
Master Analysis

Part 2

the hazardous substance at the time that the local governmental unit acquired the property or who caused the discharge of the hazardous substance unless the person is exempt from the requirement *current law.*

*** ANALYSIS FROM -1420/2 ***

ENVIRONMENT

plain subhead → ~~SOLID AND HAZARDOUS WASTE~~

This bill creates a brownfield site assessment grant program to be administered by the department of natural resources (DNRS). Under this program, cities, villages, towns, counties, redevelopment authorities, community development authorities and housing authorities may apply for a grant to conduct preliminary clean-up activities on brownfield sites. These grants specifically cover the costs of investigating environmental contamination, demolishing structures and removing abandoned containers and asbestos. Applicants who receive a brownfield site assessment grant *under this program* must contribute matching funds equal to 20% of the grant *and are required to pay back the grant if they receive a loan under the land recycling loan program to conduct the clean-up activities.*

(1SK)

*** ANALYSIS FROM -0936/2 ***

ENVIRONMENT

plain subhead → ~~HAZARDOUS SUBSTANCES AND ENVIRONMENTAL CLEANUP~~

(RCT)

Under the land recycling loan program, this state provides loans to cities, villages, towns and counties (political subdivisions) for projects to remedy environmental contamination at sites owned by political subdivisions where the environmental contamination has affected, or threatens to affect, groundwater or surface water. The loans are provided at subsidized interest rates.

The budget bill for each fiscal biennium establishes the present value of the subsidies that may be provided under the land recycling loan program during that fiscal biennium. This bill sets the present value of the land recycling loan program subsidies that may be provided during the 1999-2001 biennium at \$9,400,000.

This bill provides that recipients of loans under the land recycling loan program are not required to pay any interest. This bill makes redevelopment authorities and housing authorities eligible for loans under the program. This bill also provides that a political subdivision may obtain a loan to remedy environmental contamination at a site owned by a redevelopment authority or a housing authority.

*** ANALYSIS FROM -0423/1 ***

ENVIRONMENT

(RCT)

~~HAZARDOUS SUBSTANCES AND ENVIRONMENTAL CLEANUP~~
(the department)

Under current law, the department of commerce regulates tanks that store flammable and combustible liquids. This bill requires the department of commerce to also regulate tanks that store liquids that are considered hazardous substances under the federal Superfund Act. Under current law, the department of commerce collects a \$100 groundwater fee for plan review and approval for tanks that store flammable and combustible liquids and that have a capacity of 1,000 gallons or more. Under this bill, the groundwater fee also applies to plan review of tanks that store liquids that are considered hazardous substances under the federal Superfund Act and that have a capacity of 1,000 gallons or more.

*** ANALYSIS FROM -0975/1 ***

Ret

ENVIRONMENT

WATER QUALITY

Under the clean water fund program, this state provides financial assistance for projects for controlling water pollution, including sewage treatment plants. One form of financial assistance provided under the clean water fund program is a loan at a subsidized interest rate. The budget bill for each fiscal biennium establishes the present value of the subsidies that may be provided under the clean water fund program during that fiscal biennium. This bill sets the present value of the clean water fund program subsidies that may be provided during the 1999-01 biennium at \$87,400,000.

2001

*** ANALYSIS FROM -1740/3 ***

ENVIRONMENT

WATER QUALITY

clean water fund program, the safe drinking water program and the land recycling loan program

move to p. 69

~~Under the clean water fund program, this state provides financial assistance for projects for controlling water pollution, including sewage treatment plants. Under the safe drinking water loan program, this state provides financial assistance to local governmental units for projects for the construction or modification of public water systems. Under the land recycling loan program, this state provides financial assistance to cities, villages, towns and counties (political subdivisions) for projects to remedy environmental contamination at sites owned by political subdivisions where the environmental contamination has affected, or threatens to affect, groundwater or surface water. One form of assistance that these programs provide is a loan at a subsidized interest rate. Another form of assistance is a payment to the board of commissioners of public lands to reduce interest payments on a loan from the board for a project that is eligible for assistance under one of the programs.~~

This bill provides that a payment to the board of commissioners of public lands under the clean water fund program, the safe drinking water loan program or the land recycling loan program may not exceed the amount of subsidy necessary to provide the loan directly under the clean water fund program, the safe drinking water loan program or the land recycling loan program.

*** ANALYSIS FROM -0974/1 ***

ENVIRONMENT

WATER QUALITY

Currently, under the safe drinking water loan program, this state provides loans to local governmental units for projects for the construction or modification of public water systems. The loans are provided at subsidized interest rates. The budget bill for each fiscal biennium establishes the present value of the subsidies that may be provided under the safe drinking water loan program during that fiscal biennium. This bill sets the present value of the safe drinking water loan program subsidies that may be provided during the 1999-01 biennium at \$5,200,000.

*** ANALYSIS FROM -0780/1 ***

2001

Ret

ENVIRONMENT

WATER QUALITY

~~Currently, under the safe drinking water loan program, this state provides loans to local governmental units for projects for the construction or modification of public water systems. Under current law, the state is authorized to contract public debt in an amount not to exceed \$12,130,000 to fund the safe drinking water loan program. This bill increases that amount to an amount not to exceed \$16,000,000.~~

*** ANALYSIS FROM -1552/1 ***

Insert from p 68

ENVIRONMENT

WATER QUALITY

Under current law, the department of natural resources (DNR) in conjunction with the department of agriculture, trade and consumer protection (DATCP), the land and water conservation board (LWCB) and local governmental units, administers a program to provide financial assistance for measures to reduce water pollution from nonpoint (diffuse) sources. Current law authorizes the issuance of general obligation bonds as one source of funding for the financial assistance under the nonpoint source program. This bill increases the bonding authority for the nonpoint source program by \$14,400,000.

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Current law authorizes DNR to provide cost-sharing grants for projects to assist agricultural facilities to comply with nonpoint source water pollution control requirements established by DNR and DATCP. These cost-sharing grants are currently funded with proceeds of general obligation bonds. This bill increases the bonding authority for the cost-sharing grants by \$2,000,000.

*** ANALYSIS FROM -1241/2 ***

ENVIRONMENT

WATER QUALITY

~~Under current law, the department of natural resources (DNR), in conjunction with the department of agriculture, trade and consumer protection (DATCP), the land and water conservation board (LWCB) and local governmental units, administers a program to provide financial assistance for measures to reduce water pollution from nonpoint (diffuse) sources. Under current law, the nonpoint source program is funded with general purpose state revenues, segregated revenues from the environmental fund and proceeds of state bonds. This bill provides funds to be paid to the Oneida Nation under the nonpoint source program from moneys paid to this state under Indian gaming compacts.~~

also

*** ANALYSIS FROM -1242/1 ***

ENVIRONMENT

WATER QUALITY

Under current law, the department of natural resources (DNR), in conjunction with the department of agriculture, trade and consumer protection (DATCP), the land and water conservation board (LWCB) and local governmental units, administers a program to provide financial assistance for measures to reduce water pollution from nonpoint (diffuse) sources. Under current law, the nonpoint source

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Ret

program is funded with general purpose state revenues, segregated revenues from the environmental fund and proceeds of state bonds. This bill provides additional funds for financial assistance under the nonpoint source program from moneys paid to this state under Indian gaming compacts.

*** ANALYSIS FROM -1283/1 ***

ENVIRONMENT

~~WATER QUALITY~~

Under current law, persons who discharge wastewater into the waters of this state are required to pay an annual wastewater discharge fee to the department of natural resources (DNR). DNR is required to structure the fee so that municipalities that are subject to the fee pay 50% of the total charged and other persons that are subject to the fee pay the other 50%. Currently, DNR may not charge total fees that exceed \$7,450,000. This bill changes the cap on the wastewater discharge fee to \$7,925,000.

*** ANALYSIS FROM -1670/P1 ***

ENVIRONMENT

Plain Subhead

~~HAZARDOUS SUBSTANCES AND ENVIRONMENTAL CLEANUP~~

Under current law, the department of natural resources (DNR) and the department of health and family services (DHFS) establish standards for the concentration of contaminants in groundwater. When the groundwater standards are exceeded, action must be taken under this state's groundwater law. This bill authorizes DNR to charge a fee for placing information concerning a property on which a groundwater standard is exceeded into a database.

*** ANALYSIS FROM -0237/2 ***

ENVIRONMENT

AIR QUALITY

Under current law, the owner or operator of a stationary source of air pollution who must obtain an air pollution control permit from the department of natural resources (DNR) is required to pay an annual fee to DNR. The fee is a specified amount per ton of certain air pollutants emitted by the stationary source in the preceding year, except that an owner or operator is generally not required to pay the fee for emissions of any pollutant in excess of 4,000 tons per year.

This bill establishes a new facility fee for stationary sources that emit a total of at least five tons of the pollutants on which the current fee is based. The fee ranges from \$50 to \$20,000, depending on the total amount of those pollutants emitted.

*** ANALYSIS FROM -0235/1 ***

ENVIRONMENT

~~AIR QUALITY~~

Under current law, generally a person may not begin construction of a stationary source of air pollution without a construction permit issued by the department of natural resources (DNR). This bill authorizes DNR to issue general construction permits, each of which may cover numerous similar stationary sources of air pollution.

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*** ANALYSIS FROM -0236/2 ***

ENVIRONMENT

AIR QUALITY

Current law authorizes the department of natural resources (DNR) to establish, by rule, fees for inspecting nonresidential asbestos demolition and renovation projects regulated by DNR. The fees may not exceed \$200 per project. This bill raises the ~~\$200~~ limit on fees for inspecting nonresidential asbestos demolition and renovation projects to \$210.

Under current law, the department of justice (DOJ) generally is responsible for taking actions in court to enforce environmental laws. ~~If a violation of an environmental law is punishable by a forfeiture (a civil monetary penalty), DOJ may start a civil action to collect the forfeiture.~~ This bill authorizes DNR to issue a citation (similar to a traffic ticket) if it determines that a person has violated certain of DNR's rules related to asbestos abatement and management. The bill requires DNR to promulgate rules, which must be approved by DOJ, specifying the violations for which citations may be issued. Under the bill, the same procedures are used for the issuance of a citation and the collection of a forfeiture as are used for hunting and fishing violations.

*** ANALYSIS FROM -1437/2 ***

ENVIRONMENT

PLAIN
SUBHEAD

SOLID AND HAZARDOUS WASTE

(1512)

Under current law, the department of natural resources (DNR) administers a grant program that awards municipalities, counties and other units of government financial assistance to defer the cost of running and maintaining local recycling programs. ~~The grant program currently expires after the year 2000.~~ ^{financial assistance} This bill extends the grant program through the year 2001.

*** ANALYSIS FROM -1438/1 ***

ENVIRONMENT

SOLID AND HAZARDOUS WASTE

Under current law, DNR administers a financial assistance program to assist with costs related to operating recycling programs and for complying with the prohibition on disposing of yard waste in landfills. The amount of a grant under the program is generally the lesser of 66% of eligible net costs or \$8 per person served, except that, if the lesser of those two amounts is less than 33% of the eligible expenses, the amount of the grant is 33% of the eligible expenses.

This bill reduces the maximum amount of a grant that may be awarded under this financial assistance program. Under the bill, the amount of a grant is the greater of 66% of eligible net costs or 33% of the eligible expenses, except that the grant may not exceed \$8 per person. This change effectively sets a maximum grant amount of \$8 per person and makes grants based on 33% of the eligible expenses subject to proration of grants if the sum of grants payable under the program exceeds available funds.

*** ANALYSIS FROM -1425/P1 ***

ENVIRONMENT

RECYCLING

Current law prohibits the disposal of listed recyclable materials in a landfill. The prohibition does not apply to any city, village, town, county or other governmental unit that is responsible for the region's solid waste management (responsible unit) and that operates an effective recycling program. A recycling program is an effective recycling program if it meets specified criteria. In addition to the exception from the disposal prohibition, a responsible unit that administers an effective recycling program is eligible for a state grant to reimburse the responsible unit for some of its costs incurred operating the effective recycling program. The amount of the grants statewide total roughly \$24 million annually.

Beginning in the year 2000, a responsible unit's recycling program is an effective recycling program only if the responsible unit has in place a system of volume-based solid waste fees to generate revenue equal to the responsible unit's costs for solid waste management other than those reimbursed by the state. This criterion does not apply to any responsible unit that separates for recycling at least 25% by volume or by weight of the solid waste collected within the region by the responsible unit or by any person under contract with the responsible unit, or to any responsible unit that provides solid waste to an operating solid waste treatment facility under a contract that was in effect on January 1, 1993.

This bill eliminates the requirement that, to have its recycling program considered an effective recycling program, a responsible unit have in place a system of volume-based solid waste fees to generate revenue equal to the responsible unit's costs for solid waste management other than those reimbursed by the state.

*** ANALYSIS FROM -1427/3 ***

COMMERCE AND ECONOMIC DEVELOPMENT

ECONOMIC DEVELOPMENT

The recycling market development board (board), which is attached to the department of commerce, has various powers and duties related to recycling. ~~Among its powers, the board may award~~ financial and other assistance to improve the marketing of, and to develop markets for, certain materials recovered from solid waste. The board may contract with other persons to accomplish any of its powers and duties ~~and is required to contract with a materials exchange program to operate a statewide materials exchange program until December 31, 1996.~~ Funding for the financial assistance that the board awards comes from the recycling fund and from repayments of loans made by recipients of financial assistance awarded by the board. Funding for the board's contracts comes from the recycling fund.

~~Under current law, the board will be eliminated on June 30, 2001, after which time the department of commerce may promulgate rules for awarding financial assistance for the development of markets for materials recovered from solid waste.~~

~~Under current law, the department of commerce made loans before July 1, 1995, for the production of products from materials recovered from postconsumer waste, for the acquisition of equipment necessary to make such products, for the development and operation of a facility to process materials recovered from a solid~~

various purposes related to recycling

and which will be eliminated on June 30, 2001

including awarding

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Page 72A

PAGE 127
1999-2000 DRAFTING INSERT
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LEGISLATIVE REFERENCE BUREAU

LRB-2130/Plins
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Wof

The bill eliminates the recycling fund as a funding source for the board's contracts and financial assistance and provides that the funding for both come solely from the appropriation account into which are deposited repayments of loans made by recipients of financial assistance awarded by the board.

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instead

~~waste management program and for the expansion, improvement or development of (diaper service) Repayments of those loans are deposited in the recycling fund. The bill provides that, instead of in the recycling fund, the repayments of those loans are to be deposited in the appropriation account into which are deposited repayments of loans made by recipients of financial assistance awarded by the board.~~

~~By adding the bill eliminates the recycling fund as a funding source for the board's contracts and financial assistance. Beginning on July 1, 1999, or on the day after publication of the 1999-2001 biennial budget act, whichever is later, until the board is eliminated on June 30, 2001, funding for the financial assistance that the board awards and for the board's contracts comes solely from the appropriation account into which are deposited repayments of loans made by recipients of financial assistance awarded by the board and repayments of the postconsumer waste-related loans made by the department of commerce before July 1, 1995, which formerly were deposited in the recycling fund.~~

Thus, those repayments will also fund the board's contracts and financial assistance.

ENVIRONMENT

RECYCLING

This bill requires the department of natural resources (DNR) to award grants of \$75,000 on September 1, 1999, and \$50,000 on July 1, 2000, to the Wheelchair Recycling Project for the purpose of refurbishing used wheelchairs and other mobility devices and returning them to use by persons who otherwise would not have access to needed or appropriate equipment. The grants are paid from the appropriation to DNR for waste reduction recycling and demonstration grants.

*** ANALYSIS FROM -1688/P1 ***

Subhead -> Other environment

ENVIRONMENT

HAZARDOUS SUBSTANCES AND ENVIRONMENTAL CLEANUP

* In December 1998, the department of natural resources (DNR) and Winnebago County entered into an agreement under which the county agrees to accept sediments that are dredged from the Fox River and that are contaminated with polychlorinated biphenyls (PCBs) for disposal in the county's landfill.

This bill authorizes DNR to enter into an agreement with Winnebago County under which this state indemnifies the county against any liability or damage resulting from the county's acceptance of PCB-contaminated sediments if the sediments are disposed of in a manner approved by DNR. The bill also authorizes DNR to enter into an agreement with the city of Oshkosh under which this state indemnifies the city against any liability or damage resulting from the city accepting PCB-contaminated leachate from the landfill that contains the PCB-contaminated sediments.

*** ANALYSIS FROM -1418/1 ***

ENVIRONMENT

SOLID AND HAZARDOUS WASTE

Current law provides a process for negotiation and arbitration between a person who wishes to construct or expand a landfill or a hazardous waste facility and a committee representing those affected municipalities and counties that choose to

ECT

participate in the process. An affected municipality or county is one in which a facility is proposed to be located or one whose boundary is within 1,500 feet of the area in which waste would be treated, stored or disposed of. Other municipalities may participate in the negotiation and arbitration process with the agreement of all parties to the process. Under current law, a town, city or village in which all or part of the facility is proposed to be located may appoint four members to a committee or the number of members appointed by the county and other affected municipalities plus two, whichever is greater. Under this bill, a town, city or village in which all or part of a landfill or a hazardous waste facility is proposed to be located may appoint four members to a committee or the number of members appointed by the county, other affected municipalities and any municipalities added by agreement of the parties plus two, whichever is greater.

*** ANALYSIS FROM -0239/1 ***

~~ENVIRONMENT~~

~~OTHER ENVIRONMENT~~

Under current law, ~~the department of natural resources (DNR)~~ may require tests related to programs administered by DNR to be conducted by laboratories certified or registered by DNR or ~~the department of agriculture, trade and consumer protection (DATCP)~~ or certified or registered by another state or a federal agency that recognizes laboratory certification by DNR and that uses standards equivalent to this state's standards.

This bill authorizes DNR to apply to the federal environmental protection agency to be approved to accredit laboratories under a national environmental laboratory accreditation program. If DNR is approved to accredit laboratories under the national program, an accredited laboratory may conduct tests that currently must be conducted by a certified or registered laboratory. If DNR is approved to accredit laboratories under the national program, this state must accept test results from laboratories accredited by other accrediting authorities and other accrediting authorities must accept test results from laboratories accredited by DNR.

*** ANALYSIS FROM -0240/1 ***

~~ENVIRONMENT~~

~~OTHER ENVIRONMENT~~

Under current law, ~~the department of natural resources (DNR)~~, the department of commerce and the board of regents of the University of Wisconsin (UW) System are required to promote hazardous pollution prevention. "Hazardous pollution prevention" means changes in processes or raw materials that reduce or eliminate the use or production of hazardous substances, toxic pollutants and hazardous waste. This bill expands the hazardous pollution prevention responsibilities. The bill requires DNR, the department of commerce and the board of regents of the UW System to promote pollution prevention. "Pollution prevention" means an action that prevents waste from being created, reduces the amount of waste that is created or changes the nature of waste being created in a way that reduces the hazards to public health or the environment posed by the waste.

*** ANALYSIS FROM -0578/2 ***

RCT

LRB-2130/P1
RAC

GAMBLING

Under current law, the ~~basic~~ compensation paid to a retailer who sells ~~lottery tickets or lottery shares~~ ^{lottery tickets} is 5.5% of the retail price of the lottery tickets ~~or lottery shares~~. In addition, under current law, the ~~basic~~ compensation paid to a retailer who sells ~~scratch-off or instant games~~ ^{scratch-off or instant games} is 6.25% of the retail price of scratch-off or instant games. This bill authorizes the department of revenue (DOR) to establish, by rule, a program to provide for additional compensation, ~~above the basic compensation~~, to be paid to retailers who meet certain performance goals. Under this program, the total compensation provided to retailers who meet the performance goals may not exceed 1.0% of gross lottery revenues.

*** ANALYSIS FROM -0924/1 ***

GAMBLING

Under current law, the department of health and family services (DHFS) is authorized to provide grants to ~~one or more~~ individuals or organizations in the private sector to conduct compulsive gambling awareness campaigns. These grants are funded from moneys from the lottery fund, from revenues generated by pari-mutuel wagering and from moneys paid to the state under Indian gaming compacts. This bill provides that the grants must be funded entirely from moneys paid to the state under Indian gaming compacts.

*** ANALYSIS FROM -0030/1 ***

HEALTH AND HUMAN SERVICES

DAK

LONG-TERM CARE ; FAMILY CARE

Current law

Currently, home and community-based long-term care is provided to persons who are elderly, physically or developmentally disabled, chronically mentally ill or chemically dependent ~~and to certain children~~ as a benefit under one or more of several different programs under ~~the department of health and family services (DHFS)~~. These programs are funded by federal, state or, in some instances, county moneys, and each program has individualized eligibility criteria and benefit restrictions. For elderly and disabled persons, these programs include medical assistance (MA), the long-term support community options program (COP), three community integration programs (CIPs) and community aids. MA is a comprehensive jointly funded federal-state health program for persons with low income and few assets. COP provides assessments of functionality and home and community-based care to, among others, elderly and ~~physically~~ disabled persons as an alternative to institutionalized care; one part of COP is funded by state moneys and the other part is funded under a joint federal-state program under a waiver of federal ~~medical assistance~~ laws. Under ~~other joint federal-state program~~ under a waiver of federal ~~medical assistance~~ laws, CIPs provide home and community-based services and continuity of care for persons relocated from institutions, including state centers for the developmentally disabled, and persons who meet requirements for MA reimbursement in nursing homes.

Currently, DHFS is ~~authorized to establish pilot projects under which DHFS contracts with a public or private entity to serve as a clearinghouse of information~~

medicaid

under a pilot project

under a second pilot project,

for individuals who are interested in home or community-based long-term support services or institutional long-term care services and to perform assessments to determine an individual's functional abilities, disabilities, personal preferences and need for home or community-based services or institutional services. DHFS is ~~also~~ authorized to contract with counties or federally recognized American Indian tribes or bands ~~under a pilot project~~ to demonstrate the ability of counties or tribes or bands to manage all long-term care programs under a long-term care management organization.

Currently, nursing homes are prohibited from admitting patients until a physician has completed a plan of care and the patient is assessed under COP or the long-term care pilot project or waives the assessment.

Creation of family care benefit, resource centers and care management organizations

The bill establishes a program of financial assistance for long-term care and support items, termed a "family care benefit", for persons who are eligible and are enrolled in a care management organization. The family care benefit is funded by general purpose revenues appropriated for MA, for COP and for community aids. DHFS must request from the federal secretary of health and human services any waivers of federal medicaid laws necessary to permit use of federal moneys to provide the family care benefit to recipients of MA; however, regardless of whether a waiver is approved, DHFS may implement the family care benefit. Persons are eligible for, but not necessarily entitled to, the family care benefit if they are at least 18 years of age, do not have a primary disabling condition of mental illness, substance abuse or developmental disability and meet functional and financial eligibility criteria. Functional eligibility criteria require functional capacity at either the comprehensive or intermediate level, as specified in the bill, or a condition that is expected to last at least 90 days or result in death within a year for a person who was a resident in a nursing home or was receiving long-term care services funded under COP, one of the CIP programs, the Alzheimer's family caregiver support program, community aids or county funding. ~~In general, financial eligibility criteria conform to the eligibility criteria for MA.~~ A person is entitled to the family care benefit and may enroll in a care management organization if he or she is financially eligible, meets cost-sharing requirements and meets any of several functional eligibility requirements or if he or she has a primary disabling condition of developmental disability and was a resident of a county or member of a tribe or band that operated a care management organization under a pilot project. Divestment prohibitions, prohibitions on treatment of certain trusts, provisions on protection of income and resources of a couple for maintenance of a spouse in the community, and estate recovery provisions, all of which correspond to similar prohibitions and provisions under MA, apply to enrollees, under rules that DHFS must promulgate. A client may contest denial of eligibility, the determination of cost sharing, denial of entitlement, failure to provide timely services and support items in the plan of care, reduction of services or support items, development of an unacceptable plan of care and termination of the family care benefit, by filing a written request for a hearing within

Persons are financially eligible if they are eligible for MA if the cost of their care plan exceeds countable income and assets.

DAK

45 days after receipt of notice of the contested matter. The hearing must be held under procedures that are prescribed by DHFS by rule.

The bill establishes requirements for a resource center, which, among other things, must provide under a contract with DHFS information and referral services, 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 for certain other benefits, including MA. Within six months after the family care benefit is available to all eligible persons in the area of the resource center, the resource center must provide information about its services to all older persons and persons with a physical disability who reside in nursing homes, community-based residential facilities, adult family homes and residential care apartment complexes in the area of the resource center. A resource center must have a governing board that reflects the ethnic and economic diversity of the geographic area served by the resource center, and at least one-fourth of the governing board's members must be older persons or persons with physical or developmental disabilities or their family members, guardians or other advocates.

The bill establishes requirements for a care management organization, which must, under a contract with DHFS that provides payment on a capitated basis, accept enrollment of persons who are entitled to the family care benefit, as well as enrollment of persons who are eligible for the family care benefit and for whom funding is available. Under the contract, the care management organization must, among other things, conduct a comprehensive assessment for each enrollee, develop a comprehensive care plan for the enrollee and provide or contract for the provision of necessary services. DHFS may, by contract, ~~impose~~ ^{require} solvency protections ~~on~~ ^{for} a care management organization, including the requirement that a care management organization ~~must~~ segregate a risk reserve from other funds of the care management organization or its authorizing body and that the care management organization ~~must~~ maintain a risk reserve in an interest-bearing escrow account with a financial institution. A care management organization must have a governing board under requirements that are similar to those for the governing board of a resource center. The bill specifically exempts a care management organization from requirements for licensure as a home health agency.

Under the bill, DHFS must prescribe and implement a per person monthly rate structure for costs of the family care benefit. DHFS also must, among other duties, prescribe by rule and enforce performance standards for operation of resource centers and care management organizations, conduct ongoing evaluations of the system implementing the family care benefit and ensure that external organizations conduct reviews of the quality of management and service delivery of resource centers and care management organizations.

Family care district

The bill authorizes county boards of supervisors to create, on a single county or multicounty basis, special purpose districts that are termed family care districts. Under the bill, a family care district is a local unit of government, separate and distinct from the state and a county, for which the primary purpose is to operate a resource center or a care management organization, but not both. The jurisdiction

DHFS is authorized to promulgate rules relating to implementation of the family care benefit as emergency rules without the

necessity of making a finding of emergency

of the family care district is the county or counties of the county board or boards of supervisors who created the district. The family care district's board is appointed for three-year terms by the county board of supervisors and must consist of 15 persons for a single county and, for a multicounty family care district, an additional member for each county in excess of two. Board members must be residents of the family care district's jurisdiction. At least one-fourth of the members must be representative of the client group or groups whom it is the family care district's primary propose to serve or those clients' family members, guardians or other advocates. No member may be an elected or appointed official or an employe of the county and no member may have a private financial interest in or profit from any contract or other business of the family care district.

The bill authorizes a family care district to carry out ^{either} the provisions of the bill related to the family care benefit, resource centers and care management organizations. In addition, the bill grants to a family care district the powers to adopt and alter an official seal; adopt bylaws and policies and procedures to regulate its affairs; sue and be sued; negotiate and enter into leases and contracts; provide services related to services available under the family care benefit, to older persons and persons with disabilities, in addition to the services funded under the contract to operate a resource center or care management organization; acquire, construct, equip, maintain, improve or manage a resource center or a care management organization, but not both; employ agents, employes or special advisers, fix and regulate their compensation and provide employe benefits; mortgage, pledge or otherwise encumber the family care district's property or funds; buy, sell or lease property and maintain or dispose of it; create a risk reserve or special reserve, including as DHFS requires by contract; accept aid; and make instruments necessary to exercise its powers. In addition, the family care district may invest funds in an interest-bearing escrow account, in time deposits with a maturity of not more than two years and in federal bonds or securities. However, a family care district may neither issue bonds nor levy a tax or assessment.

Under the bill, a family care district must appoint a director, who must manage the family care district's property, business and employes. The family care district must also develop and implement a personnel structure and other employment policies. However, with respect to the hiring of employes who formerly were county employes to perform the same or substantially similar functions that they previously performed, the family care district must do the following:

1. For an employe whose wages, hours and conditions of employment were established in a collective bargaining agreement with the county that is in effect on the date on which the individual commences employment with the district, abide by the terms of the collective bargaining agreement concerning the individual's compensation and benefits until the expiration of that collective bargaining agreement or adoption of a collective bargaining agreement with the district covering the individual as an employe of the district, whichever occurs first.

2. For an employe whose wages, hours and conditions of employment were not established in a collective bargaining agreement with the county that is in effect on the date on which the individual commenced employment with the district, initially

provide that individual the same compensation and benefits that he or she received while employed by the county.

3. Recognize all years of service with the county for any benefit provided or program operated by the district for which an employe's years of service may affect the provision of the benefit or the operation of the program.

4. If the county has not established its own retirement system for county employes, adopt a resolution to be included under the Wisconsin retirement system (WRS).

If the county has established its own retirement system for county employes, the county must do all the following:

1. Provide that family care district employes are eligible to participate in the county retirement system.

2. Provide that family care district employes are eligible to receive health care coverage under any county health insurance plan that is offered to county employes.

3. Provide that family care district employes are eligible to participate in any deferred compensation or other benefit plan offered by the county to county employes, including disability and long-term care insurance coverage and income continuation insurance coverage.

Numerous laws that apply to special purpose districts and local units of government apply to the family care district, including, among others:

1. The members of the family care district governing board and the director of the family care district are subject to the code of ethics for local government officials.

2. The family care district is exempt from the sales and use taxes.

3. The family care district is subject to public employe occupational safety and health laws.

4. The family care district is governed by unemployment compensation laws.

5. The family care district may participate in the local governmental property insurance fund.

6. The family care district is governed by municipal administrative procedures concerning constitutionally protected rights.

7. The family care district is subject to laws restricting employers from testing employes and prospective employes for human immunodeficiency virus (HIV) or an antibody to HIV.

8. The family care district is exempt from treble damages in any suit brought for its operation as a monopoly.

9. Persons attempting to sue the family care district are subject to limitations on actions that may be brought against it and limitations as to the filing of the notice of the injury and recoverable damages.

The bill provides that a family care district:

1. Must adhere to the open records laws, except that the family care district may exchange confidential information about a client, without the client's informed consent, with a county department of social services, human services, developmental disabilities services or community programs or with a resource center or a care management organization, if the county department, resource center or care management organization is in the jurisdiction of the family care district and the

exchange is necessary to enable performance of duties or coordinate service delivery to the client.

2. Must adhere to the open meetings laws.
3. Is subject to auditing by the legislative audit bureau and review of its performance by the joint legislative audit committee.
4. Is an employer for all purposes of the municipal employment relations laws; as such, employes of the district may organize and seek to establish all terms of wages, hours and conditions of employment through collective bargaining.
5. Is subject to prohibitions on public funding for abortions and for abortion-related activities.
6. May participate in the local government pooled-investment fund.
7. May contract with other municipalities and with federally recognized American Indian tribes and bands in this state for the receipt or furnishing of services or the joint exercise of required or authorized powers or duties.
8. Is exempt from local property tax and income tax.
9. Is subject to laws regulating buildings and safety.
10. Is governed by state minimum wage and hour and family and medical leave laws and is subject to worker's compensation laws.
11. May participate in programs of state retirement, health and long-term care benefits, disability benefits and survivor benefits, deferred compensation plans, employe-funded reimbursement accounts and health insurance premium credits and be included as a coverage group under social security.
12. Is an "employer" for the purposes of coverage for group and individual health benefits and for small employer health insurance.
13. Is a "municipality" for the purposes of laws relating to the publication of legal notices.

Under the bill, obligations and debts of a family care district are not the obligations or debts of the county that created the family care district. A family care district may be dissolved by joint action of the family care district board and the county board or boards of supervisors that created the district, subject to performance of its contractual obligations and if first approved by the secretary of health and family services. If the family care district was created by more than one county, the county boards of supervisors must agree on the apportioning of the district's property before dissolution takes place.

Expansion of pilot projects

The bill authorizes DHFS to continue contracting with counties or tribes or bands under the current pilot projects until July 1, 2001. After that date, DHFS may contract with one or more entities certified as meeting requirements for a resource center and for services of an entity as a care management organization. During the first 24 months in which a county has a contract with DHFS under which the county accepts a per person per month payment for each enrollee in the county's care management organization, DHFS may not contract with another organization to operate a care maintenance organization in that county unless the county agrees in writing that at least one additional care management organization is necessary or desirable or the governing body of a tribe or band or the Great Lakes inter-tribal

and cannot develop
 if the county does not have the capacity to serve all county residents who are entitled to the family care benefit in the client group or groups that the county serves

council, inc., elects to operate a care management organization within the area and is certified by DHFS.

Under the bill, a county, a tribe or band, a family care district or an organization may not directly operate both a resource center and a care management organization. If a county board of supervisors and, if applicable, a county executive or county administrator elect to apply to DHFS for a contract to operate a resource center, the county board may create a family care district to apply to DHFS for a contract to operate a care management organization; if the county board and county executive or county administrator elect to apply for a contract to operate a care management organization, the county board may create a family care district to apply for a contract to operate a resource center. If the governing body of a tribe or band elects to apply for a contract to operate a resource center, the tribe or band members may form a separate corporation to apply for a contract to operate a care management organization; if the governing body elects to apply for a contract to operate a care management organization, the tribe or band members may form a separate corporation to apply for a contract to operate a resource center. A county or family care district may apply jointly with a tribe or band or tribal or band corporation for a contract to operate a care management organization or resource center.

The bill authorizes a county department of social services, human services, developmental disabilities services or community programs or an aging unit authorized by the applicable county board of supervisors to apply to DHFS to operate a resource center or a care management organization. The bill also authorizes the secretary of health and family services, in order to facilitate the transition to the family care benefit system, to grant a county limited waivers to certain COP and CIP statutes and rules promulgated under those statutes.

Requirements of care facilities

The bill requires the secretary of health and family services to certify to each county, nursing home, community-based residential facility, adult family home and residential care apartment complex the date on which a resource center that serves the area of the county, home, facility or complex is first available, with respect to specific groups of eligible individuals or for specified facilities, to provide a functional and financial screen. Within a time period prescribed by DHFS by rule, if the certification has taken place, each affected nursing home, community-based residential facility, adult family home and residential care apartment complex must inform prospective residents of the facility about the services of a resource center, the family care benefit and the availability of a functional and financial screen to determine eligibility. Also, these facilities and hospitals must refer to the resource center persons who seek admission and who are aged at least 65 years or have a physical disability unless the person has received a screen for functional eligibility within the previous six months, is entering the facility only for respite care or is an enrollee of a care management organization. Failure to comply with these requirements subjects the facility to an administrative forfeiture. Current prohibitions on the admittance to nursing homes of persons without a COP or other

assessment do not apply to persons for whom the secretary of health and family services has certified that a resource center is available.

Council on long-term care and board on aging and long-term care

The bill creates in DHFS a 15-member council on long-term care that terminates on July 1, 2001. The council must assist DHFS in developing policy related to long-term care issues. The council also must review and make nonbinding recommendations to DHFS concerning the DHFS standard contract provisions for resource centers and care management organizations, the family care benefit and other matters, and must monitor patterns of complaints, persons on waiting lists and patterns of enrollments and disenrollments.

The bill provides for two additional members for the current seven-member board on aging and long-term care and requires that at least five members of the council be aged 65 or older, have physical or developmental disabilities or be family members, guardians or other advocates of the persons. Further, the bill requires the board on aging and long-term care to contract with organizations to provide advocacy services, including negotiation, mediation and assistance in administrative hearings or judicial proceedings, to potential or actual recipients of the family care benefit or their families or guardians.

*** ANALYSIS FROM -0327/1 ***

HEALTH AND HUMAN SERVICES

HEALTH OTHER LONG-TERM CARE

receives, before admission,

The community options program (commonly referred to as COP) and the community integration program (commonly referred to as CIP) are programs administered by counties to provide public funding for long-term care services for individuals in settings other than institutional settings. Under current law, a county may not use COP or CIP funds to provide services to an individual who resides in a community-based residential facility unless, prior to admission to the community-based residential facility, the individual has received an assessment of the individual's functional abilities, disabilities and need for medical and social long-term community support services.

his or her

Current law also requires a community-based residential facility, prior to admitting an individual, to prepare a statement of financial condition for the individual if the individual intends to pay for residence in the facility from private funds. The statement of financial condition must estimate a date, if any, by which the individual's assets and other private funding would be depleted if the individual were to reside continuously in the community-based residential facility. If that date is less than 24 months after the date of the statement of financial condition, the community-based residential facility must provide the statement to the county department of social services.

a person who

person's

he or she

to conduct

This bill allows a county, in accordance with guidelines established by the department of health and family services (DHFS), to waive the requirement that an individual receive a functional assessment prior to admission to the community-based residential facility. In addition, under the bill, if an individual applies for admission to the community-based residential facility on or after the date that this bill becomes law and the individual's statement of financial condition

his or her

However

DAK

pay for certain costs that are associated with the violations, such as resident relocation to another facility and reimbursement for misappropriated property

indicates that, if the individual were to reside in the community-based residential facility, his or her assets and other private funds would be depleted within 12 months, a community-based residential facility is required under the bill to refer him or her to the county department of human services to determine whether an assessment should be conducted.

must

*** ANALYSIS FROM -0033/1 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, the Department of Health and Family Services (DHFS) is required to contribute to the payment of certain costs that are associated with violations of requirements for skilled nursing facilities. DHFS must contribute to the cost of relocating a resident to another nursing facility, if necessary; of reimbursing a resident whose property has been misappropriated; and of maintenance of operations of a nursing facility pending correction of deficiencies or closure of the nursing facility. Currently, these costs are paid from revenues received from the penalty assessment surcharges and interest which are imposed on a person upon whom a forfeiture for violation of the skilled nursing facility requirements has also been imposed.

This bill permits DHFS to use a portion of the penalty assessment surcharge and interest revenues for innovative projects that aim to protect resident health and property.

of residents of skilled nursing facilities

*** ANALYSIS FROM -0317/1 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, the department of health and family services (DHFS) must award a grant to at least one private nonprofit organization to conduct training, provide technical assistance, collect and disseminate information and provide other services with respect to Alzheimer's disease.

This bill requires DHFS to award Alzheimer's disease training and information grants to a private nonprofit organization or to a county, city, town, village, school district, state agency or agency of a county, city, town, village or school district.

*** ANALYSIS FROM -1462/2 ***

HEALTH AND HUMAN SERVICES

PUBLIC ASSISTANCE

Under current law, a county department of human services or social services (county department) or, in a county having a population of 500,000 or more, the department of health and family services (DHFS) must make payments in the amount of \$215 per month to a relative of a child who is providing care and maintenance for the child if certain conditions are met (kinship care and long-term kinship care). Under this bill, a county department or DHFS may make those payments if certain conditions are met. The bill also provides that, notwithstanding fulfillment of the conditions of eligibility for the receipt of kinship care or long-term kinship care payments, a kinship care or long-term kinship care relative who is providing care and maintenance for a child is not entitled to receive those payments.

those phrase

Kinship care or long-term kinship

(Milwaukee County)

INSERT 83-PSK (amend from 01/2/2)

skilled nursing facility violation forfeiture

by DHFS

*** ANALYSIS FROM -1003/4 ***

HEALTH AND HUMAN SERVICES
PUBLIC ASSISTANCE

Under current law, a parent who receives federal supplemental security income (SSI), or a state supplemental payment, receives a monthly supplemental payment of \$100 for each dependent child with whom the parent lives, if certain conditions are met. This bill increases that supplemental payment to \$150 per dependent child.

*** ANALYSIS FROM -1989/3 ***

HEALTH AND HUMAN SERVICES
PUBLIC ASSISTANCE

Current federal law permits states to establish a demonstration project under which certain low-income individuals may establish savings accounts, referred to as individual development accounts. The funds deposited into an individual development account may be used for certain expenses associated with postsecondary education, first home purchases, business capital expenses or medical expenses, to meet necessary living expenses following loss of employment or to make payments necessary to prevent the eviction of the individual from his or her residence or the foreclosure on the mortgage for the principal residence of the individual. An individual may only deposit earned income into the account. For every dollar that the individual deposits into the account, the administering state or local agency or tribal governing body, or a qualified nonprofit agency must deposit at least 50 cents and not more than four dollars. The federal government makes a grant to the matching contributor that equals the lesser of the aggregate amount of funds committed as matching contributions from nonfederal funds or \$1,000,000.

into that account (TAY)

This bill allows the department of workforce development (DWD) to establish the individual development account demonstration project in accordance with the federal law.

*** ANALYSIS FROM -0485/4 ***

HEALTH AND HUMAN SERVICES
PUBLIC ASSISTANCE

Under current law, the department of workforce development (DWD) is required to recover benefit overpayments made under the aid to families with dependent children (AFDC) program and under the Wisconsin works (W-2) program.

(TAY)

This bill permits DWD to recover overpaid AFDC or W-2 benefit amounts from former benefit recipients by issuing a warrant directed to the clerk of circuit court. The clerk of circuit court must enter the name of the person mentioned in the warrant and the amount for which the warrant is issued in the judgment and lien docket. Once entered, the warrant is considered a perfected lien upon the person's right, title and interest in all real and personal property. DWD may then file an execution commanding the sheriff of any county in which property of the person is found to collect and sell sufficient property to pay the amount stated in the warrant.

This bill also allows DWD to collect the overpaid AFDC or W-2 benefits by levy upon any property of the person to whom the benefits were paid (debtor). Under the

bill, a debtor who refuses to surrender the property is subject to enforcement proceedings. A third party who fails to surrender property that is subject to a levy is liable for up to 25% of the amount the debt. The bill sets forth the process for serving the levy and releasing the levy. The bill also exempts certain wages, the first \$1,000 in a bank account and certain other property from a levy. Finally, under the bill, if DWD has levied upon property any person, except the debtor, who claims an interest in or lien on that property and claims that the property was wrongfully levied upon may bring a suit against the state.

*** ANALYSIS FROM -0702/7 ***

~~HEALTH AND HUMAN SERVICES~~
~~PUBLIC ASSISTANCE~~

TAY

Under current law, ~~the department of workforce development~~ (DWD) is directed to allocate certain moneys for various public assistance programs. This bill eliminates the requirement that moneys be allocated for some of the programs and adds new programs to the list of those for which moneys must be allocated, including all of the following:

1. A program to fund efforts to provide an emotionally and intellectually stimulating environment for certain low-income children under the age of five.
2. A literacy program targeted at certain low-income individuals.
3. A competitive grant program to fund programs that improve social, academic and employment skills of certain low-income youth.
4. A program to assist low-income workers maintain their jobs and improve their basic skills.
5. A program to match retirees with youth to provide the youth with workforce mentoring.
6. A program to encourage the positive involvement of fathers in their children's lives.
7. A grant program under which DWD is authorized to award up to \$1,000,000 to counties and private entities to provide community-based alcohol and other drug abuse treatment that is targeted at certain low-income individuals. ~~DWD must coordinate the program with any similar program that the department of health and family services (DHFS) administers.~~

This bill also permits DWD to transfer funds received under the federal temporary assistance for needy families (TANF) block grant program to other agencies for programs that target TANF-eligible persons.

*** ANALYSIS FROM -0493/2 ***

~~HEALTH AND HUMAN SERVICES~~
~~PUBLIC ASSISTANCE~~

Under current law, a county department of social or human services is required to certify eligibility for and issue food coupons to needy households, except that a Wisconsin works (W-2) agency is required, to the extent permitted under federal law or waiver, to certify eligibility for and issue food coupons to eligible participants in the W-2 program.

This bill requires a W-2 agency, to the extent permitted under federal law or waiver, also to certify eligibility for and issue food coupons to: 1) persons who may be required to participate in the food stamp employment and training program; and 2) other persons who are under the age of 61 and who are not disabled.

*** ANALYSIS FROM -1186/4 ***

~~HEALTH AND HUMAN SERVICES~~
~~PUBLIC ASSISTANCE~~

TAY

Under current law, certain federal economic support programs require that a state maintain or increase its average annual expenditures for those programs. This is commonly referred to as a maintenance-of-effort requirement.

This bill allows ~~the department of workforce development~~ {DWD} to expend moneys from its general program operations for economic support programs appropriation account for services to identify maintenance-of-effort funds.

Currently, under the learnfare program, a child between the ages of 6 and 17 who is the dependant child of a recipient of benefits under the Wisconsin works (W-2) program must meet a school attendance requirement to avoid the imposition of certain sanctions. Currently, DWD has the authority to expend moneys for a study of the school attendance requirement under the learnfare program for children who are 6 to 12 years of age. This bill eliminates that authority.

Under current law, DWD was required to award initial contracts to administer W-2 to counties or tribal governing bodies that elected to administer W-2 and that met performance standards under the former aid to families with dependent children program, commonly known as AFDC. This bill modifies the contract provision to direct DWD to award subsequent contracts to W-2 agencies that met the performance standards during the immediately preceding contract period.

This bill also repeals or modifies the language in several of DWD's appropriations and other statutes to eliminate references to programs that are no longer in effect.

*** ANALYSIS FROM -0500/1 ***

~~HEALTH AND HUMAN SERVICES~~
~~PUBLIC ASSISTANCE~~

Under current law, if a recipient of certain public assistance benefits dies and the estate of the deceased recipient is insufficient to pay for the funeral, burial and cemetery expenses, the county or applicable tribal governing body or organization responsible for burial of the recipient must pay the cemetery expenses that are not paid by the deceased recipient's estate (but not more than \$1,000) and must pay the funeral and burial expenses that are not paid by the deceased recipient's estate (but not more than \$1,000). With certain exceptions, the department of workforce development (DWD) is required to reimburse the county, tribal governing body or organization responsible for burial of the deceased recipient only for those expenditures that the county, tribal governing body or organization was required to pay.

Under this bill, a county, tribal governing body or organization responsible for burying the recipient is not required to make a payment for funeral, burial or

cemetery expenses if the request for the payment is made more than 12 months after the recipient died.

*** ANALYSIS FROM -0786/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~

Under current law, ~~the department of workforce development~~ (DWD) administers a work experience program for noncustodial parents (parents who do not live with their children for substantial periods of time), commonly referred to as the "children first" program. A parent who fails to pay court-ordered child support or to meet the child's needs for support because of unemployment or underemployment is required to participate in the children first program, under which the person is provided with certain types of work experience, job training and job search assistance. Currently, DWD may contract with any county to administer the children first program. DWD pays the county \$200 for each person who participates in the program in that county.

This bill permits DWD to contract with a Wisconsin works (W-2) agency or a county to administer the children first program. The bill requires DWD to pay the administering county or W-2 agency \$400 for each person who participates in the children first program in the region in which the county or W-2 agency administers the program.

*** ANALYSIS FROM -1057/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~

This bill provides that some of the moneys received by the state from Indian gaming compacts are to be transferred to the department of health and family services (DHFS) to fund relief block grants to tribal governing bodies.

*** ANALYSIS FROM -1611/6 ***

~~HEALTH AND HUMAN SERVICES~~

WISCONSIN WORKS

Under current law, two Wisconsin works (W-2) agencies in Milwaukee County are permitted to implement a program under which certain participants in community service jobs (wholly subsidized employment) may be paid wages rather than monthly grants. To qualify for a wage-paying community service job, the participant must already be engaged in unsubsidized employment for at least 15 hours per week. Currently, a W-2 agency may not require a person to work in a wage-paying community service job more than the lesser of 15 hours per week or the difference between 40 hours and the number of hours per week that the participant works in unsubsidized employment. If the participant qualifies for the federal earned income tax credit (EITC), current law qualifies the participant for the state EITC as well. Currently, the wage-paying community service job program is scheduled to sunset on October 1, 2001.

This bill eliminates the sunset date for the wage-paying community service job program and expands the program beginning on January 1, 2001, to allow all W-2 agencies to implement it for any individual that the W-2 agency determines is

(74)

capable of working in an unsubsidized job but who, despite reasonable efforts, is unable to secure full-time unsubsidized employment. However, the bill caps the number of slots for the program at 2,500 statewide. Under the bill, a participant in a wage-paying community service job is disqualified from the state EITC with respect to any wages earned under the wage-paying community service job. Additionally, under the bill, the participant need not be engaged in unsubsidized employment to qualify for a wage-paying community service job. Finally, the bill allows a W-2 agency to require a participant in a wage-paying community service job to work in a community service job for not more than 30 hours per week and to participate in job search activities for not more than ten hours per week.

*** ANALYSIS FROM -0787/P1 ***

~~HEALTH AND HUMAN SERVICES~~
~~WISCONSIN WORKS~~

TAY

This bill requires a ~~Wisconsin Works~~ (W-2) agency to assess the educational needs of an individual whom the W-2 agency proposes to place in unsubsidized employment or a trial job (a subsidized work experience). Under the bill, if the W-2 agency determines that the individual needs basic education, such as courses leading to the granting of the equivalent of a high school diploma, and if the individual wishes to pursue the basic education, the W-2 agency must make basic education a part of an employability plan that the W-2 agency develops for the individual. The bill requires the W-2 agency to pay for the basic education services.

*** ANALYSIS FROM -0608/2 ***

~~HEALTH AND HUMAN SERVICES~~
~~WISCONSIN WORKS~~

TAY

Under current law, with certain limited exceptions, a participant in the ~~Wisconsin Works~~ (W-2) program (this state's welfare reform initiative which emphasizes work for benefits) may be required to work in a community service job (CSJ) for not more than 30 hours per week and to participate in education or training activities for not more than ten hours per week. The W-2 agency pays the participant a monthly grant of \$672 minus \$5.15 for each hour of required work or education or training that the participant misses without good cause. If the W-2 agency requires fewer than 30 hours of work per week because the participant has part-time unsubsidized employment, the grant amount may ~~also~~ be reduced by an amount equal to the product of \$5.15 and the difference between 30 and the number of hours that the participant is required to work.

This bill specifies that if a W-2 agency places a person in a CSJ for fewer than 30 hours per week because that person has part-time unsubsidized employment, the W-2 agency may reduce the monthly grant in accordance with a schedule developed by ~~the department of workforce development (DWD)~~ by rule.

*** ANALYSIS FROM -0487/3 ***

~~HEALTH AND HUMAN SERVICES~~
~~WISCONSIN WORKS~~

Under current law, a child care subsidy is available to a parent or guardian of a child who is under the age of 13 if the parent or guardian meets certain income and

TAY

asset limits and needs the child care to participate in certain work-related activities, including employment skills training. If child care is needed in order to participate in employment skills training (which includes English as a second language courses, high school graduation equivalency courses and technical college courses), the parent or guardian must demonstrate that he or she has been employed in an unsubsidized job for at least nine consecutive months or that he or she is a participant in a Wisconsin works (W-2) employment position.

Under this bill, if a person wishes to receive a subsidy for child care that is needed in order to pursue basic education (such as English as a second language courses, high school graduation equivalency courses or literacy tutoring), that person must demonstrate that he or she is employed in unsubsidized employment (without regard to length of employment) or that he or she is a participant in a W-2 employment position. A person who wishes to receive a subsidy for child care that is needed in order for the person to participate in a course of study at a technical college, or to pursue education that provides an employment skill, must demonstrate that he or she has been working in unsubsidized employment for three months (and continues to be so employed) or that he or she is in a W-2 employment position. As under current law, the W-2 agency must determine that the basic, technical or other education would facilitate the person's efforts to obtain employment.

*** ANALYSIS FROM -0700/2 ***

HEALTH AND HUMAN SERVICES

WISCONSIN WORKS

Under current law, a contract to operate as a Wisconsin works (W-2) agency must contain certain requirements of the W-2 agency. One requirement is that the W-2 agency provide, or contract with another person to provide, credit establishment and credit repair assistance to W-2 participants. Currently, the W-2 agency must submit to the secretary of workforce development a plan for the provision of that assistance. The secretary, in turn, must submit that plan to the joint committee on finance (JFC) for review. The plan may not be implemented unless JFC has approved the plan, either explicitly, or through a passive review process under which the cochairpersons of JFC have 14 days in which to notify the secretary that JFC intends to review the plan, or the plan is considered approved. Additionally, under current law, the department of workforce development (DWD) may allocate not more than \$3,000,000 annually for credit assistance to W-2 recipients in the city of Milwaukee.

Under this bill, rather than requiring credit establishment and credit repair services, a W-2 agency contract must require that the W-2 agency provide, or contract with another to provide, budgeting and financial planning services. ~~The bill eliminates review of a W-2 agency's plan to offer such services.~~ The bill ~~also~~ eliminates the allocation for credit establishment and credit repair services offered to W-2 participants in the city of Milwaukee.

*** ANALYSIS FROM -0785/1 ***

TAY

HEALTH AND HUMAN SERVICES

WISCONSIN WORKS

Under the Wisconsin works (W-2) program, a person must work in a W-2 employment position to receive benefits. W-2 employment positions are subsidized work activities that are intended to prepare an individual for unsubsidized employment. Currently, contracts between the department of workforce development (DWD) and W-2 agencies require the W-2 agencies to offer follow-up services for 60 days after a W-2 participant moves from a W-2 employment position into unsubsidized employment.

This bill permits a W-2 agency, following the follow-up period, to offer case management services, including the provision of employment skills training, English as a second language classes and basic education, to an individual who has moved from a W-2 employment position to unsubsidized employment regardless of the individual's income or asset level.

*** ANALYSIS FROM -0699/3 ***

HEALTH AND HUMAN SERVICES

WISCONSIN WORKS

Under current law, to be eligible for a Wisconsin works (W-2) employment position a person's income may not exceed 115% of the federal poverty line. To be eligible for W-2 child care, a person's income, with certain exceptions, may not exceed 165% of the federal poverty line. Currently, in calculating the person's income, a W-2 agency must include child support payments received by the person on behalf of any child who is a member of that person's household.

This bill removes child support payments from the income consideration. The bill also directs the W-2 agency to include in the calculation of income for W-2 child care eligibility net earnings and certain business-related expenses reported to the Internal Revenue Service for farm and self-employment income.

*** ANALYSIS FROM -0266/3 ***

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Under current law, a person is eligible for medical assistance (MA) if the person meets certain income and asset limits and other nonfinancial criteria. Certain people are eligible for MA because of substantial medical needs that consume so much of their income as to qualify them as "low-income". This category of MA recipient is commonly referred to as "medically needy". Other people are eligible for MA by virtue of their receipt of other federal assistance, such as supplemental security income (SSI). This category of people is commonly referred to as "categorically needy".

This bill directs the Department of Health and Family Services (DHFS) to seek federal approval of an amendment to the state MA plan and to request any necessary waivers from the secretary of the federal department of health and human services and from the commissioner of the social security administration to expand MA eligibility to disabled persons who would qualify for SSI but for excess income and assets. Under the bill, a disabled person whose family's income is less than 250% of

purpose of determining the financial responsibility for and W-2 child care

a

TAY

the federal poverty line and whose assets do not exceed \$20,000 is eligible to receive MA if the person pays a monthly premium and a one-time initial premium (purchase plan) established by DHFS. The bill directs DHFS, however, to pay the monthly premium for a person who is eligible for the purchase plan and who is receiving services under the community options program (COP). The bill also authorizes DHFS to pay for that person's one-time entry premium.

OTHER HEALTH AND HUMAN SERVICES

The health insurance risk-sharing plan (HIRSP) under current law, which is administered primarily by DHFS, provides major medical health insurance coverage for persons who are covered under medicare because they are disabled, persons who have tested positive for HIV and persons who have been refused coverage, or coverage at an affordable price, in the private health insurance market because of their mental or physical health condition. Also eligible for coverage are persons (called "eligible individuals") who do not currently have health insurance coverage, but who were covered under certain types of health insurance coverage for at least 18 months in the past. Persons who are eligible for MA are not eligible for HIRSP. The bill requires DHFS to evaluate how to coordinate HIRSP with the plan related to MA coverage that is established in the bill. If necessary, DHFS must develop proposed legislation that coordinates the two programs and that addresses the provision of health care coverage for individuals who are eligible for both HIRSP and the MA coverage plan.

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delete

***** ANALYSIS FROM -1098/3 *****

HEALTH AND HUMAN SERVICES

Plain Sub ~~Public Assistance~~

improper or erroneous

Under current law under the ~~medical assistance~~ (MA) program, the ~~department of health and family services~~ (DHFS) certifies persons or facilities that meet certain criteria as providers and pays for services and items that MA recipients receive from the providers. Currently, DHFS is authorized or required to enforce numerous sanctions, including decertification or suspension from the ~~medical assistance~~ program, against providers who fail to comply with requirements under the MA program or to whom ~~MA~~ payments have been improperly or erroneously made or overpayments have been made. To implement these sanctions, DHFS must provide written notice, a fair hearing and a written decision. Currently, prohibitions exist against fraud in applications for, rights to and conversion of MA benefits or payments. These prohibitions are punishable by fines and imprisonment. Lastly, under current law, if a provider who is liable for repayment of improper or erroneous payments or overpayments sells or otherwise transfers ownership of his or her business, the ~~seller~~ and transferee are each liable for the repayment. The transferee must contact DHFS and ascertain if the ~~seller~~ has an outstanding amount owing. DHFS may bring an action to compel payment against either the ~~seller~~ or transferee if a sale or other transfer occurs and the amount has not ^{been} repaid.

MA

This bill prohibits MA providers from submitting false claims ~~and~~ false statements that accompany the claims for payment of services or items that the provider furnishes under the MA program. The bill permits DHFS to assess forfeitures for violations of the prohibitions and to impose a surcharge on a forfeiture

transferor

that is assessed. Further, the bill establishes notice and hearing requirements for providers to contest assessment of a forfeiture; establishes forfeiture and surcharge payment requirements; and permits the attorney general to bring an action to collect outstanding forfeitures and surcharges.

The bill authorizes DHFS to require certain MA providers, as a condition of certification, to file with DHFS a surety bond, payable to DHFS, under terms and in an amount specified by DHFS by rule, that would reasonably pay the amount of a recovery and DHFS' costs to pursue recovery of overpayments or to investigate and pursue allegations of false claims or statements. Providers who are required to file the surety bonds are those who provide MA services, as specified by DHFS by rule, for which providers have demonstrated significant potential to violate fraud prohibitions, to require recovery of overpayments or to need certain additional sanctions.

The bill authorizes DHFS, if it first makes specified findings, to prescribe MA provider certification criteria that limit the number of providers of particular services or that limit the amount of resources, including employees and equipment, that a certified provider may use to provide MA services and items.

The bill changes numerous provisions relating to procedures for the recovery by DHFS of improper or erroneous MA payments or overpayments, including all of the following:

1. Reasonable notice and hearing opportunity requirements are eliminated and, instead, DHFS must promptly afford an opportunity for a provider to present information and argument, but DHFS may collect the amount to be recovered pending that opportunity.

2. A deadline for payment of recoveries is established and payment of interest on delinquent amounts is required.

The bill eliminates DHFS' general authority to suspend a provider, but instead authorizes DHFS, if certain criteria are met, to suspend certification for a provider pending a hearing on whether the provider must be decertified for violation of federal or state laws. The bill eliminates the right of notice, a fair hearing and a written decision for most sanctions against providers that DHFS may enforce, except for decertification from or restriction of a provider's participation in the MA program.

The bill authorizes DHFS to prescribe conditions of MA participation and reimbursement terms and to impose additional sanctions for noncompliance. The bill requires immediate access, upon request by DHFS, to provider records and specifies that a provider's failure to provide access constitutes grounds for decertification.

The bill changes provisions concerning liability for repayment of improper or erroneous payments or overpayments of a provider who sells or transfers ownership of his or her business. Under the bill, before such a sale or transfer may take place, the provider must notify DHFS of the impending sale and DHFS must inform the provider of the extent of liability, if any. If liability exists, the provider must so inform the prospective ~~buyer or~~ transferee of the extent of the liability and, if done, the liability attaches to both the provider and the ~~buyer or~~ transferee, with the sale or other transfer conditioned upon repayment. If the provider fails to inform the ~~buyer~~ ^{otherwise}

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transferee

~~or other~~ transferee, liability does not attach to the ~~buyer~~. Repayment must be made prior to the sale or transfer and, if not done, the sale or transfer is void.

Lastly, the bill excepts from the definition of a rule actions by DHFS in prescribing conditions of participation and terms of reimbursement for MA providers of services and in establishing guidelines for determining medical necessity and appropriateness for granting prior authorization for MA coverage of services.

*** ANALYSIS FROM -0263/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MEDICAL ASSISTANCE~~

Currently, under ~~the medical assistance program (MA)~~, a person who disposes of assets for less than the fair market value in order to qualify for MA is ineligible for MA for a certain period of time. Current law specifies that a transfer of assets to an irrevocable annuity is a transfer that is below the fair market value if the amount of the transfer exceeds the expected benefit.

This bill specifies that a transfer of an asset to an irrevocable annuity, or by promissory note or similar instrument, is a transfer for the fair market value of the asset only if all of the following are true:

1. The periodic payments back to the transferor include principal and interest that is at least at the prime lending rate at the time that the transfer is made.
2. The terms of the instrument provide for a payment schedule that includes equal payments, unless the payments are tied to the prime lending rate and the inequality is caused exclusively by fluctuations in that rate.

*** ANALYSIS FROM -1295/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MEDICAL ASSISTANCE~~

Under current law, ~~the department of health and family services (DHFS)~~ is directed to recover from the estate of a deceased ~~medical assistance (MA)~~ recipient the amount of MA paid on behalf of the recipient while the recipient was a resident in a nursing home or was an inpatient in a medical institution and the amount of MA paid on behalf of the recipient for certain services received by the recipient after the recipient was over the age of 55. One mechanism for recovery is claim filed against the estate. Another mechanism is a lien placed on the home of a recipient who is nursing home resident and is not expected to return home. Currently, a lien may only be for the amount of MA paid on behalf of the recipient while the recipient resides in a nursing home.

This bill expands the estate recovery program as follows:

1. In addition to obtaining a lien on the home of a nursing home resident who is not expected to return home, the bill directs DHFS to obtain a lien on the home of an inpatient in a hospital who is not expected to return home. The lien, in both cases, is for the amount of MA paid on behalf of that recipient that is generally recoverable, rather than only the amount paid while the recipient was in the nursing home (or hospital).
2. Under the bill, DHFS is directed to recover expenditures for personal care services, which include assistance with meals, dressing, movement, bathing or other

Thus, no rule-making is required to establish standards for these actions

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personal needs or maintenance. ~~Currently, these expenditures are not recovered by the DHFS.~~

Under current law, a court may reduce DHFS's claim in an estate by up to \$3,000 to allow heirs and beneficiaries to retain certain personal property, including up to \$1,000 in tangible personal property that is not used in trade, agriculture or other business.

This bill increases the amount by which a court may reduce DHFS's claim in an estate. Under the bill, a court may reduce the claim by up to \$5,000, including \$3,000 in tangible personal property that is not used in trade, agriculture or other business. ~~These amounts are consistent with the amounts specified in the probate provisions~~

*** ANALYSIS FROM -1756/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MEDICAL ASSISTANCE~~

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Under current law, payments to nursing homes for care provided to recipients of ~~medical assistance (MA)~~ are determined under a prospective payment system that considers specific allowable costs, under standards prescribed by ~~the department of health and family services (DHFS)~~. The standards for payment of allowable direct care costs, support service costs, heating fuel and utility costs and administrative and general costs of a nursing home may not be less than the median for such costs for a sample of all nursing homes. Payment for net property taxes or municipal services are required to be made on a range from actual costs to a maximum limit determined by DHFS. Payment for capital costs of a nursing home must be based on the home's replacement value, subject to DHFS limitations, except that DHFS may not reduce final capital payment by more than \$3.50 per patient day and except that DHFS limitations do not apply to certain nursing homes that have specific high capital costs. DHFS must calculate a payment rate for a nursing home by applying specified standards and the consideration of specified cost centers and allowable costs to information from cost reports for the nursing home's previous fiscal year. In fiscal year 1997-98, nursing homes were required to be paid the lesser of a 5% increase over the amount paid for services provided in fiscal year 1996-97 or \$45,908,500, and in fiscal year 1998-99, nursing homes must be paid the lesser of a 3.5% increase over the amount paid for services provided in fiscal year 1997-98 or \$30,145,200.

This bill eliminates the provisions that require DHFS to increase payment to nursing homes for services provided to MA recipients and to base payment rates for a fiscal year on information from cost reports from the nursing home's previous fiscal year. The bill also eliminates the requirement that the standards for payment by DHFS of allowable costs for direct care, support services, heating fuel and utilities, administration and general services be not less than the median for such costs for a sample of all nursing homes and requires, instead, that the standards take nursing home sampling into account. The bill eliminates the limitation on the amount by which DHFS may reduce final capital costs payment of a nursing home. The bill revises the standard for payment for net property taxes or municipal services to limit the payment to actual previous costs, subject to a maximum determined by DHFS.

is joined based on subrogation because of the provision of medical assistance (MA) benefits, DHFS

*** ANALYSIS FROM -1393/3 ***

HEALTH AND HUMAN SERVICES

~~HEALTH~~ ~~Medical Assistance~~

Under current law, Milwaukee County operates a general assistance medical program funded in part with a general relief block grant.

This bill creates an intergovernmental transfer of funds from Milwaukee County to the state in an amount equal to a portion of Milwaukee County's share of the cost of providing medical services to certain low-income persons. Under the bill, the department of health and family services (DHFS) is required to distribute those funds to health care providers who have contracted with Milwaukee County to provide the health services to those low-income persons. The effect of this structure is to qualify the state for additional medical assistance (MA) moneys from the federal government to be used for supplemental payments to the health care providers.

*** ANALYSIS FROM -0267/P1 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, the department of health and family services (DHFS) administers a statewide immunization program to eliminate mumps, measles, rubella (German measles), diphtheria, pertussis (whooping cough), poliomyelitis and certain other diseases, and to protect against tetanus. The amount that the department is authorized to spend on the statewide immunization program is determined by the amount of funding made available by the federal government for that purpose.

This bill increases the amount that DHFS is authorized to spend for the statewide immunization program in anticipation of increased federal funding for the program.

*** ANALYSIS FROM -0265/1 ***

COURTS AND PROCEDURE

OTHER COURTS AND PROCEDURE

Under current law, the governmental unit that provides certain public assistance benefits as a result of an injury, sickness or death that creates a claim or cause of action on the part of the public assistance recipient or beneficiary or his or her estate against a 3rd party must be joined by the plaintiff as a party to the claim or action. This is known as subrogation and, as a subrogated party, that governmental unit has the right to recover the amount provided in public assistance benefits from the person's claim. The governmental unit may make a claim or maintain an action or intervene in a claim or action by the recipient, beneficiary or estate against the 3rd party.

Currently, a party that is joined based on subrogation may, among other things, agree to have his or her interests represented by the party who caused the joinder. If this option is selected the subrogated party must sign a written waiver of the right to participate in the action. Under this bill, (DHFS) need not take any affirmative action in order to have its interests represented by the party causing the joinder.

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1999 - 2000 LEGISLATURE

LRB-0287/P1

TAY:kmg:lp

DOA:.....Fossum - Managed care for foster children

FOR 1999-01 BUDGET - NOT READY FOR INTRODUCTION

1 AN ACT ...; relating to: the budget.

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Analysis by the Legislative Reference Bureau

~~HEALTH AND HUMAN SERVICES~~

~~MEDICAL ASSISTANCE~~

Under current federal law, with certain exceptions, states are permitted to require an individual who is eligible for medical assistance to enroll in a managed care plan (generally through a health maintenance organization, or HMO) rather than receiving services under the traditional fee-for-service system. Federal law prohibits states from requiring a child who is in foster care to enroll in a managed care plan as a condition of receiving medical assistance.

This bill authorizes the department of health and family services (DHFS) to request a waiver from the secretary of the federal department of health and human services to permit DHFS to require children in foster care to enroll in a managed care plan as a condition of receiving medical assistance. If the waiver is granted and in effect, the bill permits DHFS to implement the waiver.

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:

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Currently, an attorney retained to represent a current or former recipient of public assistance benefits, or the recipient's estate, in asserting a claim that is subrogated, must provide notice of the claim, and of any award or settlement, to the governmental unit that provided the benefits. If an attorney is not representing the current or former recipient of public assistance in asserting a claim that is subrogated, the current or former recipient or his or her guardian must provide the notice. If the recipient is deceased, the personal representative of the recipient's estate, must provide the notice if an attorney is not representing the estate.

This bill requires a person against whom a subrogated claim is made, or that person's attorney or insurance company, to provide notice of the claim, and of any award or settlement, to DHFS if that person, or that person's attorney or insurer, knows or should know that the claim is subrogated because of the provision of MA benefits. Additionally, under this bill, if DHFS or a county is a subrogated party because of the provision of MA benefits, the subrogation creates a lien on the claimant's recovery, equal to the amount of the MA paid as a result of the injury, sickness or death that gave rise to the claim.

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*** ANALYSIS FROM -0261/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MEDICAL ASSISTANCE~~

This bill requires the department of health and family services (DHFS) to request a waiver from the secretary of the federal department of health and human services to permit DHFS to cover clinical evaluation services for certain persons with the human immunodeficiency virus (commonly known as HIV) under the medical assistance program (MA). HIV is the virus that causes acquired immunodeficiency syndrome, or AIDS. The bill limits coverage to \$500 per year per person.

*** ANALYSIS FROM -1060/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~ STET sub-head

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Currently, the department of health and family services (DHFS) must annually submit to the joint committee on finance of the legislature (JCF) a report on nursing home bed utilization by medical assistance (MA) recipients for the previous year. If the report indicates that the utilization has decreased, DHFS must include a proposal to transfer funds from the MA general purpose revenues appropriation account to the community options program appropriation account for expenditure for noninstitutional long-term support services.

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This bill limits the transfer of funds from the MA general purpose revenues appropriation account to the community options program appropriation account to an amount that would not reduce the MA appropriation account balance below the amount necessary to ensure that the appropriation account will end the current fiscal year or the current fiscal biennium with a positive balance. The bill requires that the proposal that DHFS must annually provide to JCF concerning nursing home bed utilization also include a discussion and detailed projection of the likely balances, expenditures, encumbrances and carry over of currently appropriated

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amounts in the MA appropriation accounts of general purpose revenues and federal moneys.

*** ANALYSIS FROM -0315/4 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~

Currently, ^{MA} recipients ~~under the medical assistance MA program~~ may obtain coverage for inpatient hospital services and outpatient services for treatment of alcohol or other drug abuse.

This bill provides an additional MA benefit, until July 1, 2003, of residential treatment services for alcohol and other drug abuse, limited to 45 days of treatment services per treatment episode. The benefit may be provided only in a facility of fewer than 16 beds in a county, city, town or village that elects both to become certified as a provider of the services, or to contract with a certified provider to provide the services, and to pay the amount of the allowable charges for the services under the MA program that is not provided by the federal government.

*** ANALYSIS FROM -1301/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~

Under current law, dental services are provided to ~~medical assistance MA~~ recipients on a fee-for-service basis or under some form of managed care, such as through enrollment by a recipient in a health maintenance organization that provides dental services.

This bill ~~increases the~~ ^{establishes a statutory} rate of payment under the MA program ^{for} dental services providers who provide services on a fee-for-services basis. The bill limits payment in fiscal year 1999-2000 to the lesser of 10% over that paid for dental services in state fiscal year 1998-99 or \$1,225,300. For fiscal year 2000-01, the bill limits payment to the least of 10% over that paid in fiscal year 1999-2000, \$1,504,200 or the percentage of increase over the previous year's payment that equals the percentage of increase in the number of medical assistance recipients receiving dental services on a fee-for-service basis in state fiscal year 2000-01 over the number receiving dental services on a fee-for service basis in state fiscal year 1999-2000. ~~The~~ ^{department of health and family services (DHFS)} must determine this percentage of increase by September 1, 2000. The increase in the rate of payment created by the bill does not include budgeted changes in total payments that may be attributed to changes in recipient utilization of dental services that are provided on a fee-for-service basis.

*** ANALYSIS FROM -0264/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~PUBLIC ASSISTANCE~~

Currently, ⁱⁿ each fiscal year, ~~the department of health and family services (DHFS)~~ ^(DHFS) must distribute up to \$2,256,000 of ~~medical assistance~~ moneys as supplements to rural hospitals that, compared to other rural hospitals, have a high utilization of inpatient services by persons whose care is provided from governmental sources.

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This bill authorizes DHFS ~~also~~ to distribute the supplements of ~~medical assistance~~ moneys to critical access hospitals. The bill defines a "critical access hospital" as a hospital that DHFS determines meets specific federal ~~medical assistance~~ requirements and has specific federal certification.

*** ANALYSIS FROM -0316/1 ***

medicaid

**HEALTH AND HUMAN SERVICES
PUBLIC ASSISTANCE**

Currently, under a waiver of federal medicaid laws, state revenues and federal medicaid moneys provide home or community-based care for persons who are eligible for medical assistance (MA) and who are diagnosed as developmentally disabled. These persons are either relocated into the community from institutions other than a state center for the developmentally disabled, or they meet requirements for MA-reimbursed care in intermediate care facilities for the mentally retarded. The program providing this care is one of several "community integration" programs and is commonly known as "CIP 1B". The department of health and family services (DHFS) is authorized to provide enhanced reimbursement under ~~the~~ CIP ~~1B~~ program for a person who was relocated to the community from an intermediate care facility for the mentally retarded that closes.

This bill additionally authorizes DHFS to provide enhanced reimbursement under ~~the~~ CIP ~~1B~~ program for a person who is relocated to the community from an intermediate care facility for the mentally retarded, or a distinct part thereof, that has a DHFS-approved plan of closure and that intends to close within 12 months.

of the facility

*** ANALYSIS FROM -0277/4 ***

**HEALTH AND HUMAN SERVICES
CHILDREN**

Under current law, ~~the department of health and family services (DHFS)~~ provides grants for various programs relating to youth alcohol and other drug abuse, adolescent pregnancy and other adolescent services. Those programs include a neighborhood drug use and violence prevention program, a community alcohol and other drug abuse prevention program, a drug prevention program for Milwaukee public high school athletes, an adolescent self-sufficiency program, an adolescent pregnancy prevention program, an adolescent resource center in Milwaukee, a minority adolescent parenting skills program in Milwaukee and an adolescent choices project.

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This bill eliminates all of those programs and instead creates a brighter futures initiative under which DHFS distributes grants to public or private organizations operating in Milwaukee County, county departments of human services, social services, community programs or developmental disabilities services operating in counties other than Milwaukee County, and federally recognized American Indian tribes or bands in this state, to provide programs to prevent and reduce the incidence of youth violence and other delinquent behavior, ~~prevent and reduce the incidence of~~ youth alcohol and other drug use and abuse, ~~prevent and reduce the incidence of~~ nonmarital pregnancy, ~~increase the use of abstinence as a method of preventing~~ nonmarital pregnancy, ~~prevent and reduce the incidence of~~ child abuse and neglect

and

to increase the use of abstinence as a method of preventing nonmarital pregnancy

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and (increase adolescent self-sufficiency by encouraging high school graduation, vocational preparedness, improved social and other interpersonal skills and responsible decision making. The bill requires DHFS to provide a set of benchmark indicators to measure the outcomes that are expected of a program funded under the initiative and permits DHFS to renew a grant only if the recipient shows improvement on those indicators.

*** ANALYSIS FROM -0087/3 ***

(County department)

~~HEALTH AND HUMAN SERVICES~~

~~CHILDREN~~

Under current law, an agency that is responsible for investigating reports of suspected or threatened child abuse or neglect (in most cases the county department of human services or social services, but in some cases the department of health and family services (DHFS) or a child welfare agency) must determine, within 60 days after receipt of such a report, whether abuse or neglect has occurred or is likely to occur. Currently, there is no procedure for appealing that determination. This bill permits a person who has been found to have abused or neglected a child to appeal that finding in accordance with procedures established by DHFS.

*** ANALYSIS FROM -0088/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~CHILDREN~~

Under current law, an agency responsible for investigating reports of suspected or threatened child abuse or neglect (usually the county department of human services or social services, but in some cases the department of health and family services (DHFS) or a child welfare agency) must keep its records confidential and may disclose those records only under certain exceptions. This bill permits such an agency, subject to standards established by DHFS, to disclose to the news media and the general public information from the agency's records in cases in which a child died or was placed in serious or critical condition as a result of abuse or neglect.

*** ANALYSIS FROM -0090/4 ***

~~HEALTH AND HUMAN SERVICES~~

~~CHILDREN~~

Under current federal law, each state that receives a grant under the federal Child Abuse Prevention and Treatment Act (CAPTA) must establish not less than three child abuse and neglect citizen review panels to evaluate the extent to which local agencies responsible for providing child protective services are effectively discharging their responsibilities and must ensure that otherwise confidential child abuse and neglect records are made available to those panels. This bill permits a child abuse and neglect citizen review panel established by the department of health and family services (DHFS) or a county department of human services or social services (county department) to have access to the otherwise confidential child abuse and neglect records of an agency responsible for child protection as necessary for the panel to carry out its functions.

*** ANALYSIS FROM -0701/4 ***

HEALTH AND HUMAN SERVICES
CHILDREN

Under current law, a person is eligible for a subsidy for child care for a child who is under the age of 13 if the person meets certain financial and nonfinancial requirements. For example, the person must be a parent or other primary caretaker of the child; the person must initially have a gross income at or below 165% of the federal poverty line; and the person's assets must not exceed \$2,500 in combined equity value.

This bill expands eligibility for a child care subsidy beginning on January 1, 2000. Under the bill, the initial income limit is increased to 185% of the poverty line and the asset limit is eliminated. The bill also expands the subsidy to cover child care for disabled children who are under the age of 19.

*** ANALYSIS FROM -0687/5 ***

HEALTH AND HUMAN SERVICES
CHILDREN

Under current law, ~~the department of workforce development (DWD)~~ is required to award grants for the start-up or expansion of child care services and is required to attempt to award those grants to head start agencies, employers that provide or wish to provide child care services for their employes, family day care centers, group day care centers and day care programs for the children of student parents. A person who is awarded a child care start-up or expansion grant is required to contribute matching funds, either in the form of money or in-kind services or both, equal to 25% of the ~~grant~~ amount awarded and is prohibited from using any grant moneys to purchase or improve land or to purchase, construct or permanently improve, other than minor remodeling, any building or facility. ~~Current law permits DWD to administer this grant program itself or to contract for the administration of this program.~~

This bill requires DWD to award low-interest loans for the start-up or expansion of child care services. Under the bill, the same requirements ~~and permissions~~ that apply to the awarding of child care start-up or expansion grants, other than the matching funds requirement, apply to the awarding of child care start-up or expansion low-interest loans. The bill also requires DWD to attempt to award child care start-up and expansion grants and low-interest loans to organizations that provide child care for sick children and to child care providers that employ participants or former participants in a ~~Wisconsin works (W-2)~~ employment position.

HEALTH AND HUMAN SERVICES
PUBLIC ASSISTANCE

Under current law, the department of workforce development (DWD) receives block grant moneys from the federal government for the state administration of federal block grant programs. This bill requires DWD to transfer certain amounts of those moneys to the department of health and family services (DHFS) for purposes of day care center licensing and for the administration of day care programs for foster parents in Milwaukee County.

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*** ANALYSIS FROM -0492/7 ***

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, if a Wisconsin works (W-2) agency (the agency responsible for administering W-2 in a particular region) determines that a person is eligible for a child care subsidy, the W-2 agency must refer that person to the county department of social services or the county department of human services (county department). The county department determines, in accordance with a schedule developed by the department of workforce development (DWD), the amount of the person's copayment for child care; provides a child care subsidy, either in the form of a voucher or a direct payment to the child care provider; and helps the person identify available and appropriate child care. The county department also sets maximum reimbursement rates for child care providers and certifies certain child care providers. Finally, under current law, a county department is responsible for conducting a background investigation of child care providers prior to certifying them.

This bill permits DWD to require either a county department or a W-2 agency to administer the child care subsidy program, except that in counties with a population of 500,000 or more, DWD must require a W-2 agency to administer the child care subsidy program in that county. Under the bill, whichever entity administers the program is responsible for determining the copayment amount, providing the subsidy, conducting background investigations on and certifying child care providers and identifying available and appropriate child care for subsidy recipients. County departments, however, retain the responsibility for setting maximum reimbursement rates for child care providers.

a tribal governing body

*** ANALYSIS FROM -0393/2 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, the department of health and family services (DHFS) may not license, certify, issue a certificate of approval to or register a person to operate an adult treatment facility, organization or service if DHFS knows that the person has been convicted of or has pending a charge for a serious crime; has been found to have abused or neglected a facility client or misappropriated client money; has abused or neglected a child; or is not sufficiently credentialed to provide adequate client care. An adult treatment facility, organization or service may not hire such a person if the person may have access to clients and may not allow him or her to reside as a nonclient at the facility. The prohibitions do not apply if the person demonstrates to DHFS by clear and convincing evidence and under specific procedures that he or she has been rehabilitated, unless the person has been convicted of certain offenses. DHFS must obtain specific personal background information, including that obtained from criminal history searches, about persons applying to operate facilities, organizations and services; in addition, DHFS must obtain the information every four years for all persons licensed to operate facilities, organizations and services and for nonclient facility residents. Every adult treatment facility, organization or service must obtain the same types of information

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about prospective employes or contractors or persons who seek to reside as nonclients in the facilities and must obtain the information every four years for employes or contractors. DHFS is authorized to charge a fee for the personal background information checks that it must conduct.

This bill authorizes DHFS to charge a fee for the costs of providing personal background information to an adult treatment facility, organization or service about an employe or contractor or prospective employe or contractor of the facility organization or service. Additionally, the bill authorizes DHFS to charge a fee to persons for the costs incurred by DHFS under requests to demonstrate that the persons have been rehabilitated.

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, the department of health and human services (DHFS) may not license a person to operate a foster home, treatment foster home, group home, shelter care facility, child welfare agency or day care center (entity); a county department of human services or social services (county department) or a child welfare agency may not license a person to operate a foster home or treatment foster home; a county department may not certify a person as a day care provider; and a school board may not contract with a person to operate a day care program; if DHFS, the county department, the child welfare agency or the school board knows that the person has been convicted of or has pending a charge for a serious crime, as defined by DHFS by rule; has abused or neglected a client or has misappropriated the property of a client; has abused or neglected a child; or is not sufficiently credentialed to provide adequate care to a client. Current law also prohibits an entity from hiring or contracting with or permitting to reside at the entity as a nonclient such a person if the person is expected to have access to its clients. Current law, however, permits, subject to certain exceptions, such a person to be licensed or certified to operate, to be hired by or contracted with, or to be permitted to reside at, an entity if the person demonstrates to DHFS, the county department, the child welfare agency or the school board that the person has been rehabilitated. Current law requires DHFS, a county department, a child welfare agency or a school board to obtain, with respect to an operator or nonclient resident of an entity, and an entity to obtain, with respect to an employe or contractor of the entity, at the time of initial licensure, certification, hiring, contracting or residence and every four years after that, certain personal background information about the person, including a criminal history search information contained in the client abuse registry maintained by DHFS, information maintained by DHFS regarding substantiated reports of child abuse or neglect and information maintained by the department of regulation and licensing (DORL) regarding the status of the person's credentials. Under current law, DHFS, a county department, a child welfare agency or a school board may charge a fee for obtaining this background information about an operator or nonclient resident of an entity.

This bill permits DHFS, a county department, a child welfare agency or a school board to charge a fee for obtaining this background information about an employe or contractor or prospective employe or contractor of an entity. The bill also permits DHFS, a county department, a child welfare agency or a school board to charge a fee

and from permitting such a person to reside at the entity as a non-client

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to a person for the costs incurred in determining whether the person has been rehabilitated.

***** ANALYSIS FROM 1059/3 *****

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

Under current law, an adult treatment facility, organization or service may not hire certain persons if the person may have access to clients and may not allow the person to reside as a nonclient at the facility. The persons to whom these restrictions apply have been convicted of or have pending a charge for a serious crime; have been found to have abused or neglected a facility client or misappropriated client money; have abused or neglected a child; or are not sufficiently credentialed to provide adequate client care. The prohibitions do not apply if the person demonstrates to the department of health and family services (DHFS) by clear and convincing evidence and under specific procedures that he or she has been rehabilitated, unless the person has been convicted of certain offenses. Each adult treatment facility, organization or service must obtain specific personal background information, including that obtained from criminal history searches, about persons applying to operate facilities, organizations and services and must obtain the information every four years for employees or contractors.

This bill changes the type of interaction with clients that prospective employees or prospective contractors must have in order to require investigation of their backgrounds and to prohibit them from being hired by or contracting with adult treatment facilities, organizations or services. The bill, rather than requiring investigation of a person who has or is expected to have access to the clients of the facility, organization or service, instead requires investigation of a person who provides to the clients or is expected to provide to them, direct care that is more intensive than negligible care in quantity or quality or in the amount of time required to provide the care. Restrictions on nonclient residents at the facility, organization or service are unchanged by the bill.

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, a foster home, treatment foster home, group home, shelter care facility, child welfare agency or day care center (entity) may not hire or contract with a person who will be under the entity's control and who is expected to have access to the entity's clients if the person has been convicted of or has pending a charge for a serious crime, as defined by the department of health and family services (DHFS) by rule, has abused or neglected a client or has misappropriated the property of a client, has abused or neglected a child or is not sufficiently credentialed to provide adequate care to a client. Current law, however, permits, subject to certain exceptions, such a person to be hired or contracted with if the person demonstrates to DHFS that the person has been rehabilitated. Current law requires an entity to obtain, at the time of initial hiring or contracting and every four years after that, certain personal background information, including a criminal history search, about

pages
103 A, B, C

Insert 103

GMM

¶ Under current law, DHFS may not license a person to operate a foster home, treatment foster home, group home, shelter care facility, child welfare agency or day care center; a county department ~~may not~~ or a child welfare agency may not license a person to operate a foster-home or treatment foster home; a county department may not certify a person as a day care provider; and a school board may not contract with a person to operate a day care ^{(entity) or} program ~~if DHFS, the county department, the child welfare agency or the school board~~ the person has been convicted of or has pending a charge for a serious crime, as defined by DHFS by rule; has abused or neglected a client or a child; ~~as~~ has misappropriated client property; or is not sufficiently credentialed to provide adequate client care. In addition, an entity may not hire or contract with such a person if the person is expected to have access to its clients.

GMM

Insert 103

and may not permit such a person to ~~to~~ reside at the entity as a nonclient. Such a person may, however, subject to certain exceptions, demonstrate that he or she has been rehabilitated. At time of initial licensure, certification, hiring, contracting or residence and every four years after that, DHS, a county department, a child welfare agency ^{or a} ~~or a~~ school board must obtain, with respect to an operator or nonclient resident of an entity, and an entity must obtain, with respect to an employee or contractor who ^{has or} is expected to have access to its clients, certain personal background information, including information obtained from a criminal history search. DHS, a county department, a child welfare agency or a school board may charge a fee for obtaining this background information about an operator or nonclient resident of an entity.

Insert 10-3

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¶ This bill changes the type of interaction with clients that ~~all~~ ^{prospective} employees or contractors must have to require a background investigation ^{of them} and to prohibit them from being hired by or ^{contracting} ~~contracting~~ with ^{an} ~~an~~ entity. The bill, rather than requiring an investigation of an employee or contractor who has or is expected to have access to a client, instead requires an investigation of an employee or contractor who ^{or is expected} ~~provides~~ ~~to~~ ~~clients~~ ~~or~~ ~~who is expected~~ or is expected to provide to clients ~~care~~ direct care that is more intensive than negligible in quantity or quality or in the amount of time required to provide the care. The bill also permits DHFS, a ^{law}-²agency, a county department, a child welfare agency or a school board to charge a fee for the cost of providing background information to an entity about an employee or contractor and to charge a fee ^{charge} to persons ^a for the ^{cost} cost of determining whether the person has been rehabilitated.

Cost of it

~~an employe, prospective employe, contractor or prospective contractor who has, or is expected to have access to the entity's clients.~~

This bill, rather than requiring an entity to conduct a background investigation of a person who has, or is expected to have access to the entity's clients, instead requires an entity to conduct a background investigation of a person who provides to clients, or is expected to provide to them, direct care that is more intensive than negligible care in quantity or quality or in the amount of time required to provide the care.

*** ANALYSIS FROM -0085/4 ***

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, a foster home may provide care and maintenance for no more than four children or, if all of the children are siblings, for more than four children. This bill permits a foster home to provide care and maintenance for no more than four children or, if necessary to enable a sibling group to remain together, for no more than six children or, if the department of health and family services (DHFS) promulgates rules permitting a different number of children, for the number of children permitted under those rules.

*** ANALYSIS FROM -0086/3 ***

CORRECTIONAL SYSTEM

JUVENILE CORRECTIONAL SYSTEM

~~Under current law, subject to certain exceptions, the department of corrections (DOC), a county department of human services or social services or a licensed child welfare agency (collectively "agency") may not make available for inspection or disclose the contents of any record kept or information received about an individual in the care or legal custody of the agency except by order of the court assigned to exercise jurisdiction under the juvenile justice code (juvenile court). Current law, however, is silent as to the confidentiality of records kept and information received relating to a foster parent, treatment foster parent or family-operated group home parent (substitute care parent). This bill prohibits an agency from making available for inspection or disclosing the contents of any record kept or information received relating to a substitute care parent or a family member of a substitute care parent without first receiving the written permission of the substitute care parent, except by order of the juvenile court. The bill, however, does not apply to the confidential exchange of information between an agency and another social welfare agency. The bill also does not prohibit an agency from disclosing to the juvenile's parent, guardian or legal custodian the name and address of the substitute care parent or from including the location of the juvenile's placement in the juvenile's permanency plan.~~

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, subject to certain exceptions, the department of health and family services (DHFS), a county department of human services or social services or a licensed child welfare agency (collectively "agency") may not make available for inspection or disclose the contents of any record kept or information received about

..... *GM*

from disclosing information in confidence to another social welfare agency,

an individual in the care or legal custody of the agency except by order of the court assigned to exercise jurisdiction under the children's code (juvenile court). Current law, however, is silent as to the confidentiality of records kept and information received relating to a foster parent, treatment foster parent or family-operated group home parent (substitute care parent). This bill prohibits an agency from making available for inspection or disclosing the contents of any record kept or information received relating to a substitute care parent or a family member of a substitute care parent without first receiving the written permission of the substitute care parent, except by order of the juvenile court. ~~The bill, however, does not apply to the confidential exchange of information between an agency and another social welfare agency. The bill also does not prohibit an agency from making available for inspection or disclosing the contents of a record as permitted under the child abuse and neglect reporting law, from disclosing to the child's parent, guardian or legal custodian the name and address of the substitute care parent or from including the location of the child's placement in the child's permanency plan.~~

*** ANALYSIS FROM -0272/1 ***

HEALTH AND HUMAN SERVICES

CHILDREN

Current law appropriates to the department of health and family services (DHFS), certain state general purpose revenues (GPR) and federal revenues for foster care and for adoption assistance payments to parents who adopt children with special needs. This bill expands the purposes for which GPR and federal foster care and adoption services moneys are appropriated to include the cost of contracting with private adoption agencies to provide adoption services for children with special needs who are under the guardianship of DHFS.

*** ANALYSIS FROM -0276/1 ***

HEALTH AND HUMAN SERVICES

CHILDREN

(Milwaukee County)

(child)

juvenile

Under current law, in a county with a population of 500,000 or more the department of health and family services (DHFS) is required to provide the court assigned to exercise jurisdiction under the children's code and the juvenile justice code (juvenile court) with services necessary for investigating and supervising child welfare cases under the children's code and the county board of supervisors is required to provide the juvenile court with services necessary for investigating and supervising cases under the juvenile justice code by operating a children's court center under the supervision of the director of the county department of social services (county department). Currently, child welfare cases under the children's code include cases in which a child is alleged to have been abused or neglected or otherwise to be in need of protection or services under the children's code and cases under the juvenile justice code include cases in which a juvenile is alleged to be delinquent, in violation of a civil law or ordinance or in need of protection or services under the juvenile justice code, that is, habitually truant from home or school, uncontrollable or a school dropout. Currently, the chief judge of the judicial administrative district covering a county with a population of 500,000 or more must

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Milwaukee County

Shelburne County

formulate written judicial policy governing intake and juvenile court services for matters under the children's code and the juvenile justice code.

This bill prohibits the chief judge from directing DHFS to provide intake and juvenile court services in cases in which the referral information indicates that the juvenile should be referred to the juvenile court under the juvenile justice code, unless that information indicates that the juvenile should also be referred to the juvenile court under the children's code. The bill also requires the chief judge to direct DHFS and the county department to coordinate the provision of services in cases in which a DHFS intake worker determines that jurisdiction exists under the juvenile justice code instead of or in addition to the children's code and in cases in which a county department intake worker determines that jurisdiction exists under the children's code instead of or in addition to the juvenile justice code.

*** ANALYSIS FROM -1967/3 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, ~~the department of health and family services (DHFS) must request a waiver from the secretary of the federal department of health and human services to provide health care coverage using federal funds to certain low-income families (with certain exceptions, families with an income at or below 185% of the federal poverty line).~~ If the waiver is granted, DHFS must administer the health care program (known as "badger care") to provide health care coverage to low-income children and their parents if the children reside with their parents.

This bill expands the badger care program to cover any child under the age of 19 and who meets financial and other eligibility requirements regardless of whether the child resides with his or her parents. The bill also ~~permits~~ DHFS to lower the maximum income level for initial eligibility for badger care if funding for badger care is insufficient to accommodate the projected enrollment in badger care. ~~The bill~~ ^{and} requires DHFS to raise the income limit to up to 185% of the federal poverty line if, after having lowered the income level, funding for badger care becomes sufficient to cover projected enrollment of persons at the higher income level.

*** ANALYSIS FROM -0333/2 ***

HEALTH AND HUMAN SERVICES

HEALTH

Under current law, ~~the department of health and family services (DHFS)~~ may not license, certify, issue a certificate of approval to or register a person to operate an adult treatment facility, organization or service if DHFS knows that the person has been convicted of or has pending a charge for a serious crime; has been found to have abused or neglected a facility client or misappropriated client money; has abused or neglected a child; or is not sufficiently credentialed to provide adequate client care. An adult treatment facility, organization or service may not hire such a person if the person may have access to clients and may not allow him or her to reside as a nonclient at the facility. The prohibitions do not apply if the person demonstrates to DHFS by clear and convincing evidence and under specific procedures that he or she has been rehabilitated, unless the person has been

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(generally defined as ^{having} an income at or below 185% of the federal poverty line)

convicted of certain offenses. DHFS must obtain specific personal background information, including that obtained from criminal history searches, about persons applying to operate facilities, organizations and services; in addition, DHFS must obtain the information every four years for all persons licensed to operate facilities, organizations and services and for nonclient facility residents. Every adult treatment facility, organization or service must obtain the same types of information about prospective employes or contractors or persons who seek to reside as nonclients in the facilities and must obtain the information every four years for employes or contractors. DHFS is authorized to charge a fee for the personal background information checks that it must conduct.

This bill authorizes DHFS to charge a fee for the costs of providing personal background information to an adult treatment facility, organization or service about an employe or contractor or prospective employe or contractor of the facility, organization or service. Additionally, the bill authorizes DHFS to charge a fee to persons for the costs incurred by DHFS under requests to demonstrate that the persons have been rehabilitated.

HEALTH AND HUMAN SERVICES

CHILDREN

Under current law, the department of health and human services (DHFS) may not license a person to operate a foster home, treatment foster home, group home, shelter care facility, child welfare agency or day care center (entity); a county department of human services or social services (county department) or a child welfare agency may not license a person to operate a foster home or treatment foster home; a county department may not certify a person as a day care provider; and a school board may not contract with a person to operate a day care program; if DHFS, the county department, the child welfare agency or the school board knows that the person has been convicted of or has pending a charge for a serious crime, as defined by DHFS by rule; has abused or neglected a client or has misappropriated the property of a client; has abused or neglected a child; or is not sufficiently credentialed to provide adequate care to a client. Current law also prohibits an entity from hiring, contracting with or permitting to reside at the entity as a nonclient such a person if the person is expected to have access to its clients. Current law, however, permits, subject to certain exceptions, such a person to be licensed or certified to operate, to be hired by or contracted with, or to be permitted to reside at, an entity if the person demonstrates to DHFS, the county department, the child welfare agency or the school board that the person has been rehabilitated. Current law requires DHFS, a county department, a child welfare agency or a school board to obtain, with respect to an operator or nonclient resident of an entity, and an entity to obtain, with respect to an employe or contractor of the entity, at the time of initial licensure, certification, hiring, contracting or residence and every four years after that, certain personal background information about the person, including a criminal history search, information contained in the client abuse registry maintained by DHFS, information maintained by DHFS regarding substantiated reports of child abuse or neglect and information maintained by the department of regulation and licensing (DORL) regarding the status of the person's credentials. Under current law, DHFS, a county

department, a child welfare agency or a school board may charge a fee for obtaining this background information about an operator or nonclient resident of an entity.

This bill permits DHFS, a county department, a child welfare agency or a school board to charge a fee for obtaining this background information about an employe or contractor or prospective employe or contractor of an entity. The bill also permits DHFS, a county department, a child welfare agency or a school board to charge a fee to a person for the costs incurred in determining whether the person has been rehabilitated.

*** ANALYSIS FROM -1059/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~OTHER HEALTH AND HUMAN SERVICES~~ ← STET SUB-HEAD

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Under current law, an adult treatment facility, organization or service may not hire certain persons if the person may have access to clients and may not allow the person to reside as a nonclient at the facility. The persons to whom these restrictions apply have been convicted of or have pending a charge for a serious crime; have been found to have abused or neglected a facility client or misappropriated client money; have abused or neglected a child; or are not sufficiently credentialed to provide adequate client care. The prohibitions do not apply if the person demonstrates to the department of health and family services (DHFS) by clear and convincing evidence and under specific procedures that he or she has been rehabilitated, unless the person has been convicted of certain offenses. Each adult treatment facility, organization or service must obtain specific personal background information, including that obtained from criminal history searches, about persons applying to operate facilities, organizations and services and must obtain the information every four years for employes or contractors.

This bill changes the type of interaction with clients that prospective employes or prospective contractors must have in order to require investigation of their backgrounds and to prohibit them from being hired by or contracting with adult treatment facilities, organizations or services. The bill, rather than requiring investigation of a person who has or is expected to have access to the clients of the facility, organization or service, instead requires investigation of a person who provides to the clients or is expected to provide to them, direct care that is more intensive than negligible care in quantity or quality or in the amount of time required to provide the care. Restrictions on nonclient residents at the facility, organization or service are unchanged by the bill.

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~~HEALTH AND HUMAN SERVICES~~

~~CHILDREN~~

Under current law, a foster home, treatment foster home, group home, shelter care facility, child welfare agency or day care center (entity) may not hire or contract with a person who will be under the entity's control and who is expected to have access to the entity's clients if the person has been convicted of or has pending a charge for a serious crime, as defined by the department of health and family services (DHFS) by rule, has abused or neglected a client or has misappropriated the property of a client, has abused or neglected a child or is not sufficiently credentialed to

provide adequate care to a client. ~~Current law, however, permits, subject to certain exceptions, such a person to be hired or contracted with if the person demonstrates to DHFS that the person has been rehabilitated. Current law requires an entity to obtain, at the time of initial hiring or contracting and every four years after that, certain personal background information, including a criminal history search, about an employe, prospective employe, contractor or prospective contractor who has, or is expected to have access to the entity's clients.~~

This bill, rather than requiring an entity to conduct a background investigation of a person who has, or is expected to have, access to the entity's clients, instead requires an entity to conduct a background investigation of a person who provides to clients, or is expected to provide to them, direct care that is more intensive than negligible care in quantity or quality or in the amount of time required to provide the care.

*** ANALYSIS FROM -0178/2 ***
 HEALTH AND HUMAN SERVICES

HEALTH

Under current law, ~~the department of health and family services (DHFS)~~ administers the birth and developmental outcome monitoring program, commonly referred to as (BDOMP). Under that program, a report must be made to DHFS by a physician who is the first physician to make a diagnosis or confirm a suspected diagnosis that a child under the age of six has a condition resulting from a low birth weight, a chronic condition possibly requiring long-term care, a birth defect or a developmental disability or other severe disability. ~~If no physician has treated the child, a nurse who has visited with the child and who knows or suspects with reasonable medical certainty that the child has such a condition must make the report.~~ DHFS is required to develop and implement a system for the collection, updating and analysis of the information reported and to disseminate the information. DHFS must also publish an annual report and submit the report annually to the chief clerk of each house of the legislature and to counties on the results of the information collected through the reports. ~~DHFS must coordinate data dissemination activities of the department with those of the division for learning support, equity and advocacy in the department of public instruction (DPI) with respect to the information collected through the reports. Currently, information contained in a report that specifically identifies the subject of the report is confidential and, with certain exceptions, may not be released to any person.~~

This bill replaces BDOMP with a program that requires physicians, hospitals, certain clinics and clinical laboratories to report birth defects identified in children under the age of two to DHFS. Under the bill, a birth defect is defined as a structural deformation, or a genetic, inherited or biochemical disease, that occurs prior to or at birth and that requires medical or surgical intervention or interferes with normal growth and development. The bill requires DHFS to establish and maintain a registry that documents the diagnosis of a birth defect in a child under the age of two. As under current law, personally identifying information that is contained in the reports made to DHFS is confidential and, with certain exceptions, may not be released to any person. Finally, the bill creates a council on birth defect prevention

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diagnoses or

or nurse

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and surveillance to advise DHFS regarding the registry and rules related to reporting.

*** ANALYSIS FROM -0329/4 ***

~~HEALTH AND HUMAN SERVICES~~

~~HEALTH~~

Under current law, the department of health and family services (DHFS) licenses and otherwise regulates ~~emergency medical services personnel, including~~ emergency medical technicians and ambulance service providers. DHFS may charge a reasonable fee for licensure.

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~~This~~ bill authorizes DHFS to impose forfeitures on ambulance service providers for violation of laws that prescribe conditions for licensure and for operation of ambulances. The bill clarifies that DHFS may charge a fee for renewal of licenses for emergency medical technicians and ambulance service providers and authorizes DHFS to charge fees for untimely license renewal. DHFS must, under the bill, promulgate rules to establish the amounts for assessments of the forfeitures, fees for license renewal and late renewal fees. DHFS may promulgate these rules as emergency rules without the necessity of making a finding of emergency.

*** ANALYSIS FROM -0183/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~HEALTH~~

This bill removes from the statutes outdated references to tuberculosis sanatoriums 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)~~ *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.

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*** ANALYSIS FROM -1058/1 ***

~~HEALTH AND HUMAN SERVICES~~

~~HEALTH~~

This bill provides that some of the moneys received by the state from Indian gaming compacts are to be transferred to the department of health and family services (DHFS) to fund grants for cooperative American Indian health projects.

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*** ANALYSIS FROM -0026/1 ***

~~HEALTH AND HUMAN SERVICES~~

~~HEALTH~~

Under current law, the department of health and family services (DHFS) must, by rule, base fees for renewal of home health agency licenses on the annual net

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income, as determined by DHFS, of each home health agency seeking license renewal.

This bill eliminates annual net income of home health agencies as a basis for establishing fees for home health agency license renewal, thus permitting DHFS, by rule, to base fees on any criterion.

*** ANALYSIS FROM -0326/3 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

This bill requires ~~the department of health and family services~~ DHFS to contract with counties or federally recognized American Indian tribes or bands to provide, from state general purpose revenues and federal moneys, up to two demonstration projects in fiscal year 2000-01. The projects are to provide mental health and alcohol or other drug abuse services under managed care programs to persons who suffer from mental illness, alcohol or other drug dependency, or both illness and dependency. DHFS must submit for approval by the secretary of the federal department of health and human services any necessary requests for waiver of federal ~~medical assistance~~ ^{medicaid} laws to effectuate these managed care demonstration projects. ^{of MA}

The bill defines various terms and authorizes DHFS, within the limits of available state and federal funds, to do all of the following:

MOVE TO P. 116

1. Promote the creation of coalitions to develop, coordinate and provide resources to advance prevention, early intervention, treatment, recovery and other achievements for consumers of mental health and alcohol and other drug abuse services.
2. In cooperation with specified parties, develop and implement a comprehensive strategy to reduce stigma of and discrimination against persons with mental illness, alcoholics and drug dependent persons.
3. Develop and implement a comprehensive strategy to involve counties, service providers for mental health and alcohol and other drug abuse services, consumers, interested community members and advocates as equal participants in service system planning and delivery.
4. Promote responsible stewardship of human and fiscal resources in the provision of mental health and alcohol and other drug abuse services.
5. Develop and implement methods to identify and measure outcomes for consumers.
6. Promote access to appropriate mental health and alcohol and other drug abuse services regardless of a person's geographic location, age and other factors.
7. Promote consumer decision making.
8. Promote provider use of individualized service planning.

The bill requires DHFS to ensure that service providers who use individualized service planning meet certain requirements in using the planning.

*** ANALYSIS FROM -0689/2 ***

HEALTH AND HUMAN SERVICES

MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES

Under current law, a person who is believed to be mentally ill and a proper subject for treatment and who evidences certain acts, omissions or other behavior that indicate that he or she satisfies at least one of five standards of dangerousness may be detained on an emergency basis and transported to and detained and treated in a mental health treatment facility. A petition signed by three others may be brought against the detained person alleging that the detained person is mentally ill, is a proper subject for treatment and is dangerous because he or she meets a standard for involuntary civil commitment. (Emergency detention is not, however, a prerequisite to bringing such a petition; it can be brought against any person.) If such a petition is filed with a court, the subject of the petition must be given a hearing to determine if there is probable cause sufficient to support the petition's allegations. If a court finds probable cause, a final hearing on commitment must be held, and if, again, the person is found to have satisfied one of the standards of dangerousness he or she may be involuntarily committed to the care and custody of a county department of community programs for appropriate treatment.

Currently, one of the five standards of dangerousness for involuntary civil commitment terminates on December 1, 2001. That standard, known as the "fifth standard", requires that a person, because of mental illness, either evidence the incapability of expressing an understanding of the advantages and disadvantages of and alternatives to accepting a particular medication or treatment after these have been explained to him or her or evidence substantial incapability of applying an understanding of those advantages, disadvantages and alternatives to his or her mental illness in order to make an informed choice as to whether to accept or refuse medication or treatment. The person also must evidence a substantial probability, as demonstrated by both his or her treatment history and recent acts or omissions, that he or she needs care or treatment to prevent further disability or deterioration. Lastly, the person must evidence a substantial probability that he or she will, if left untreated, lack services necessary for his or her health or safety and suffer mental, emotional or physical harm that will result in either the loss of his or her ability to function independently in the community or the loss of cognitive or volitional control over his or her thoughts or actions.

Under current law, the attorney general or his or her designee must review an emergency detention that is made under the fifth standard before the detention takes place or within 12 hours after. If the attorney general or designee disapproves or fails to act with respect to the proposed detention, it may not be carried out; if the attorney general or designee disapproves or fails to act with respect to an actual emergency detention, the detained person must be released. The attorney general or designee also must review a petition for involuntary commitment that is based on the fifth standard before the petition is filed with a court or within 12 hours after the filing. If the attorney general or designee disapproves or fails to act with respect to a proposed petition, the petition may not be filed; if the attorney general or designee disapproves or fails to act with respect to a filed petition, the subject of the petition, if he or she has been detained under the petition, must be released and the petition

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is void. These provisions do not apply if the attorney general or designee makes a finding that a court of competent jurisdiction in this state, in a case challenging the constitutionality of the fifth standard, has upheld the constitutionality.

Currently, the inpatient treatment of persons who are involuntarily committed under the fifth standard may not be more than 30 days, unless the person violates a condition of outpatient treatment. Medication and treatment may be administered without the consent of the person if a court finds probable cause to believe that the person meets the fifth standard and if the court finds at the final commitment hearing that the standard is met.

This bill eliminates the December 1, 2002, termination of the fifth standard for emergency detention and involuntary civil commitment of persons with mental illness.

INSERT MATERIAL FROM Pp. 115-16 - 0112/2

*** ANALYSIS FROM -0284/3 ***

HEALTH AND HUMAN SERVICES

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

Current law provides a procedure for involuntarily committing sexually violent persons to ~~the department of health and family services~~ (DHFS) for control, care and treatment. A sexually violent person is a person who has been convicted of certain sexually violent offenses and who is dangerous because he or she suffers from a mental disorder that makes it substantially probable that the person will engage in acts of sexual violence.

During a sexually violent person commitment proceeding, the person who is the subject of the proceeding may be required to undergo an examination of his or her mental condition. The person may also retain an expert of his or her own choosing to conduct an examination or, if the person is indigent, he or she may request the court to appoint an expert to work on behalf of the person. The county in which the proceeding is taking place pays for an expert appointed by the court for the person.

Once a person has been committed to DHFS as a sexually violent person, he or she must periodically undergo a reexamination of his or her mental condition. In addition, if a person who has been committed to DHFS as a sexually violent person files a petition seeking supervised release into the community, the court must appoint an expert to conduct an examination of the person's mental condition. Whenever a person is required to undergo an examination for purposes of a periodic reexamination or as part of a proceeding in which the person is seeking supervised release into the community, the person may retain an expert of his or her own choosing to conduct an examination or, if he or she is indigent, may request the court to appoint an expert. It is not clear under current law whether DHFS or the applicable county pays for an expert appointed for purposes of a periodic reexamination or a proceeding for supervised release into the community.

This bill clarifies that whenever a court appoints an expert for a sexually violent person as part of a periodic reexamination of the person, the county in which that court sits must pay for the costs of the appointed expert. The bill also clarifies that whenever a court appoints an expert for a sexually violent person as part of a proceeding for supervised release into the community, the county in which that court sits must pay for the costs of the appointed expert.



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When a person is found ~~by a judge or jury~~ to be a sexually violent person under current law, the person must be committed to the custody of DHFS. The court that commits the person must specify whether the person is to be placed in institutional care or on supervised release in the community, and DHFS must arrange for control, care and treatment of the person in the least restrictive manner consistent with the requirements of the person and in accordance with the court's commitment order.

If the court decides to place the person on supervised release, DHFS and the county social services department (county department) of the person's county of residence must prepare a plan for the treatment and services that the person will receive while on supervised release. ~~If the county department of the person's county of residence declines to prepare a plan, DHFS must~~ ~~find another county department to prepare the plan and arrange for placement of the person in that~~

except that if

or the court

~~country. If DHFS is unable to find another county department to prepare the plan, the court must choose a county department to prepare the plan, order that county department to prepare the plan and place the person on supervised release in that county. However, the court may not choose the county department of a county where there is a facility for the detention, evaluation or institutional placement of sexually violent persons unless that county is also the county of residence of the person being placed on supervised release.~~

The court of appeals has held that once a court has ordered a person placed on supervised release, the person must be released and DHFS and the county responsible for preparing the plan must provide or contract for appropriate treatment and services or, if such treatment and services are not available, create them. *State v. Sprosty*, 221 Wis. 2d. 401 (Ct. App. 1998).

This bill makes the following changes relating to supervised release of sexually violent persons:

1. The bill establishes new guidelines for a court's decision concerning whether to place a person on supervised release. Under the bill, a court may not order a person to be placed on supervised release if the court finds that it is substantially probable that the person will engage in acts of sexual violence unless the person resides in a facility with a level of security comparable to that of a secure mental health unit or facility.

However, even if it makes this finding, the court may withhold its decision concerning placement ~~in institutional care or on supervised release~~ and order DHFS and the appropriate county department to prepare a plan for supervised release for the person. The court may withhold its decision and order a plan prepared only if the person first establishes that it is likely that the daily cost of providing the necessary programs and facilities for control, care and treatment of the person on supervised release would not exceed the daily cost of control, care and treatment of the person at a secure mental health unit or facility.

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If the court withholds its decision and orders preparation of a supervised release plan, the court then proceeds to consider whether to approve or disapprove the plan under the new procedure created by the bill (see item 2., below), ~~except that, in addition to the criteria for approving the plan~~ under the new procedure, the court may approve the plan only if the daily cost of supervised release ~~does not exceed the daily cost of institutional care at a secure mental health unit or facility.~~

even if the plan meets

approval

and place the person on supervised release

would

cost of supervised release exceeds the daily cost of institutional care at a secure mental health unit or facility, the court may not place the person on supervised release.

2. The bill creates a new procedure that a court must use to approve or disapprove a supervised release plan. Under the bill, the court must hold a hearing on a proposed supervised release plan within 30 days after the plan is presented to the court. Based on evidence provided at the hearing, the court must approve the plan if it determines that the plan provides adequate treatment and services to the person and adequate protection to the community. Likewise, the court must disapprove the plan if it determines that the plan does not provide adequate treatment and services to the person and adequate protection to the community. If the court disapproves the plan, DHFS and the county department must revise the plan and present it to the court again. If the court approves the plan the court must also order the person placed on supervised release in the county that prepared the plan. Finally, the bill requires DHFS and the county department that prepared the plan to implement the plan and allows DHFS to ask the court for any orders that are necessary to ensure implementation of the plan.

move to p-113

*** ANALYSIS FROM -0112/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

~~Current law provides a procedure for involuntarily committing persons to a mental health facility for mental health treatment. This procedure usually is begun by the filing of a petition alleging that the person is mentally ill, drug dependent or developmentally disabled, that the person is a proper subject for treatment and that, based on certain specified standards, the person is dangerous because he or she may harm himself, herself or others. If these allegations are found to be true, the person may initially be committed for treatment for a period not to exceed 6 months. In addition, a commitment order may be extended after an evaluation of the person. Each consecutive commitment order may be for a period not to exceed 12 months.~~

Also, if a person is found to be
is found to satisfy one of the standards of dangerousness;

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An inmate of a jail, house of correction or prison may be subject to an involuntary commitment proceeding based on a petition described above. However, there is an alternative petition that may be used to begin an involuntary commitment proceeding against an inmate. This alternative petition must allege all of the following: 1) that the inmate is mentally ill, is a proper subject for treatment and is in need of treatment; 2) that the inmate has been fully informed about, and has had the opportunity to discuss, his or her treatment needs and the mental health services available to him or her; and 3) that appropriate less restrictive forms of treatment have been attempted and have been unsuccessful. If an inmate is committed based on an alternative petition, the total period that the inmate may be committed may not exceed 180 days in any 365-day period.

This bill extends the time period for which an inmate of a state prison may be committed based on an alternative petition. Under the bill, any order of commitment of a state prison inmate that is based on an alternative petition may be for a period not to exceed one year. The bill does not change the current time limits on the

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commitment of an inmate of a jail or house of correction based on an alternative petition.

End of portion to be inserted to P113

Move -0326 HERE

*** ANALYSIS FROM -0023/4 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

Specified entities

Under current law, the Mendota Mental Health Institute and the Winnebago Mental Health Institute are operated by ~~the department of health and family services, DHFS,~~ to provide specialized psychiatric services, research and education. In addition, DHFS is authorized to establish a system of outpatient mental health clinic services in any institution that DHFS operates. The county department of community programs must under contract authorize all care of most patients in the mental health institutes. Also, DHFS may provide outpatient services at the Winnebago Mental Health Institute to school district pupils.

This bill eliminates the explicit authorization for the Winnebago Mental Health Institute to provide outpatient mental health services for pupils. The bill, instead, authorizes DHFS to authorize a mental health institute to offer, when DHFS determines that community services need to be supplemented, mental health outpatient treatment and services, day programming, consultation and services in residential facilities, including group homes, child caring institutions and community-based residential facilities, that are situated on the grounds of a mental health institute. These services may be provided only under a contract between DHFS and ~~a county department of social services, human services or community programs, a school district or another private or public entity,~~ to persons who are referred by the ~~county department, school district or~~ entity. Further, the services are governed by the terms of the contract or by statutes and DHFS rules that regulate facilities, govern certain mental health services and provide mental health patient rights. In the event of a conflict between contract provisions and these statutes or rules, the services must comply with the contractual, statutory or rules provision that is most protective of the health, safety, welfare or rights of the recipient of the services, as determined by the mental health institute. ~~County, city and~~ mental health statutes, including emergency detention and commitment laws, and zoning and other county, city, town or village ordinances do not apply to provision of the services.

*** ANALYSIS FROM -1517/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

Specified

Under current law, ~~the department of health and family services, DHFS,~~ provides, from general purpose revenues, funding through county departments of community programs for mental health treatment services for persons who are in or relocated from facilities that have been found by the federal health care financing administration to be institutions for mental diseases (and, thus, ineligible for receipt of ~~medical assistance (MA)~~). Also under current law, every person who applies for admission to a nursing home or to an institution for mental diseases must be screened to determine if the person has a developmental disability or mental illness

DAK

and, if so, whether the person needs facility care and active treatment for the developmental disability or mental illness.

This bill requires DHFS to provide funding from general purpose revenues , as a part of mental health treatment services for persons in or relocated from institutions for mental diseases, for active treatment for mental illness for a person in the facility who has been determined, through screening, to have mental illness and to need the treatment.

*** ANALYSIS FROM -1173/1 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

of community programs

Under current law, county departments of community programs authorize all care of any patient in mental health institutes, ~~which are operated by the department of health and family services (DHFS). If a mental health institute provides a county department of community programs with services,~~ DHFS regularly bills the county department for the care at rates that reflect the estimated per diem cost of specific levels of care, as adjusted periodically by DHFS.

This bill authorizes DHFS to set rates on a flexible basis, rather than at the estimated per diem cost of specific levels of care, for billing county departments of community programs for care provided in mental health institutes. The bill requires that the flexible rate structure ~~set by DHFS~~ recover the cost of operations.

*** ANALYSIS FROM -0025/1 ***

~~HEALTH AND HUMAN SERVICES~~

~~MENTAL ILLNESS AND DEVELOPMENTAL DISABILITIES~~

provided by mental health institutes

Under current law, ~~the department of health and family services (DHFS)~~ provides services at the southern center for the developmentally disabled for up to ten developmentally disabled persons who have mental illness or exhibit extremely aggressive and challenging behaviors and for up to 12 such persons at the northern center for the developmentally disabled. DHFS bills county departments of community programs for the general purpose revenue portion of the costs of the services that are provided to recipients of medical assistance.

This bill increases to 36 the number of developmentally disabled persons who have mental illness or exhibit extreme behaviors for whom DHFS may provide services and permits the services to be provided at the southern, northern and central state centers for the developmentally disabled.

*** ANALYSIS FROM -1164/5 ***

~~HEALTH AND HUMAN SERVICES~~

~~OTHER HEALTH AND HUMAN SERVICES~~

Under current law, ~~the department of health and family services (DHFS)~~ and the department of commerce are together authorized to perform various actions, including impounding materials, to regulate sources of ionizing and nonionizing radiation. DHFS annually registers sites of ionizing radiation installations, such as medical sites, and imposes annual fees for each site and each X-ray tube at the site. Violation of the regulatory statutes or rules subjects the violator to a forfeiture.

regulating

This bill eliminates authority of the department of commerce to regulate sources of ionizing and nonionizing radiation. The bill authorizes the governor to enter into agreements with the U.S. Nuclear Regulatory Commission to discontinue certain federal governmental licensing and related regulatory authority with respect to by-product, source and special nuclear radioactive material and to assume state regulatory authority. Under the bill, if the agreements are made, persons possessing licenses issued by the U.S. Nuclear Regulatory Commission are considered to be licensed by the state; the licenses expire 90 days after notice of expiration by DHFS or on the expiration date of the former federal licenses, whichever is earlier. Rules promulgated by DHFS for by-product, source and special nuclear radioactive material may not be less stringent than federal statutory standards.

The bill establishes authority, as of January 1, 2003, for DHFS to license specifically the possession, use, transfer or acquisition of radioactive by-product material and to license specifically the possession, use, manufacture, production, transfer or acquisition of radioactive material or devices or items that use radioactive material and to operate a site that uses radioactive material. DHFS may assess annual fees, prescribed by rule, for the initial licenses renewals, annual license maintenance, and license amendment and termination and must promulgate rules for issuance, modification, suspension, termination and revocation of specific licenses and for requirements for general licenses. DHFS also is authorized to establish general license requirements for the possession, use, transfer or acquisition of by-product radioactive material or devices or items that contain by-product radioactive material. In addition, DHFS is authorized to issue reciprocal recognition of a license for radioactive materials of another state or the U.S. nuclear regulatory commission and to assess a fee for the recognition.

The bill authorizes DHFS annually, until January 1, 2003, to assess a fee of 36% of the U.S. nuclear regulatory commission license application fee and materials license annual fee, for any person in this state holding a license issued by the U.S. nuclear regulatory commission. The bill authorizes DHFS to revise the fee amounts by rule.

The bill eliminates court-imposed forfeitures for violations of the radiation regulatory statutes and rules of DHFS and instead establishes administrative forfeitures that DHFS may directly assess and procedures for notice, a hearing for contested cases, forfeiture payment and disposition and enforcement.

Lastly, the bill authorizes DHFS to issue emergency orders to protect the public from radiation exposure; increases the annual fee amounts for registration of ionizing radiation installation sites and for X-ray tubes at those sites; and changes current law to prohibit, rather than allow, transfer of registration of ionizing radiation installations if ownership transfers.

*** ANALYSIS FROM -0266/3 ***

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

Under current law, a person is eligible for medical assistance (MA) if the person meets certain income and asset limits and other nonfinancial criteria. Certain people are eligible for MA because of substantial medical needs that consume so

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THY

much of their income as to qualify them as "low-income". This category of MA recipient is commonly referred to as "medically needy". Other people are eligible for MA by virtue of their receipt of other federal assistance, such as supplemental security income (SSI). This category of people is commonly referred to as "categorically needy".

This bill directs the department of health and family services (DHFS) to seek federal approval of an amendment to the state MA plan and to request any necessary waivers from the secretary of the federal department of health and human services and from the commissioner of the social security administration to expand MA eligibility to disabled persons who would qualify for SSI but for excess income and assets. Under the bill, a disabled person whose family's income is less than 250% of the federal poverty line and whose assets do not exceed \$20,000 is eligible to receive MA if the person pays a monthly premium and a one-time initial premium (purchase plan) established by DHFS. The bill directs DHFS, however, to pay the monthly premium for a person who is eligible for the purchase plan and who is receiving services under the community options program (COP). The bill also authorizes DHFS to pay for that person's one-time entry premium.

OTHER HEALTH AND HUMAN SERVICES

The health insurance risk-sharing plan (HIRSP) under current law, which is administered primarily by DHFS, provides major medical health insurance coverage for persons who are covered under Medicare because they are disabled persons who have tested positive for HIV and persons who have been refused coverage, or coverage at an affordable price, in the private health insurance market because of their mental or physical health condition. Also eligible for coverage are persons (called eligible individuals) who do not currently have health insurance coverage but who were covered under certain types of health insurance coverage for at least 18 months in the past. Persons who are eligible for MA are not eligible for HIRSP.

The bill requires DHFS to evaluate how to coordinate HIRSP with the MA program. If necessary, DHFS may develop proposed legislation that coordinates the two programs and that addresses the provision of health care coverage for individuals who are eligible for both HIRSP and MA coverage plan.

among others, among

program expanding

under the expanded eligibility program

eligibility and, if the money

*** ANALYSIS FROM -1549/2 ***

HEALTH AND HUMAN SERVICES

ALCOHOL AND OTHER DRUG ABUSE STET SUB-HEAD

This bill creates a program in the department of health and family services (DHFS) funded from federal substance abuse block grant moneys, under which ~~for each year~~ DHFS is authorized to award up to \$1,107,000 to counties and private entities to provide community-based alcohol and other drug abuse treatment programs. The programs are to meet special needs of women with problems resulting from alcohol or other drug abuse and must emphasize parent education, vocational and housing assistance and coordination with other community programs and with treatment under intensive care.

*** ANALYSIS FROM -0275/5 ***

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HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

STET SUB-HEAD

Under current law, ~~the department of health and family services (DHFS)~~ distributes general purpose revenues and federal revenues, as community aids, to counties to provide social, mental health, developmental disabilities and alcohol and other drug abuse services. ~~Currently, DHFS is required to distribute community aids in the form of a basic county allocation, together with certain categorical allocations, including an allocation for Alzheimer's family and caregiver support. Currently, a county's annual community aids allocation is specified in a contract between DHFS and the county, and DHFS distributes the county's allocation in reimbursement of claims submitted by the county for moneys expended for those services. Currently,~~ a county must provide matching funds for a year equal to 9.89% of that county's community aids distribution for the year.

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This bill sets ~~the basic county allocations for fiscal years 1999-2000 and 2000-01. The bill also permits DHFS to distribute not more than \$4,500,000 of the basic county allocation in each fiscal year based on performance standards for services funded by community aids developed by DHFS and incorporated in the contracts between DHFS and the counties.~~ In addition, the bill provides that, if a care management organization under the family care program, created under the bill, is available in a county, DHFS may dispose of the county's Alzheimer's family and caregiver support allocation and not more than 21.3% of the county's basic county allocation by transferring a portion of those allocations, as determined by DHFS, to the family care program to fund the services of resource centers and care management organizations under the family care program and by transferring a portion of those allocations, as determined by DHFS, to the county's allocation for adult protective services created under the bill. If DHFS transfers a portion of those allocations to a county's adult protective services allocation, the county must provide matching funds for a year equal to 9.89% of the amount transferred to the family care program and ~~the~~ the adult services allocation for the year. Finally, the bill permits DHFS to decrease a county's basic county allocation by the amount that DHFS estimates it will incur in providing services to a former recipient of services funded under community aids who is a participant in the medical assistance buy-in program created under this bill.

(see FAMILY CARE)

that

The bill also

MA

~~Under current law, DHFS distributes to counties, as community aids, federal substance abuse prevention and treatment funds and federal child welfare funds. This bill sets the amounts of those distributions for each fiscal year.~~

*** ANALYSIS FROM -1695/1 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

Under current law, the department of health and family services (DHFS) administers a grant program for agencies that conduct certain community-based hunger prevention activities. However, under current law, DHFS may not distribute grants after June 30, 1999. DHFS must submit a report by June 30, 2000, to the

that is, the program under which a disabled person whose income and assets exceed the limit for MA eligibility, may purchase MA coverage (see (3) MEDICAL ASSISTANCE)

governor and the legislature regarding grants made and the hunger prevention activities conducted using those grants.

This bill repeals the community-based hunger prevention grant program. However, under the bill, DHFS is still required to submit to the governor and the legislature by June 30, 2000, a report regarding grants made and the hunger prevention activities conducted using those grants.

*** ANALYSIS FROM -0260/2 ***
HEALTH AND HUMAN SERVICES
OTHER HEALTH AND HUMAN SERVICES

Header (C) + (E) (TAY)
Courts & Procedure (C) + (E)
Subhead -> other COURTS AND RECORDS

Under current law, the department of health and family services (DHFS) must file a claim against the estate of a recipient of certain health aids for the amount of aid paid to the recipient. If the recipient's spouse or minor or disabled child survives the recipient, and the recipient's estate includes an interest in a home, the probate court must, in the final judgment, assign the interest in the home subject to a lien in favor of DHFS for the amount of DHFS' claim. Currently, small estates are settled or assigned summarily and therefore a final judgment is not entered. Instead, a summary order is entered. It is unclear under current law whether the assignment of the home must be subject to a lien in cases in which there is no final judgment.

This bill states that the lien requirement extends to cases in which assignment of the home is made by summary order.

@ MEXEY
on p. 33

*** ANALYSIS FROM -0536/1 ***
HEALTH AND HUMAN SERVICES
OTHER HEALTH AND HUMAN SERVICES

On January 4, 1999

from the clerks of court

~~Under current law, the department of workforce development (DWD) has the~~
~~responsibility, as published by DWD in the Wisconsin Administrative Register as the date for the transfer of responsibilities~~
~~from the clerks of court for receiving and disbursing child support, maintenance,~~
~~family support and other support-related payments. A payer of support or~~
~~maintenance is required by statute to pay an annual receipt and disbursement fee~~
~~of \$25 to DWD. The bill provides that the receipt and disbursement fee must be paid~~
~~by wage assignment, just as support and maintenance payments are paid. In~~
~~addition, the bill authorizes DWD to collect any annual fee payment that was owed~~
~~to a clerk of court, that was not paid to the clerk and that is shown on DWD's~~
~~automated payment and collection system on December 31, 1998. The unpaid fees~~
~~may be collected by wage assignment, or DWD may move the court for a contempt~~
~~of court sanction if wage assignment is inapplicable or ineffective.~~

assumed

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by wage assignment

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Current law provides that each order for child or family support, maintenance or spousal support is an automatic assignment of a person's wages to DWD ~~in~~
~~an amount that is sufficient to ensure~~
~~payment of the amount under the order, as well as any arrearages due at a periodic~~
~~rate that does not exceed 50% of the amount due under the order, as long as the~~
~~additional amount for arrearages does not leave the person at an income below the~~
~~federal poverty line. Current law also provides that, if an assignment does not~~
~~require immediately effective withholding and the payer misses a payment, the court~~

(PJK)

PLK

without a court hearing

or family court commissioner may cause the assignment to go into effect by providing notice of the assignment to the payer's employer or other person from whom the payer receives or will receive money. The payer also receives notice and may request a hearing on whether the assignment should remain in effect. The bill clarifies that the portion of the original assignment that was for any arrearages due is an assigned amount that does not require immediately effective withholding and that, if a payer accrues an arrearage by missing a payment, the assignment of the arrearage may be put into effect by providing notice to the payer and to a person from whom the payer receives or will receive money. The bill provides that, in addition to the court and the family court commissioner, the county child support agency may cause the assignment for arrearages to go into effect by sending the required notices.

Continues in effect after the person

Obligated to pay

The bill also provides that the wage assignment of a person who has been obligated to pay support or maintenance, ~~who no longer has a current obligation to pay support or maintenance~~, if the person has an arrearage in the payment of support or maintenance. The amount of the assignment may be up to the amount that the assignment was before the person's current obligation to pay support or maintenance terminated.

*** ANALYSIS FROM -0535/1 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

another situation under which the state may join in an action as a real party in interest

Under current law, in a number of situations the state may join in an action affecting the family (such as a divorce action or an action to enforce a child support order) as a real party in interest for purposes of establishing paternity or securing future support or reimbursement of aid paid. The most common situation is when a child or custodial parent of a child involved in the action is the recipient of certain services or benefits provided by the state. The bill adds ~~another situation~~ if a custodial parent involved in the action is receiving food stamp benefits.

Also under current law, an individual who is the custodial parent or, or who exercises parental control over, a child who has an absent parent is ineligible to receive food stamps if the individual does not fully cooperate in good faith with efforts to obtain support payments, if any, to which the child may have rights. The bill changes this criterion for ineligibility. Under the bill, such an individual is ineligible for food stamps if the individual fails to cooperate in establishing or enforcing a support order, if appropriate.

*** ANALYSIS FROM -0498/1 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

MA recipients

Under current law, the department of health and family services (DHFS) ~~receives health insurance information~~ to enable DHFS to identify ~~medical assistance beneficiaries~~ who are eligible, or who would be eligible as dependents, for health insurance coverage. ~~As part of its duty to provide the information within a reasonable period of time to the DHFS, the insurance carrier~~ must provide any information that it receives from a health insurer to the department of workforce development

health insurers must provide at the request of

The bill authorizes DHFS

(DWD). The two departments must agree on procedures to safeguard the confidentiality of the information.

*** ANALYSIS FROM -0412/2 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

The health insurance risk-sharing plan (HIRSP) provides major medical health insurance coverage for persons who are covered under medicare because they are disabled, persons who have tested positive for human immunodeficiency virus (HIV) and persons who have been refused coverage, or coverage at an affordable price, in the private health insurance market because of their mental or physical health condition. Also eligible for coverage are persons (called "eligible individuals") who do not currently have health insurance coverage, but who were covered under certain types of health insurance coverage for at least 18 months in the past. HIRSP offers its enrollees who are not eligible for medicare an annual choice of coverage option. Responsibility for administering HIRSP is split between the department of health and family services (DHFS) and a board of governors (board).

The bill makes various changes ~~to the law as it relates~~ to HIRSP. A person who is 65 years of age is not eligible for HIRSP coverage. ~~This provision does not apply however to eligible individuals.~~ The bill ~~adds another exception~~ a person who has HIRSP coverage on the date on which he or she attains age 65 does not lose eligibility for coverage because of his or her age.

~~HIRSP does not cover dental care except for certain types of oral surgery. In addition, HIRSP covers health care expenses that other insurers are required to cover under the statutes. The bill makes it clear that HIRSP covers treatment for the correction of temporomandibular disorders, which other insurers are required to cover under the statutes, even though the treatment may be considered dental care.~~

With certain exceptions, a person for whom a premium, deductible or coinsurance amount is paid by any governmental agency is not eligible for HIRSP coverage. ~~Under another statute DHFS is responsible for the cost of drugs for the treatment of HIV infection and for the treatment of acquired immunodeficiency syndrome (AIDS).~~ The bill provides that a person who receives ~~such a~~ ~~subsidy~~ is not ineligible for HIRSP coverage by reason of the reimbursement.

With certain exceptions, the deductible for coverage under HIRSP is \$1,000. HIRSP pays 80% of covered costs exceeding the deductible. After a covered person has paid \$2,000 in costs, including the deductible, in a calendar year, HIRSP pays 100% of the covered costs for the remainder of the calendar year. If more than one member of a family has HIRSP coverage, HIRSP pays 100% of covered costs after the family has paid \$4,000 in costs. The bill specifies these values for covered persons not eligible for medicare who choose the other coverage option that HIRSP offers. Under the other coverage option, the deductible is \$2,500. HIRSP pays 100% of the covered costs after a covered person has paid \$3,500 in costs in a calendar year. For a family with more than one covered person, HIRSP pays 100% of covered costs after the family has paid \$7,000 in costs.

Finally, the bill ~~changes~~ some of the board's responsibilities, such as establishing procedures for hearing grievances and collecting assessments from

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from 327/1

provides
that a

→ Except for an "eligible individual"

Reimbursement from DHFS

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ms. 83-PJK

insurers, ~~for those individuals who are~~ ^{and requires the} board ^{to} advise DHFS with respect to those responsibilities.

*** ANALYSIS FROM -0589/2 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

Under current law, the department of workforce development (DWD) certifies to the department of revenue (DOR) the names of individuals who are ~~delinquent~~ ^{delinquent} child or family support, maintenance, medical expenses of a child or birth expenses (support) ~~and who have failed to make one or more payments.~~ DOR uses the information to intercept income tax refunds that would be paid to those delinquent obligors. DWD provides the certifications that it makes to DOR to various specified state agencies that make grants or loans to individuals. Any individual who is the subject of such a certification is prohibited from receiving a grant or loan.

delinquent in the payment of

Also under current law, if an individual who has a court-ordered obligation to make periodic payments of support fails to make a payment, the amount of the delinquent support automatically becomes a lien against all of the individual's property. DWD is required to maintain a statewide support lien docket that lists the delinquent obligors and the amount of support that each owes. ~~DWD is required to provide a copy of the lien docket to each county register of deeds and each county child support agency.~~

The bill eliminates the requirement that DWD provide to the various specified state agencies the certifications that it provides to DOR. Instead, each agency is prohibited from making a grant or loan to an individual whose name ~~is included on the statewide support lien docket.~~ ^{is included on the statewide support lien docket.} ~~Individuals whose names are on the lien docket may still receive a grant or loan, however, if the individual provides to the agency a copy of a payment agreement that has been approved by a county child support agency for the payment of the delinquent support.~~

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*** ANALYSIS FROM -0271/4 ***

HEALTH AND HUMAN SERVICES

CHILDREN STATE SERVICES

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appears

Under current law, the state receives federal foster care and adoption assistance funding under Title IV-E of the federal Social Security Act (generally referred to as "IV-E funds"), in reimbursement of moneys expended by the state and the counties for activities relating to foster care and the adoption of children. ~~Currently, the department of health and family services (DHFS) distributes IV-E funds as community aids to counties for the provision of social services to children and families. Currently, if on December 31 of any year there remains unspent or unencumbered in the community aids basic county allocation an amount that exceeds the amount of IV-E funds allocated as community aids in that year (excess IV-E funds), DHFS must carry forward to the next year those excess IV-E funds and distribute not less than 50% of those excess IV-E funds to counties having a population of less than 500,000 for services and projects to assist children and families.~~

(counties other than Milwaukee County)

This bill requires DHFS to distribute as community aids to counties having a population of less than 500,000 any federal medical assistance (MA) funds received as reimbursement of moneys expended in counties having a population of less than 500,000 by the state and the counties for case management services provided to children who are recipients of MA (MA targeted case management funds). The bill also provides that, if on December 31 of any year there remains unspent or unencumbered in the community aids basic county allocation an amount that exceeds the combined amount of IV-E funds and MA targeted case management funds distributed as community aids in that year (excess IV-E and MA targeted case management funds), DHFS must carry forward to the next year those excess IV-E and MA targeted case management funds and distribute those excess funds to counties having a population of less than 500,000 for services and projects to assist children and families.

*** ANALYSIS FROM -0274/2 ***

~~HEALTH AND HUMAN SERVICES~~

~~CHILDREN~~

Under current law, the state receives federal foster care and adoption assistance funding under Title IV-E of the federal Social Security Act (generally referred to as "IV-E funds"), in reimbursement of moneys spent by the state and the counties for activities relating to foster care and the adoption of children. Currently, IV-E funds are credited to the community aids appropriation account of the department of health and family services (DHFS) and distributed to counties to provide social services for children and families. Currently, if on December 31 of any year there remains unspent or unencumbered in the community aids basic county allocation an amount that exceeds the amount of IV-E funds allocated as community aids in that year (excess IV-E funds), DHFS must carry forward to the next year those excess IV-E funds and distribute not less than 50% of those excess IV-E funds to counties having a population of less than 500,000 (counties) for services and projects to assist children and families.

This bill requires DHFS to establish and counties to implement a statewide automated child welfare information system (generally referred to as "WISACWIS") before July 1, 2006; permits DHFS, beginning on July 1, 2001, to distribute excess IV-E funds only to counties that are making a good faith effort to implement WISACWIS; and permits DHFS to recover from a county that does not implement WISACWIS before July 1, 2006, any excess IV-E funds distributed to that county after June 30, 2001.

*** ANALYSIS FROM -1548/4 ***

~~HEALTH AND HUMAN SERVICES~~

~~OTHER HEALTH AND HUMAN SERVICES~~

STET SUB-HEAD

DAK

Under current law, general purpose revenues fund services for adolescent parents that emphasize high school graduation and vocational preparation, training and experience (otherwise known as "adolescent self-sufficiency services"); pregnancy and parenthood prevention services to high-risk adolescents (otherwise known as "adolescent pregnancy prevention services"); in Milwaukee County,

PSK

that are received under the TANF block grant program and

services of an adolescent resource center and services related to development of adolescent parenting skills; and the provision of information to communities about problems of adolescents and information to and activities for adolescents to aid in skills development (otherwise known as "adolescent choices project grants").

This bill decreases general purpose revenues and provides program revenue-service moneys that are transferred from the department of workforce development (DWD) to the department of health and family services (DHFS) in the amount of that decrease, fund adolescent choices project grants. The bill eliminates general purpose revenues and substitutes program revenue-service moneys that are transferred from DWD to DHFS to fund adolescent self-sufficiency services and adolescent pregnancy prevention services. The bill supplements with the program revenue-service moneys the general purpose revenue funding in Milwaukee County, of services of an adolescent resource center and services related to development of adolescent parenting skills.

*** ANALYSIS FROM -1791/2 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

This bill provides that a portion of the moneys received by the state from Indian gaming compacts is to be transferred to the department of workforce development (DWD) for vocational rehabilitation services for Native American individuals and federally recognized tribes or bands.

*** ANALYSIS FROM -1604/4 ***

HEALTH AND HUMAN SERVICES

Under current law, the adolescent pregnancy prevention and pregnancy services board must award grants of general purpose revenues of not more than \$439,300 in each of fiscal years 1997-98 and 1998-99 to provide adolescent pregnancy prevention programs or pregnancy services.

This bill eliminates general purpose revenue funding for grants to provide adolescent pregnancy prevention programs or pregnancy services and, instead, funds the grants at up to \$439,300 in each fiscal year by creating an appropriation account of program revenue-service moneys that are transferred to the adolescent pregnancy prevention and pregnancy services board from the department of workforce development (DWD).

*** ANALYSIS FROM -1551/1 ***

HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

This bill provides that some of the moneys received by the state from Indian gaming compacts are to be transferred to the department of health and family services (DHFS) to fund the American Indian drug abuse prevention and education program.

*** ANALYSIS FROM -1550/1 ***

and to fund the delivery of social services and mental hygiene services to American Indians

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HEALTH AND HUMAN SERVICES

OTHER HEALTH AND HUMAN SERVICES

This bill provides that some of the moneys received by the state from Indian gaming compacts are to be transferred to the department of health and family services (DHFS) to fund the delivery of social services and mental hygiene services to American Indians.

*** ANALYSIS FROM -0483/4 ***

HEALTH AND HUMAN SERVICES

ALCOHOL AND OTHER DRUG ABUSE

Currently, each person ordered to pay a fine or forfeiture for ~~driving or~~ operating a motor vehicle while the person ~~has a prohibited alcohol concentration in his or her blood or while~~ under the influence of an intoxicant, controlled substance or any other drug ~~to a degree that renders the person incapable of safely driving~~ (OWI) is required to pay a driver improvement surcharge of \$340. A majority of the money collected from the driver improvement surcharge is ~~kept~~ in the county where the violation occurred ~~and is used~~ to provide alcohol and other drug abuse services to drivers who are referred for alcohol or other drug abuse assessment. The remainder of the money collected is paid to the state ~~treasury~~. Some ~~of the state~~ money ~~is~~ used to provide chemical testing training to law enforcement officers by the state traffic patrol. The remainder of the ~~state~~ money received by the state ~~is~~ allocated ^{by the secretary of administration} to various state agencies and the University of Wisconsin System for services related to OWI offenses. ~~These allocations are made by the secretary of administration after consultation with the secretaries of health and family services and transportation, the superintendent of public instruction, the attorney general and the president of the University of Wisconsin System.~~

Under this bill, of the money received by the state from the driver improvement surcharge, \$290,900 is transferred to the department of transportation (DOT) for the purchase of preliminary breath screening instruments. These instruments are used to test the breath of a person who is suspected of committing an OWI offense ~~before the person is arrested for that offense~~ to help determine if ~~additional testing is~~ appropriate.

*** ANALYSIS FROM -2077/1 ***

INSURANCE

The bill requires every managed care plan, which is, generally, a health care plan that requires insureds to obtain services from certain specified providers under contract with the health care plan, to offer at least one point-of-service coverage option in each geographical service area of the managed care plan. A point-of-service coverage option is defined in the bill as a coverage option under which an insured may obtain health care services that are paid for by the health care plan from a provider of his or her choice, regardless of whether that provider is a participating provider of the insured's health care plan or a member of the health care plan's provider network.

*** ANALYSIS FROM -1815/1 ***

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INSURANCE

The bill authorizes the office of the commissioner of insurance (OCI) to make a grant of not more than \$200,000 to a private organization for the establishment of private health insurance purchasing pools for small employers. (Generally, small employers are those with 50 or fewer employees.) The private organization must submit a business plan to OCI and the commissioner of insurance must approve the plan before the grant may be made. OCI and the private organization must enter into a written agreement concerning the use of the grant proceeds, and the private organization must submit a report to OCI on the use of the grant proceeds within 6 months after spending the proceeds.

(Commissioner)

*** ANALYSIS FROM -0503/P1 ***

INSURANCE

Under current law, policy forms for all types of insurance not exempted from the requirement by statute must be filed with the office of the commissioner of insurance (OCI) and approved prior to use. The bill allows the commissioner of insurance to exempt by rule from the requirement for prior filing and approval other classes of insurance policy forms.

*** ANALYSIS FROM -0506/2 ***

INSURANCE

The office of the commissioner of insurance (OCI) charges various fees for services that it provides, as well as for its regulation of the insurance industry. The bill changes a few of the fees related to insurance intermediaries.

Under current law, OCI charges an applicant for examination for a license as an insurance intermediary ~~the fee is set by the commissioner by rule, but not exceeding \$100 for regulating an intermediary~~ each year after the year in which the intermediary's license was initially issued. OCI charges a resident intermediary \$20 and a nonresident intermediary \$40. The bill changes all three of those fees to amounts set by the commissioner by rule. The bill also eliminates the fee charged an individual intermediary for assisting or enlarging the scope of the intermediary's license. The fee was set by rule of the commissioner, but not exceeding \$100.

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the amount of the fee that
and the amount of the fee for regulating an insurance intermediary which may result

*** ANALYSIS FROM -1256/P4 ***

LOCAL GOVERNMENT

OTHER LOCAL GOVERNMENT

Under current law, a county board may engage in zoning and land-use planning by creating a county planning agency or by designating a previously constituted county committee or commission as the county planning agency. If a county board creates or designates such an agency, the agency is required to direct the preparation of a county development plan for the physical development of the towns within the county and for the cities and villages within the county whose governing bodies agree to have their areas included in the county plan. The development plan may include a number of elements, such as comprehensive surveys, studies and analyses of the history, existing land-use, population and population density, economy, soil characteristics, wetland and floodplain conditions and other human and natural features of the county. The plan may identify goals

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which may be amended,

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and objectives for the future physical development of the county with respect to land-use issues, transportation issues, recreational facilities, ~~public buildings,~~ sanitary and storm water issues, waste disposal issues, ~~pollution issues, public and private utilities issues and other factors,~~ that will improve the physical and economic situation of the county. ~~The plan may be amended.~~

Also under current law, a city or village, or certain towns that exercise village powers, may create a city, village or town plan commission to engage in zoning and land-use planning. ~~If a city, village or town creates such a commission, the commission is required to adopt a master plan for the physical development of the city, village or town including in some instances, in the case of a city or village, unincorporated areas outside of the city or village which are related to the city's or village's development. The master plan, including maps, plats and charts is required to show the commission's recommendations for such physical development, including the location, character and extent of streets and highways, public places and areas, parks and other recreational facilities, sites for public buildings, airports, waterways, railroad and bus routes, sewers, water conduits and other public or private utilities, community centers, blighted districts and slum areas. The master plan must also contain a comprehensive zoning plan and may be amended.~~

Also under current law, regional planning commissions (RPCs) may be created by the governor or by a state agency or official that the governor designates, ~~upon the submission of a petition in the form of a resolution by the governing body of a city, village, town or county (political subdivision). A hearing on the petition is also required unless the governing bodies of all of the political subdivisions in the proposed region join in the petition. The governor may also create an RPC if the governing bodies of political subdivisions that in combination include more than 50% of the region's population and equalized assessed valuation of property consent to such a creation.~~ Currently, there are eight multicounty RPCs in the state, one RPC that consists only of Dane County and five counties that are adjacent to Dane County and are not in an RPC. ~~Generally, the membership composition of RPCs is specified by statute.~~

An RPC may conduct all types of research studies, ~~collect and analyze data and prepare maps, charts and tables to be used in accomplishing its duties, which include making plans for the physical, social and economic development of the region.~~ An RPC may also provide advisory services on regional planning problems to the political subdivisions within its region ~~and may act as a coordinating agency for programs and activities of such political subdivisions and other local agencies that relate to the RPC's planning objectives.~~ The RPC is also required to prepare a master plan for the physical development of the region, which shall contain the RPC's recommendations for such physical development. The elements of an RPC's master plan are the same as the elements contained in a master plan developed by a city, village and certain towns, although all of an RPC's functions are solely advisory to the political subdivisions that comprise the region.

This bill changes the current law requirements that must be contained in a county development plan or a city, village, town or RPC master plan. Under the bill, all such plans must have all of the following elements:

which results in the adoption of

which may be amended,

in response to a resolution submitted by the governing body of a city, village, town or county (political subdivision)

S.S. from p. 133

and the governor may dissolve an RPC by the request of a majority of the local governments in the region

and mak

1. An issues and opportunities element, which contains background information on the local governmental unit (a political subdivision or an RPC) and a statement of objectives, policies, goals and programs of the local governmental unit to guide the future growth and development of the local governmental unit over a 20-year planning period. ~~This element includes population, demographic, economic and employment forecasts, trends and characteristics. This element may also include background information on nearby local governmental units.~~

2. A housing element that contains information on the local governmental unit's housing stock and plans for housing for residents with all income levels and various needs.

3. A transportation element that addresses transportation issues and evaluates the relationship between the local governmental unit's transportation plans and state and regional transportation plans.

4. A utilities and community facilities element to guide the development of public and private utilities, governmental services and community facilities.

5. A natural and cultural resources element to guide the development of conservation policies for, and the effective management of, natural, historic and cultural resources.

6. An economic development element that promotes the stabilization, retention or expansion of the economic base of, and quality employment opportunities in, the local governmental unit.

7. An intergovernmental cooperation element that provides for joint planning and decision making with other jurisdictions.

8. A land use element to guide the future development and redevelopment of public and private property in the local governmental unit.

9. An implementation element that contains programs and specific actions to be completed in a stated sequence, including proposed changes to any applicable zoning ordinances, building codes or subdivision ordinances, to implement the other elements.

The bill does not, however, require a local governmental unit to take any specific action at any particular time. If a local governmental unit that has not created a development plan or a master plan before the effective date of the bill does so, or amends an existing plan after the effective date of the bill, the new elements of a development plan or master plan that are contained in the bill must be used.

***** ANALYSIS FROM -1641/P4 *****

~~LOCAL GOVERNMENT~~

~~OTHER LOCAL GOVERNMENT~~

Under current law, most towns may incorporate as a city or village only after following certain procedures and receiving approval for the incorporation from a circuit court and from the department of administration (DOA). The circuit court must review the incorporation petition to ensure compliance with procedural and signature requirements and must make several determinations relating to minimum area and population density requirements of the area to be incorporated. This bill reduces the minimum area requirements from four square miles to three square miles under certain circumstances. ~~DOA must determine whether certain~~

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review and very limited circuit court reviews

~~requirements relating to the overall characteristics of the territory and the characteristics of the territory beyond the most densely populated area of the territory are met. DOA must also determine whether the proposed incorporation is in the public interest based on present and potential sources of tax revenue in the proposed city or village, the level of governmental services that are provided or needed and the impact of the proposed incorporation on the remainder of the town and on the surrounding metropolitan community.~~

Current law also allows any combination of cities, villages or towns (municipalities) to determine the boundary lines between them under a cooperative plan that is approved by DOA.

This bill authorizes municipalities that enter into a cooperative plan to include as part of the plan the incorporation of all or part of a town into a city or village. Because an incorporation that is part of a cooperative plan may not take effect unless it is approved in a referendum, such a plan must include a contingency cooperative plan that will take the place of the plan if the proposed incorporation is defeated in the referendum. *An incorporation as part of a cooperative plan is subject to DOA*

~~If a cooperative plan includes a proposed incorporation, a circuit court's review of the incorporation petition is limited to a review of the procedural and signature requirements, and DOA is not required to make any of the determinations it would otherwise be required to make if the incorporation petition was not part of a cooperative plan. Under the bill, DOA is still required to determine whether the cooperative plan, including the proposed incorporation, meets certain statutory requirements and whether the proposed incorporation is in the public interest. In making the public interest determination, DOA may apply the standards that are required if a proposed incorporation is not part of a cooperative plan.~~

*** ANALYSIS FROM -1007/P9 ***

~~LOCAL GOVERNMENT~~

~~OTHER LOCAL GOVERNMENT~~

Under current law, a city, village, town or county (political subdivision) may create an environmental remediation tax incremental district (ERTID) to defray the costs of remediating contaminated property that is owned by the political subdivision. The mechanism for financing costs that are eligible for remediation is very similar to the mechanism under the tax incremental financing (TIF) program. If the remediated property is transferred to another person and is then subject to property taxation, environmental remediation (ER) tax incremental financing may be used to allocate some of the property taxes that are levied on the property to the political subdivision to pay for the costs of remediation.

Under this bill, ER tax incremental financing may be used to defray the costs of remediating contaminated property that is owned by private persons.

Before the political subdivision may use ER tax incremental financing, however, it must create a joint review board that is similar to the current law tax incremental district (TID) joint review board, or a city or village may use an existing TID joint review board, to review the political subdivision's proposal to remediate environmental pollution. If the joint review board approves the proposal, the political subdivision may proceed with its plan. An ERTID joint review board is

INS. from P. 137

made up of one representative chosen by the school district that has power to levy taxes on the property that is remediated, one representative chosen by the technical college district that has power to levy taxes on the property, one representative chosen by the county that has power to levy taxes on the property that is remediated, one representative chosen by the political subdivision and one public member.

a number of documents relating to the costs incurred, if any, by

A political subdivision that has incurred "eligible costs" to remediate environmental pollution on a parcel of property may apply to the department of revenue (DOR) to certify the "environmental remediation tax incremental base" (ERTIB) of the parcel. DOR is required to certify the ERTIB if the political subdivision submits to DOR all of the following: 1) a statement that the political subdivision has incurred eligible costs, detailing the purpose and amount of the expenditures, and including certification of the department of natural resources (DNR) that the ER has been completed; 2) a statement that all taxing jurisdictions with authority to levy general property taxes on the parcel of property have been notified that the political subdivision intends to recover its ER costs by using an ER tax increment; and 3) a statement that the political subdivision has attempted to recover its ER costs from the responsible party.

Under the bill, the environmental remediation does not need to be completed before a political subdivision may ask DOR to certify the ERTIB. The political subdivision is required, under the bill, to submit to DOR a statement that the political subdivision has incurred some eligible costs and includes with the statement a detailed proposed remedial action plan that contains cost estimates for anticipated eligible costs. The political subdivision is also required to include certification from DNR that the department has approved the site investigation report that relates to the parcel.

"Eligible costs" are ~~capital~~ ^{related to} costs of financing costs and administrative and professional service costs for the removal, containment or monitoring of, or the restoration of soil or groundwater affected by, environmental pollution. Eligible costs are reduced by any amounts received from persons who are responsible for the discharge of a hazardous substance on the property to pay remediation costs and by the amount of net gain on the sale of the property by the political subdivision. The "ERTIB" of the property is the property's equalized value on the January 1 preceding the date on which DNR certifies that the property has been properly remediated.

The bill changes the definition of eligible costs to include property acquisition costs, costs associated with the restoration of air, surface water and sediments affected by environmental pollution, demolition costs including asbestos removal, and removing and disposing of certain abandoned containers. The bill reduces eligible costs by any amounts received, or reasonably expected by the political subdivision to be received, from a local, state or federal program for the remediation of contamination in the district that do not require reimbursement or repayment. The bill also requires that an ERTIB be created on contiguous parcels of property. The bill expands from 16 to 23 years the period of certification which is the maximum number of years that DOR may certify the ERTIB and eligible costs may be paid. Under the bill, a political subdivision is authorized to use an ER tax increment to pay

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the cost of remediating environmental pollution of groundwater without regard to whether the property above the groundwater is owned by the political subdivision.

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Pg 129

the cost of remediating environmental pollution of groundwater without regard to whether the property above the groundwater is owned by the political subdivision.

*** ANALYSIS FROM -0866/P1 ***

LOCAL GOVERNMENT

OTHER LOCAL GOVERNMENT

Under current law, regional planning commissions (RPCs) may be created by the governor, or by a state agency or official that the governor designates, upon the submission of a petition in the form of a resolution by the governing body of a city, village, town or county (local governmental unit). A hearing on the petition is also required unless the governing bodies of all of the local governmental units in the proposed region join in the petition. The governor may also create a RPC if the governing bodies of local governmental units that in combination include more than 50% of the region's population and equalized assessed valuation of property consent to such a creation. Currently, there are eight multi-county RPCs in the state, one RPC that consists only of Dane County and five counties that are adjacent to Dane County and are not in a RPC.

Generally under current law, the membership composition of RPCs is specified by statute. If a multi-county region does not contain a 1st class city (presently only Milwaukee), however, the local governmental units that constitute the RPC may determine the membership composition by resolutions passed by a majority of the local governmental units in the region that contain at least half of the population of the region. If such resolutions do not pass, the RPC's membership composition follows the statute that applies to an RPC that contains a 1st class city.

Also under current law, the governor may dissolve a RPC upon receipt of resolutions recommending dissolution adopted by the governing bodies of a majority of the local governmental units in the region, including the county board of any county within the region, and upon a finding that all outstanding indebtedness of the RPC has been paid and all unexpended funds returned to the units that supplied them, or that other adequate measures have been taken regarding the RPC's finances.

This bill changes the membership composition of the Dane County RPC on the 31st day after the effective date of the bill, and dissolves the commission on December 31, 2001. Under the bill, all of the members of the Dane County RPC are appointed by the governor from lists submitted by the Dane County executive, the mayor of the city of Madison and associations representing third and fourth class cities, villages and towns. If the Dane County RPC has any outstanding debt on the date of its dissolution, that debt is assessed to Dane County. The bill also requires the five boards of the counties that are not in a RPC, and the Dane County board, to vote on whether they want to participate in a new multi-county RPC. If at least two-thirds of the voting counties approve, the new RPC becomes effective on January 1, 2002. The bill also specifies that the membership composition of all RPCs that are created after December 31, 2001, that include a county that contains a 2nd class city shall follow the same statute that sets the membership composition for a RPC that contains a 1st class city. Finally, the bill prohibits after December 31, 2001, the creation of a RPC that consists of only one county.

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MOVE TO
Pg. 129

INS TO Pg 132 MES

INS. MOVE TO Pg. 132

This bill changes current law by clarifying that the joint review board consists of one representative from each of the taxing jurisdictions that has power to levy taxes on the property in the ERTID.

Also under current law, if more than one school district, more than one technical college district or more than one county has the power to levy taxes on the property that is remediated, the unit in which is located property that has the greatest value shall choose that representative to the board. Under the bill, a similar provision is made if more than one city, village or town has the power to levy taxes on the property that is remediated.

*** ANALYSIS FROM -1399/2 ***

NATURAL RESOURCES

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FISH, GAME AND WILDLIFE

INSERT FROM Pg. 135

Certain persons

This bill changes the fees charged by the department of natural resources (DNR) for certain hunting and fishing approvals. For hunting, the bill increases the fees for all resident hunting licenses except turkey hunting licenses and small game hunting licenses issued to senior citizens, to minors aged 12 to 17 and to certain members of the armed forces. The bill increases the fees for all nonresident hunting licenses except turkey hunting licenses. The bill also increases the fees for trapping licenses, bonus deer hunting permits and wild turkey hunting stamps. The bill decreases the fee for pheasant hunting stamps.

For fishing approvals, the bill increases the fees for resident annual fishing licenses and fishing licenses issued jointly to resident married couples. The bill increases the fees for all nonresident fishing licenses except two-day sports fishing licenses. The bill increases the fee for sturgeon spearing licenses. The bill decreases the fees for inland waters trout stamps and Great Lakes trout and salmon stamps.

The bill also increases the fees for most duplicate hunting licenses and for duplicate fishing licenses.

*** ANALYSIS FROM -0184/1 ***

MGG

NATURAL RESOURCES

FISH, GAME AND WILDLIFE

licenses for

This bill increases the fees charged by the department of natural resources (DNR) for certain wild animal farm licenses. The bill increases the fee for a pheasant and quail farm license, a game bird and animal farm license, a deer farm license and a wildlife exhibit license. The bill also increases the late fee for a license for a pheasant and quail farm, a game bird and animal farm and a fur animal farm.

This bill also authorizes DNR to impose surcharges for the following licenses:

1. Licenses for game bird and animal farms on which there are bears or cougars
2. Licenses for game bird and animal farms on which the licensee permits an individual to hunt game birds for a fee.
3. Licenses for game bird and animal farms on which the licensee permits an individual to hunt grouse.

34. Licenses for game bird and animal farms on which the licensee sells game animals, the gross revenue from which is \$10,000 or more in the preceding license year.

game farms, except animal fur farms, and for wildlife exhibits.