

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. SB45

OR
SUBJECT Family Care

Holly Melchert
(NAME)
1317 Laurel Ct
(Street Address or Route Number)

Quinda WI 54155
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. SB45

OR
SUBJECT Long-Term Care
(on back)

Laurie Brodhagen
(NAME)
3236 Wabenoor Dr
(Street Address or Route Number)

Green Bay WI 54301
(City and Zip Code)

(Representing) Aging Resource Center

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. S. 45

OR
SUBJECT _____

Henry Finckoff
(NAME)
2065 Passover Dr
(Street Address or Route Number)

Green Bay WI 54304
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. SB 45

OR

SUBJECT _____

(NAME) Henry A. Wallace
1815 Beethoven - large
(Street Address or Route Number)

Green Bay, WI 54311
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. SB 45

OR

SUBJECT _____

(NAME) Sue Judy
1707 Delaware St.
(Street Address or Route Number)

Sturgeon Bay, WI 54235
(City and Zip Code)

(Representing) Tobacco Settlement money

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. SB 45

OR

SUBJECT Medicaid

(NAME) Jeff Krulmer
Stev's Pharmacy 934 main
(Street Address or Route Number)

Green Bay, WI 54301
(City and Zip Code)

(Representing) Pharmacy + WA Receipt

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22

BILL NO. SB 45

OR
SUBJECT Family Care

Richard Sicchio

(NAME)

1663 E Fence Ln Rd

(Street Address or Route Number)

Winnona WI

(City and Zip Code)

Northwestern Area Agency on Aging

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 22 Mar 95

BILL NO. SB 45

OR
SUBJECT Wanda Sutterson

NAME

Patricia Funder-Stone

(NAME)

985 W. Barnaby-DeBor

(Street Address or Route Number)

Winnona WI 54405

(City and Zip Code)

Wm. Le Societe / Wm. Le Societe Assn

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 22 MAR 95

BILL NO. SB 45

OR
SUBJECT LTC

MAX R. Dixon

(NAME)

19851 Meadow Rd

(Street Address or Route Number)

318 Woodward WI 54405

(City and Zip Code)

AAAP

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger **PROMPTLY**

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-9-99

BILL NO. Senate Bill 45

OR

SUBJECT _____

Stephen Seybold
(NAME) Howwe Inc. of WI
604 S. Welsh St.
(Street Address or Route Number)

Wittenberg WI 54409
(City and Zip Code)

Howwe Inc. of WI / WASHA
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. SB 45

OR

SUBJECT _____

Scott McFarlane
(NAME) 1
(Street Address or Route Number)

WISCONSIN DEPT. OF VETERANS AFFAIRS
(City and Zip Code)

WDA
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/1/99

BILL NO. 45

OR

SUBJECT _____

Julie Bemis
(NAME) 6905 Old Hwy 18
(Street Address or Route Number)

Stevens Point WI 54481
(City and Zip Code)

MINISTATE INDEPENDENT LIVING CENTERS
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. SB 45

OR

SUBJECT BUDGET

PSC

(NAME) Tom Engers

(Street Address or Route Number) 6602 Norwena Ln

(City and Zip Code) Madison WI

(Representing) 1) STA

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/11/99

BILL NO. SB 45

OR

SUBJECT Womens Issues

(NAME) Wm D Klein

(Street Address or Route Number) 218 Cottage St

(City and Zip Code) SPARTA 54656

(Representing) Rep of Veterans Affairs

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. SB 45

OR

SUBJECT _____

(NAME) Thomas H Taylor

(Street Address or Route Number) 1836 South Avenue

(City and Zip Code) La Crosse WI

(Representing) Superior Lutheran

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. _____

OR

SUBJECT SR45

Family Care

(NAME) Le Anne Johnson

(Street Address or Route Number) 735 Baxton Pl, A911

(City and Zip Code) Madison WI 53715

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. SR45

OR

SUBJECT Family Care

(NAME) Donna M O'Brien

(Street Address or Route Number) 735 Baxton Pl A4611

(City and Zip Code) Madison 53715

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. SB-45

OR

SUBJECT Health Care

(NAME) Joe Kunz

(Street Address or Route Number) 201 S. Park St Apt. 9

(City and Zip Code) Madison WI 53715

(Representing) Self

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. SB 45

OR

SUBJECT Energy Policy in

Gov's Budget Bill.

David Roklunkoski

(NAME)

1602 S. Park St. # 104

(Street Address or Route Number)

Madison, WI 53715

(City and Zip Code)

IBEW Local 2304

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. SB 45

OR

SUBJECT Long Term Care

Recreation

Devon Christensen

(NAME)

300 S. Adams

(Street Address or Route Number)

Green Bay WI 54301

(City and Zip Code)

Agins Resource Center

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-22-99

BILL NO. SB 45

OR

SUBJECT 1999-2001 Budget Bill

Rob Bohm

(NAME)

816 Memorial Drive

(Street Address or Route Number)

Sturgeon Bay, WI

(City and Zip Code)

Myself

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: March 24 1999

BILL NO. Budget Bill

OR
SUBJECT Oppose FamilyCare

in present form

Frances Bicknell

(NAME) 9 Beach St

(Street Address or Route Number) W Madison 53711

(City and Zip Code) Madison WJ 1

(Representing) Alison Sec. of WI

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Written testimony

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 03-24-99

BILL NO. CIRP-100PP Funds

OR
SUBJECT ME WANT THE

WATER TO BOWIE

THE PERSYBTO COMMUNITY

(NAME) JEFFERSON

(Street Address or Route Number) 2707A B D S E R L A H E

(City and Zip Code) MADISON 53713

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. _____

OR
SUBJECT Health, etc

FOR FASTER

I am Fraser's Staff member

(NAME) 5900 Monona Dr. #400

(Street Address or Route Number)

(City and Zip Code) Madison 53716

(Representing) Col. Tom of WI Army Guard

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 24 MARCH 99

BILL NO. _____
OR
SUBJECT Budget Brief (DMA)

Ms. Jim Blaber
(NAME)
2400 WRIGHT ST
(Street Address or Route Number)

MADISON WI 53708
(City and Zip Code)
DEPT. OF MILITARY AFFAIRS
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. _____
OR
SUBJECT 1999-01 Budget

STEVEN J. BENDERICK
(NAME)
2400 WRIGHT ST
(Street Address or Route Number)

MADISON 53704
(City and Zip Code)
DEPT. OF MILITARY AFFAIRS
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. Budget Bill
OR
SUBJECT Oppose Funding

Proposed
(NAME)
Margherita Helgeson
(Street Address or Route Number)

11 Jackson St
(City and Zip Code)
Madison, WI 53705
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. Budget

OR

SUBJECT _____

(NAME) Bert Gammie

(Street Address or Route Number) _____

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. _____

OR

SUBJECT Budget Bill -

Public Service Commission

(NAME) Jeffrey (Be) Crand

(Street Address or Route Number) _____

(City and Zip Code) Menominee WI 53702

(Representing) Budget Service Commission

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. _____

OR

SUBJECT _____

(NAME) Bob Deist

(Street Address or Route Number) _____

(City and Zip Code) Madison 53714

(Representing) Wage Reimbursement for Personal Care

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. _____

OR

SUBJECT Family Care

Grubbs Bill

DALE BRUNN

(NAME)

3015 Sheboygan Ave #11

(Street Address or Route Number)

Madison WI 53715

(City and Zip Code)

Representing) of A.C. Wine Club.

(Representing)

Speaking in Favor:

with attendance

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-24-99

BILL NO. Budget

OR

SUBJECT Family Care

Ellen Reberhorst

(NAME)

33 S. Midvale Blvd

(Street Address or Route Number)

Madison WI 53705

(City and Zip Code)

ARRP

(Representing)

Speaking in Favor:

Family Care

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/24/99

BILL NO. _____

OR

SUBJECT Budget Bill

Energy Related Issues

Forrest Ceel

(NAME)

18 W 22520 Johnson Dr

(Street Address or Route Number)

Waukesha WI 53186

(City and Zip Code)

F B E W 2150

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. _____
OR _____

SUBJECT ~~_____~~

HFS-83, Licensing fees

Background vs Long Term Care

(NAME)

John Bernier

(Street Address or Route Number)

3038 Maple Dr.

(City and Zip Code)

La Crosse, Wis.

(Representing) La Crosse Area Assisted Living Assoc

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY.

Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-7-99

BILL NO. _____
OR _____

SUBJECT Family Care

HFS 83, Grimbacker

Kim Lonnell

(NAME)

13114th Avenue

(Street Address or Route Number)

Onalaska WI

(City and Zip Code)

(Representing) Sagen Lendire

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY.

Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. Budget Bill
OR _____

SUBJECT Health Care

Hospital reimbursement

Peter St. Reshot

(NAME)

2 East Madison St.

(Street Address or Route Number)

Madison 53703

(City and Zip Code)

(Representing) Mrs. Heather Hoyt-McCann

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. _____

OR

SUBJECT Home Health / Family Care

Stephanie Genz

(NAME)

2204 German Ct.

(Street Address or Route Number)

Onalaska WI 54650

(City and Zip Code)

La Crosse County Health Dept

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only:

Neither for nor against:

Please return this slip to a messenger PROMPTLY

Senate Sergeant-At-Arms
State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. _____

OR

SUBJECT PDS Mandate

Patrick Killen

(NAME)

2129 King St.

(Street Address or Route Number)

La Crosse WI 54601

(City and Zip Code)

Gundersen Lutheran Health Plan

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only:

Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99 Clark?

BILL NO. _____

OR

SUBJECT Budget B.11

Frank Decker

(NAME)

614 So Rock

(Street Address or Route Number)

Onalaska, WI 54665

(City and Zip Code)

Bethel Home v SCS

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only:

Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8

BILL NO. _____

OR

SUBJECT _____

TOBACCO #
- LEAD POISONING
- DENTAL CARE
- WIC
- PUBLIC HEALTH
FUNDING

Doug MORRIS RPH

(NAME)

216 VINE

(Street Address or Route Number)

LACROSSE WI 54601

(City and Zip Code)

LACROSSE COUNTY HEALTH

(Representing)

DEPT

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. _____

OR

SUBJECT _____

Gov. Budget #
Health Care Expects

Jack M. LOCKMART, M.D.

(NAME)

1836 S. AVE

(Street Address or Route Number)

LACROSSE, WI

(City and Zip Code)

State Med. Society of WI

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. _____

OR

SUBJECT _____

Governor's Budget

Jim EITE

(NAME)

3501 Park Lane Dr

(Street Address or Route Number)

Lacrosse WI: 54601

(City and Zip Code)

Residents of Staff of All Wisconsin Health

(Representing)

N Care Center

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. _____

OR

SUBJECT Biennial Budget

Chock Wilbeck

(NAME)

709 OTTAWA TR

(Street Address or Route Number)

MADISON

(City and Zip Code)

DEPT OF HEALTH & FAMILY SVC

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7862
Madison, WI 53707-7862

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. _____

OR

SUBJECT POS MANDATE

THOMAS M. LYNCH

(NAME)

WISCONS INNSBRUCK RD

(Street Address or Route Number)

WEST SALEM WI 54689

(City and Zip Code)

GATED LAKEVIEW HEALTH PLAN

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7862
Madison, WI 53707-7862

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-8-99

BILL NO. _____

OR

SUBJECT Public Hearings

Nursing Home Budget

MICHAEL O. KITTELSON

(NAME)

P O BOX 202

(Street Address or Route Number)

BELLEVUE WI

(City and Zip Code)

Grand View Care Center

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7862

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-9-99

BILL NO. _____

OR

SUBJECT Medical Assistance

Personal Care Services

Arthur R. Peltz

(NAME)

3045 N. 6th St

(Street Address or Route Number)

Alwaukee WI 54403

(City and Zip Code)

UNA Home Health

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. _____

OR

SUBJECT MA. voters for

Personal Care Workers

Fred S. Hanson

(NAME)

565 Pine St.

(Street Address or Route Number)

Meelford WI 54451

(City and Zip Code)

Wisconsin Homecare Org.

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. _____

OR

SUBJECT TRUST CAMPAIGN -

TOBACCO SETTLEMENT

Low Neuman

(NAME)

1111 N 110th St

(Street Address or Route Number)

WAUSAU, WI 54403

(City and Zip Code)

All Public Health Assoc.

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. _____

OR

SUBJECT Wage Pass Through

Peggy Jones
(NAME)

1111 Wisconsin Court
(Street Address or Route Number)

Wausau, WI 54401
(City and Zip Code)

Wausau Mayor
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/8/99

BILL NO. _____

OR

SUBJECT Early Care

Peggy Jones
(NAME)

1111 Wisconsin Court
(Street Address or Route Number)

Wausau, WI 54401
(City and Zip Code)

Wausau Mayor
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: March 9, 1999

BILL NO. _____

OR

SUBJECT Tobacco Settlement

Judy Emerick
(NAME)

157 Ethel St
(Street Address or Route Number)

Wausau WI 54403
(City and Zip Code)

Wausau Health Dept
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. _____
OR
SUBJECT 2000-2001 Budget

Senate Committee on Health, Veterans & Public Safety

HARRY POKORNY
(NAME)

1902 TEMPERACK ST.
(Street Address or Route Number)

PLOVE R, WI 52967
(City and Zip Code)

*Washington County Coalition of Aging
& WAG*
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. _____
OR
SUBJECT State Budget Bill

Ann Boltz
(NAME)

425 Pine Ridge Blvd.
(Street Address or Route Number)

Wausau WI 54401
(City and Zip Code)

Community Health Care, Inc
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/9/99

BILL NO. _____
OR
SUBJECT Family Care

*Wage Pass Through for
M. H. E. 10/10/99*

Mary Ellen Schreiber
(NAME)

1019 E. Wisconsin Ave
(Street Address or Route Number)

Wausau WI 54403
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. _____

OR

SUBJECT COP/CI P Funding

↳ see reverse

Steve Nooyen

(NAME)

1171 Drews Dr.

(Street Address or Route Number)

De Pere WI 54115

(City and Zip Code)

Home Instead Senior Care

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-9-99

BILL NO. _____

OR

SUBJECT STATE BUDGET

Pos Provision

Ken Peterson

(NAME)

2000 Westwood Ave

(Street Address or Route Number)

Wausau WI 54401

(City and Zip Code)

Wausau Insurance Cos

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-9-99

has 10am meeting to get to

BILL NO. _____

OR

SUBJECT STATE BUDGET

Pos Provision

Andy Franken

(NAME)

2000 Westwood Av

(Street Address or Route Number)

Wausau WI

(City and Zip Code)

Wausau Ins. Cos

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. _____

OR

SUBJECT Health Care

(NAME) Donna Bunker

(Street Address or Route Number) 1555 Dorrman St.

(City and Zip Code) Green Bay Wis. 54303

(Representing) Green Bay Housing Center

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. _____

OR

SUBJECT TRUST

Tobacco Reduction Using

(NAME) The Settlement

(Street Address or Route Number) 112 Schauer Ln

(City and Zip Code) Green Bay 54304

(Representing) American Heart Assoc. Bellin Hosp.

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. _____

OR

SUBJECT Family Long Term

Care Red.

(NAME) Jeff Matzko

(Street Address or Route Number) 241 Swanstone Circle

(City and Zip Code) De Pere WI 54115

(Representing) Unity Hospice

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. _____
OR _____

SUBJECT Committee on Health, Education, Veterans & Military Affairs

(NAME) Ann Cornelius

(Street Address or Route Number) W730 Fish Creek Rd

(City and Zip Code) De Pere WI 54115

(Representing) Brenda Tribe

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

FAMILY CARE
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/22/99

BILL NO. _____
OR _____

SUBJECT Family Care Long Term Care for Elderly

(NAME) Monica Johnson

(Street Address or Route Number) 824 Woodside Dr

(City and Zip Code) Segona WI 54165

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

adding funding for transportation, car
Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-23-99

BILL NO. _____
OR _____

SUBJECT Long Term Care

(NAME) Shelton Schwartz

(Street Address or Route Number) _____

(City and Zip Code) 159 Apple Tree Ct
C44788

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: March 24th 1999

BILL NO. AB 133/SB 45

OR

SUBJECT Confirmation Hearing
and Budget Briefing

Secretary Bebeau
(NAME)

(Street Address or Route Number)

(City and Zip Code)

DHS

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. _____

OR

SUBJECT Family Care

Romer Rabe
(NAME)

(Street Address or Route Number)

(City and Zip Code)

De Pere WI 54115

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3-22-99

BILL NO. _____

OR

SUBJECT Family Care,
in-home services for

elderly, AFCSF funds -
(NAME) Alzheimer's

(Street Address or Route Number)

(City and Zip Code)

6175 Old Settler's Rd

Damark WI 54208

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information
only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O. Box 7882
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State Senator
Chuck Chvala
SENATE MAJORITY LEADER

March 1, 1999

The Honorable Rodney Moen
Wisconsin State Senator
Rm. No. 8 South, Capitol
Madison, WI 53706

Dear Senator Moen:

The Senate Committee on Organization has approved your request for the Members of the Senate Committee on Health, Utilities and Veterans and Military Affairs to travel to La Crosse, Wisconsin on March 8, 1999 and Wausau, Wisconsin on March 9, 1999, in order to hear public testimony on provisions included in Senate Bill 45, the State Budget Bill.

It is the Committee's understanding that you are seeking reimbursement for all actual and necessary expenses associated with the committee members' attendance at these hearings. It is further understood that you are seeking approval for additional staff support from the Senate Sergeant-at-Arms, if required.

Your request has been approved contingent upon the Senate not being in session. Please let me know if you have any questions.

Sincerely,

A handwritten signature in black ink that reads "Chuck Chvala".

CHUCK CHVALA
Chairman
Senate Committee on Organization

State Capitol, Post Office Box 7882, Madison, WI 53707-7882 ■ Phone: (608) 266-9170 ■ Fax: (608) 266-5087

Legislative Hotline (Toll-Free) 1-800-362-WISC (9472) ■ E-Mail: chuck.chvala@legis.state.wi.us

World Wide Web: <http://www.legis.state.wi.us/senate/sen16/sen16.html>

Gundersen Lutheran

March 8, 1999

Senator Rodney C. Moen, Chair and
Members of the Senate Health, Utilities
Veterans and Military Affairs Committee
State Capitol, Room 8 South
P. O. Box 7882
Madison, WI 53707-7882

RE: Governor's Budget Bill -- Senate Bill 45

Dear Senator Moen:

On behalf of Gundersen Lutheran, Inc. and its health care affiliates, thank you for giving me the opportunity to appear before you today to discuss certain aspects of the Governor's proposed biennial budget, which has been introduced as Senate Bill 45. With this letter, we will outline several key concerns that we have concerning the bill, as introduced:

I. GENERAL OVERVIEW.

The Governor's proposed biennial budget would result in Wisconsin hospitals losing \$13.8 million in Medicaid funding. When combined with the impact of current Medicare cuts at the federal level, this will result in millions of dollars in health care costs being shifted to private health care users in Wisconsin, including those who have insurance and those who do not. Like the Wisconsin Health and Hospital Association ("WHA"), we believe that this is not only unreasonable, but also unacceptable.

In the context of Gundersen Lutheran and, in particular, our primary hospital affiliate, Lutheran Hospital - La Crosse, Inc., approximately 50 percent of all patients seen are covered by Medicare and Medicaid. The Governor's proposed two-year freeze in the Medicaid rate for inpatient care, and his proposed 1 percent increase in the Medicaid rate for outpatient care in the first year of the biennium, will leave Lutheran Hospital with no alternative but to increase rates accordingly for all other non-Medicare, non-Medicaid patients. In light of declining rates over the last several years, Lutheran Hospital already had to raise its rates 6.4 percent for calendar year 1999 for non-Medicare and non-Medicaid patients in order to cover the anticipated 2 ½ to 3 percent

Gundersen Clinic, Ltd.

1836 South Avenue • La Crosse, Wisconsin 54601 • (608) 782-7300 • (800) 362-9567

per year increase in overhead expenses. The Governor's budget will force us to the same thing in calendar year 2000 and thereafter.

More importantly, the Governor's proposed biennial budget will result in a dramatic loss of federal funds for the State of Wisconsin, further eroding the amount of federal funds that come back into this state. In that regard, federal funding covers 60 percent of the cost of the Medical Assistance Program. For every \$1.00 lost in state funding for this program, the State of Wisconsin stands to lose \$1.50 in federal dollars. Again, we view this as unacceptable.

II. GRADUATE MEDICAL EDUCATION.

For years, Gundersen Lutheran and its affiliates have sponsored a graduate medical education program in La Crosse, Wisconsin, with a particular emphasis on training rural health care providers. During the period of 1990 to 1999, 221 residents have graduated from Gundersen's residency program. Of those graduates, 55 percent have remained in the Tri-State area providing health care for rural constituents in western Wisconsin, southeastern Minnesota, and northeast Iowa. 60 graduates of our graduate medical education program -- more than 27 percent -- have remained in western Wisconsin, providing health care for rural constituents ranging from Prairie du Chien to the south, Richland Center and Mauston to the east, and Black River Falls and Whitehall to the east. Indeed, we have found our graduate medical education program to be essential to our efforts to provide Wisconsin's rural citizens with quality health care.

The Governor's proposed budget would reduce the funding needed to support Wisconsin's residency programs by \$3.6 million in federal funds and \$2.5 million in state funds. We believe that this reduction will have a major adverse impact upon the efforts of Gundersen Lutheran and other Wisconsin health care providers to train, recruit and keep physicians. We strongly encourage you to restore this funding.

III. CRIMINAL BACKGROUND CHECK LAW.

During the last biennium, the Legislature adopted legislation that, effective October 1, 1998, required all Wisconsin health care providers to conduct criminal background checks on all new employees and independent contractors who have access to patients, no matter how remote such contact or access may be. Effective October 1, 1999, health care providers will be required to conduct such criminal background checks on all existing employees.

Though well-intentioned, Wisconsin's criminal background check statute has become a nightmare for Wisconsin health care providers and the employees and contractors who help them provide health care services. Gundersen Lutheran and its affiliates employ more than 6,000 employees in the State of Wisconsin. The absence of clear parameters in the legislation, limiting it to those employees and contractors who

provide direct patient care, as well as the time, effort and expense associated with conducting criminal background checks on all employees and contractors is extremely burdensome. In the face of declining federal and state health care dollars, moreover, this burden is unreasonable. Since the Governor's budget does not adequately address this problem, we respectfully request that you do so in the legislature.

IV. MEDICAID FRAUD.

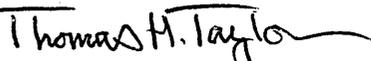
As many of you are aware, it has become popular for government officials to view those who are engaged in health care as villains. Focussing upon billing errors made by a small minority of health care providers, and using highly publicized politics of fear, the federal government has encouraged elderly patients across the country to turn on their doctors and report alleged billing abuses in exchange for monetary rewards. The net effect of this regulatory effort has been a dramatic increase in the volume of health care regulations and enforcers, similar increases in the number of support staff hired by hospitals and health care providers to assure compliance, and a major increase in overhead costs associated with that effort. The key thing that is missing in all of this is the "Education First, Enforcement Second" concept that have been successfully implemented by the Wisconsin Department of Commerce, the Wisconsin Department of Workforce Development and other state agencies.

Gundersen Lutheran strongly believes that integrity in connection with the billing of patients and their payors is important, whether such payors involve Medicare, Medicaid, CHAMPUS, the VA, private insurance carriers or patients. At the same time, we strongly oppose a little noticed provision in the Governor's biennial budget that would grant the Department of Justice the authority to impose additional civil monetary penalties and fines against Wisconsin health care providers. The Department of Justice has more than enough tools to enforce the law against health care providers, including the threat of criminal prosecution. This proposed provision, which the Governor anticipates will result in approximately \$200,000 in additional state revenue, will cause substantially more compliance related efforts than it is worth for Wisconsin's citizens, and we encourage you to delete it from the budget bill.

Thank you for giving us the opportunity to offer comments on the Governor's proposed legislation.

Sincerely yours,

GUNDERSEN LUTHERAN, INC.



Thomas H. Taylor
Vice President and General Counsel

THT:jaf