confinement is to be longer than 72 hours.

3. Permits local health departments to request from DHFS certification to

establish and maintain a public health dispensary.

For further information see the state and local fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 46.10 (2m) of the statutes is amended to read:

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

Section 2. 46.18 (1) of the statutes is amended to read:

46.18 (1) Trustees. Every county home, infirmary, hospital, tuberculosis hospital or sanatorium, or similar institution, shall, subject to regulations approved by the county board, be managed by a board of trustees, electors of the county, chosen by ballot by the county board. At its annual meeting, the county board shall appoint an uneven number of trustees, from 3 to 9 at the option of the board, for staggered 3—year terms ending the first Monday in January. Any vacancy shall be filled for the unexpired term by the county board; but the chairperson of the county board may appoint a trustee to fill the vacancy until the county board acts.

SECTION 3. 46.20 (1) of the statutes is amended to read:

46.20 (1) Any 2 or more counties may jointly, by majority vote of all the members of each county board, provide for a county home, infirmary, hospital, tuberculosis hospital or sanatorium, or similar institution, or juvenile detention home, which shall be established, maintained and operated pursuant to all the statutes relating to the establishment, maintenance and operation of similar institutions, respectively, by any single county whose population is less than 250,000, except as otherwise provided in this section; and in all respects, except as

1	herein specified, each such institution shall be the county institution of each of the
2	counties so joining.
3	SECTION 4. 46.20 (3) of the statutes is amended to read:
4	46.20 (3) Upon approval of the site, plans and specifications, as provided in s.
5	252.073 as to tuberculosis sanatoriums and ss. 46.17 and 301.37, as to other
6	institutions, the joint committee shall report to the several county boards the
7	estimated cost of the site and buildings, and the amount thereof chargeable to each
8	county on the basis set forth in sub. (6) (a), appending to each report a copy of the
9	plans and specifications and all matter relating to the site and buildings. If the report
10	is approved by each county board, the joint committee shall purchase the site and
11	cause the buildings to be erected in accordance with the plans and specifications.
12	SECTION 5. 46.20 (8) of the statutes is repealed.
13	SECTION 6. 46.20 (10) of the statutes is repealed.
14	SECTION 7. 48.60 (2) (d) of the statutes is amended to read:
15	48.60 (2) (d) A hospital, maternity hospital, maternity home, or nursing home
16	or tuberculosis sanatorium licensed, approved or supervised by the department;
17	SECTION 8. 49.015 (1m) 5. of the statutes is created to read:
18	49.015 (1m) 5. The individual has infectious tuberculosis, as defined in s.
19	252.07 (1g) (a), or suspect tuberculosis, as defined in s. 252.07 (1g) (d).
20	SECTION 9. 49.08 of the statutes is amended to read:
21	49.08 Recovery of relief and other assistance. If any person is the owner
22	of property at the time of receiving general relief under ch. 49, 1993 stats., relief
23	funded by a relief block grant or other assistance as an inmate of any county or
24	municipal institution in which the state is not chargeable with all or a part of the

inmate's maintenance or as a tuberculosis patient provided for in ss. 58.06 and

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252.07 to 252.10, or at any time thereafter, or if the person becomes self-supporting, the authorities charged with the care of the dependent, or the board in charge of the institution, may sue for the value of the relief or other assistance from the person or the person's estate. Except as otherwise provided in this section, the 10-year statute of limitations may be pleaded in defense in an action to recover relief or other assistance. Where the recipient of relief or other assistance is deceased, a claim may be filed against the decedent's estate and the statute of limitations specified in s. 859.02 shall be exclusively applicable. The court may refuse to render judgment or allow the claim in any case where a parent, spouse, surviving spouse or child is dependent on the property for support. The court in rendering judgment shall take into account the current family budget requirement as fixed by the U.S. department of labor for the community or as fixed by the authorities of the community in charge of public assistance. The records kept by the municipality, county or institution are prima facie evidence of the value of the relief or other assistance furnished. This section shall not apply to any person who receives care for pulmonary tuberculosis as provided in s. 252.08(4).

SECTION 10. 50.135 (1) of the statutes is amended to read:

50.135 (1) Definition. In this section, "inpatient health care facility" means any hospital, nursing home, county home, county mental hospital, tuberculosis sanatorium or other place licensed or approved by the department under ss. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, and 51.09, 58.06, 252.073 and 252.076, but does not include community—based residential facilities.

SECTION 11. 50.39 (2) of the statutes is amended to read:

50.39 (2) The use of the title "hospital" to represent or identify any facility which does not meet the definition of a "hospital" as provided herein or is not subject

1	to approval under ss. 50.32 to 50.39 is prohibited, except that institutions governed
2	by ss. <u>s.</u> 51.09 and 252.073 are exempt.
3	Section 12. 50.39 (3) of the statutes is amended to read:
4	50.39 (3) Facilities governed by ss. 45.365, 48.62, 49.70, 49.72, 50.02, 51.09,

50.39 (3) Facilities governed by ss. 45.365, 48.62, 49.70, 49.72, 50.02, 51.09, 58.06, 252.073, 252.076 and 252.10, secured correctional facilities as defined in s. 938.02 (15m), correctional institutions governed by the department of corrections under s. 301.02 and the offices and clinics of persons licensed to treat the sick under chs. 446, 447 and 448 are exempt from ss. 50.32 to 50.39. Sections 50.32 to 50.39 do not abridge the rights of the medical examining board, physical therapists affiliated credentialing board, podiatrists affiliated credentialing board, dentistry examining board, pharmacy examining board, chiropractic examining board and board of nursing in carrying out their statutory duties and responsibilities.

SECTION 13. 58.06 of the statutes is repealed.

SECTION 14. 101.123 (1) (b) of the statutes is amended to read:

101.123 (1) (b) "Inpatient health care facility" means a county home established under s. 49.70, a county infirmary established under s. 49.72, or a community-based residential facility or a nursing home licensed under s. 50.03 or a tuberculosis sanatorium established under s. 58.06, 252.073 or 252.076.

SECTION 15. 102.26 (2m) of the statutes is repealed.

SECTION 16. 102.42 (6) of the statutes is amended to read:

102.42 (6) TREATMENT REJECTED BY EMPLOYE. Unless the employe shall have elected Christian Science treatment in lieu of medical, surgical, dental, or hospital or sanatorium treatment, no compensation shall be payable for the death or disability of an employe, if the death be caused, or insofar as the disability may be aggravated, caused or continued by an unreasonable refusal or neglect to submit to

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or follow any competent and reasonable medical, surgical or dental treatment or, in the case of tuberculosis, by refusal or neglect to submit to or follow hospital or sanatorium or medical treatment when found by the department to be necessary. The right to compensation accruing during a period of refusal or neglect to submit to or follow hospital or sanatorium or medical treatment when found by the department to be necessary in the case of tuberculosis shall be barred, irrespective of whether disability was aggravated, caused or continued thereby.

SECTION 17. 146.819 (4) (e) of the statutes is repealed.

SECTION 18. 150.84 (2) of the statutes is amended to read:

150.84 (2) "Health care facility" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

SECTION 19. 155.01 (6) of the statutes is amended to read:

155.01 (6) "Health care facility" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium or other place licensed or approved by the department under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

SECTION 20. 252.07 (1) of the statutes is renumbered 252.07 (1m) and amended to read:

252.07 (1m) Tuberculosis is a communicable disease caused by mycobacterium
tuberculosis and is Infectious tuberculosis and suspect tuberculosis are subject to the
reporting requirements specified in s. 252.05. Any laboratory that performs a test
receives a specimen for tuberculosis testing shall report all positive results obtained
by any appropriate procedure, including a procedure performed by an out-of-state
laboratory, to the local health officer and to the department.
SECTION 21. 252.07 (1g) of the statutes is created to read:
252.07 (1g) In this section:
(a) "Infectious tuberculosis" means tuberculosis disease of the respiratory
tract, capable of producing infection or disease in others as demonstrated by the
presence of acid-fast bacilli in the sputum or bronchial secretions or by chest
radiograph and clinical findings.
(b) "Isolate" means a population of mycobacterium tuberculosis bacteria that
has been obtained in pure culture medium.
(c) "Isolation" means the separation from other persons of a person with
infectious tuberculosis in a place and under conditions that prevent the transmission
of the infection.
(d) "Suspect tuberculosis" means an illness marked by symptoms and
laboratory tests that may be indicative of tuberculosis, such as a prolonged cough,
prolonged fever, hemoptysis, compatible roentgenographic findings or other
appropriate medical imaging findings.
SECTION 22. 252.07 (1p) of the statutes is created to read:
252.07 (1p) Any laboratory that performs primary culture for mycobacteria
shall also perform organism identification for mycobacterium tuberculosis complex
using an approved rapid testing procedure specified by the department by rule.

1	SECTION 23. 252.07 (1t) of the statutes is created to read:
2	252.07 (1t) Any laboratory that identifies mycobacterium tuberculosis shall
3	ensure that antimicrobial drug susceptibility tests are performed on the initial
4	isolate. The laboratory shall report the results of these tests to the local health officer
5	and the department.
6	SECTION 24. 252.07 (2) of the statutes is amended to read:
7	252.07 (2) The department shall identify groups at risk for contracting or
8	transmitting mycobacterium tuberculosis and shall recommend the protocol for
9	screening members of those groups. If necessary to prevent or control the
10	transmission of mycobacterium tuberculosis, the department may promulgate rules
11	that require screening of members of specific groups that are at risk for contracting
12	or transmitting mycobacterium tuberculosis.
13	SECTION 25. 252.07 (4) of the statutes is repealed.
14	SECTION 26. 252.07 (5) of the statutes is amended to read:
15	252.07 (5) Upon report of any person under sub. $(1)(1m)$ or $(1t)$, the local health
16	officer shall at once investigate and make and enforce the necessary orders. If any
17	person does not voluntarily comply with any order made by the local health officer
18	with respect to that person, the local health officer or the department may order a
19	medical evaluation, directly observed therapy or home isolation of that person.
20	SECTION 27. 252.07 (7) of the statutes is repealed.
21	SECTION 28. 252.07 (8) of the statutes is created to read:
22	252.07 (8) (a) The department or a local health officer may order the
23	confinement to a facility of an individual who has a confirmed diagnosis of infectious
24	tuberculosis or suspect tuberculosis if all of the following conditions are met:

- 1. The department or local health officer notifies a court in writing of the confinement.
 - 2. The department or local health officer provides to the court a written statement from a physician that the individual has infectious tuberculosis or suspect tuberculosis.
 - 3. The department or local health officer provides to the court evidence that the individual has refused to follow a prescribed treatment regimen or, in the case of an individual with suspect tuberculosis, has refused to undergo a medical examination to confirm whether the individual has infectious tuberculosis.
 - 4. In the case of an individual with a confirmed diagnosis of infectious tuberculosis, the department or local health officer determines that the individual poses an imminent and substantial threat to himself or herself or to the public health. The department or local health officer shall provide to the court a written statement of that determination.
 - (b) If the department or local health officer orders the confinement of an individual under this subsection, a law enforcement officer, or other person authorized by the local public health officer, shall transport the individual, if necessary, to a facility that the department or local health officer determines will meet the individual's need for medical evaluation, isolation and treatment.
 - (c) No individual may be confined under this subsection for more than 72 hours, excluding Saturdays, Sundays and legal holidays, without a court hearing under sub. (9) to determine whether the confinement should continue.

Section 29. 252.07 (9) of the statutes is created to read:

252.07 (9) (a) The department or a local health officer may petition any court for a hearing to determine whether an individual with infectious or suspect

tuberculosis should be confined for longer than 72 hours in a facility where proper
care and treatment will be provided and spread of the disease will be prevented. The
department or local health officer shall include in the petition documentation that
demonstrates all of the following:

- 1. That the individual named in the petition has infectious tuberculosis; that the individual has noninfectious tuberculosis but is at high risk of developing infectious tuberculosis; or that the individual has suspect tuberculosis.
- 2. That the individual has failed to comply with the prescribed treatment regimen or with any rules promulgated by the department under sub. (11); or that the disease is resistant to the medication prescribed to the individual.
- 3. That all other reasonable means of achieving voluntary compliance with treatment have been exhausted and no less restrictive alternative exists; or that no other medication to treat the resistant disease is available.
- 4. That the individual poses an imminent and substantial threat to himself or herself or to the public health.
- (b) The department or local health officer shall give the individual written notice of a hearing at least 48 hours before a scheduled hearing is to be held. Notice of the hearing shall include all of the following information:
 - 1. The date, time and place of the hearing.
- 2. The grounds, and underlying facts, upon which confinement of the individual is being sought.
 - 3. An explanation of the individual's rights specified under par. (d).
 - 4. The proposed actions to be taken and the reasons for each action.
- (c) If the court orders confinement of an individual under this subsection, the
 individual shall remain confined until the department or local health officer, with the

- concurrence of a treating physician, determines that treatment is complete or that the individual is no longer a substantial threat to himself or herself or to the public health. If the individual is to be confined for more than 6 months, the court shall review the confinement every 6 months.
- (d) An individual who is the subject of a petition for a hearing under this subsection has the right to appear at the hearing, the right to present evidence and cross—examine witnesses and the right to be represented by adversary counsel. At the time of the filing of the petition the court shall assure that the individual who is the subject of the petition is represented by adversary counsel. If the individual claims or appears to be indigent, the court shall refer the individual to the authority for indigency determinations specified under s. 977.07(1). If the individual is a child, the court shall refer that child to the state public defender who shall appoint counsel for the child without a determination of indigency, as provided in s. 48.23(4). Unless good cause is shown, a hearing under this subsection may be conducted by telephone or live audiovisual means, if available.
- (e) An order issued by the court under this subsection may be appealed as a matter of right. An appeal shall be heard within 30 days after the appeal is filed. An appeal does not stay the order.

SECTION 30. 252.07 (11) of the statutes is created to read:

252.07 (11) The department may promulgate any rules necessary for the administration and enforcement of this section, including, if necessary to prevent or control the transmission of mycobacterium tuberculosis, rules that require screening of members of specific groups that are at risk for contracting or transmitting mycobacterium tuberculosis.

SECTION 31. 252.073 of the statutes is repealed.

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1	SECTION 32. 252.076 of the statutes is repealed.
2	SECTION 33. 252.08 (1) of the statutes is repealed.
3	SECTION 34. 252.08 (2) of the statutes is repealed.
4	SECTION 35. 252.08 (3) of the statutes is renumbered 252.07 (10) and amended
5	to read:
6	252.07 (10) Inpatient care for isolated pulmonary tuberculosis patients, and
7	inpatient care exceeding 30 days for other pulmonary tuberculosis patients, who are
8	not eligible for federal medicare benefits, for medical assistance under subch. V $\overline{ ext{IV}}$
9	of ch. 49 or for health care services funded by a relief block grant under subch. II of
10	ch. 49 may be reimbursed if provided by a facility contracted by the department. If
11	the patient has private health insurance, the state shall pay the difference between
12	health insurance payments and total charges.
13	SECTION 36. 252.08 (4) of the statutes is repealed.
14	SECTION 37. 252.08 (5) of the statutes is repealed.
15	SECTION 38. 252.08 (6) of the statutes is repealed.
16	SECTION 39. 252.09 of the statutes is repealed.
17	SECTION 40. 252.10 (1) of the statutes is amended to read:
18	252.10 (1) Counties with populations of more than 25,000 may establish and
19	maintain public health dispensaries and, where necessary, branches of the
20	dispensaries A local health department may request from the department
21	certification to establish and maintain a public health dispensary for the diagnosis
22	and treatment of persons suffering from or suspected of having mycobacterium
23	tuberculosis or other pulmonary diseases. Two or more counties local health

departments may jointly establish, operate and maintain public health dispensaries

 $in\ order\ to\ serve\ a\ total\ population\ of\ not\ less\ than\ 25,000.\ Counties.\ The\ department$

shall certify a local health department to establish and maintain a public health
dispensary if the local health department meets the standards established by the
department by rule. The department of health and family services may withhold,
suspend or revoke a certification if the local health department fails to comply with
any rules promulgated by the department. The department shall provide the local
health department with reasonable notice of the decision to withhold, suspend or
revoke certification. The department shall offer the local health department an
opportunity to comply with the rules and an opportunity for a fair hearing. Certified
local health departments may contract with each other for public health dispensary
services. The department and department of revenue shall be notified of the
establishment of public health dispensaries and any contracts pertaining to the
dispensaries. If the provider of those services fails to comply, the department may
suspend or revoke the local health department's certification. The department may
establish, operate and maintain public health dispensaries and branches in areas of
the state where local authorities have not provided public health dispensaries.

SECTION 41. 252.10 (3) of the statutes is repealed.

Section 42. 252.10(5) of the statutes is repealed.

SECTION 43. 252.10 (6) (a) of the statutes is amended to read:

252.10 (6) (a) The state shall credit or reimburse each dispensary on an annual or quarterly basis for the operation of public health dispensaries established and maintained in accordance with this section and rules promulgated by the department.

SECTION 44. 252.10 (6) (b) of the statutes is amended to read:

252.10 (6) (b) The state department shall determine by rule the reimbursement for each visit rate under par. (a) for services as ordered by a physician shall be \$6 or

SECTION 50. 252.10 (7) of the statutes, as affected by 1997 Wisconsin Act 156, is amended to read:

appropriation under s. 20.435 (5) (e).

252.10 (7) Drugs necessary for the treatment of mycobacterium tuberculosis shall be purchased by the department from the appropriation under s. 20.435 (5) (e) and dispensed to patients through the public health dispensaries or through health

care providers, as defined in s. 146.81 (1), other than massage therapists or bodyworkers issued a license of registration under subch. X of ch. 440, social workers, marriage and family therapists or professional counselors certified under ch. 457, speech—language pathologists or audiologists licensed under subch. II of ch. 459, speech and language pathologists licensed by the department of public instruction or dietitians certified under subch. V of ch. 448, local health departments, physicians or advanced practice nurse prescribers.

SECTION 51. 252.10 (9) of the statutes is amended to read:

252.10 (9) Public health dispensaries shall maintain such records as are required by the department to enable them to carry out their responsibilities designated in this section and in rules promulgated by the department. Records shall be submitted annually to the department as soon as possible after the close of each fiscal year and not later than August 15 following may be audited by the department.

SECTION 52. 252.14 (1) (d) of the statutes is amended to read:

252.14 (1) (d) "Inpatient health care facility" means a hospital, nursing home, community—based residential facility, county home, county mental health complex, tuberculosis sanatorium or other place licensed or approved by the department under ss. s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 and 252.076 or a facility under s. 45.365, 48.62, 51.05, 51.06, 233.40, 233.41, 233.42 or 252.10.

Section 53. 255.05 (1) (a) of the statutes is amended to read:

255.05 (1) (a) "Institution" means any hospital, nursing home, county home, county mental hospital, tuberculosis sanatorium, community-based residential

is amended to read:

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1	facility or other place licensed or approved by the department under ss. s. 49.70,
2	49.71, 49.72, 50.02, 50.03, 50.35, 51.08, or 51.09, 58.06, 252.073 and 252.076.
3	SECTION 54. $610.70(1)(e)$ of the statutes, as created by 1997 Wisconsin Act 231,

610.70 (1) (e) "Medical care institution" means a facility, as defined in s. 647.01 (4), or any hospital, nursing home, community—based residential facility, county home, county infirmary, county hospital, county mental health center, tuberculosis sanatorium, adult family home, assisted living facility, rural medical center, hospice or other place licensed, certified or approved by the department of health and family services under s. 49.70, 49.71, 49.72, 50.02, 50.03, 50.032, 50.033, 50.034, 50.35, 50.52, 50.90, 51.04, 51.08, or 51.09, 58.06, 252.073 or 252.076 or a facility under s. 45.365, 51.05, 51.06 or 252.10 or under ch. 233 or licensed or certified by a county department under s. 50.032 or 50.033.

SECTION 9423. Effective dates; health and family services.

(1) Tuberculosis. The treatment of sections 252.10(7) and 610.70(1)(e) of the statutes take effect on June 1, 1999, or on the day after publication, whichever is later.

(END)