1	SUBCHAPTER IV
2	RESPITE FACILITIES AND HOSPICES
3	*b1417/2.2* Section 1900c. 50.85 of the statutes is created to read:
4	50.85 Respite facilities for persons with like or similar disabilities. (1)
5	Definitions. In this section:
6	(a) "Disability" has the meaning given in rules promulgated under sub. (8) (e)
7	(b) "Like or similar disabilities" has the meaning given in rules promulgated
8	under sub. (8) (f).
9	(c) "Respite care" means care provided to a person with a disability in order to
10	provide temporary relief to the primary caregiver.
11	(d) "Respite facility" means a facility in which overnight respite care is provided
12	to up to 10 persons with like or similar disabilities who are at least 2 years of age and
13	in which day respite care may be provided to up to 10 additional persons with like
14	or similar disabilities who are at least 2 years of age.
15	(2) DEPARTMENTAL POWERS AND DUTIES. The department shall provide uniform
16	statewide licensure, inspection, and regulation of respite facilities as specified in this
17	section.
18	(3) LICENSURE REQUIREMENTS. (a) No person may conduct, maintain, operate
19	or otherwise participate in conducting, maintaining, or operating a respite facility
20	unless the respite facility is licensed by the department.
21	(b) The department shall issue a license if the department finds that the
22	applicant is fit and qualified and that the respite facility meets the requirements of
23	this section and the rules promulgated under this section.
24	(c) The department or the department's designated representative shall

inspect or investigate a respite facility prior to issuance of a license for the respite

- facility and may inspect or investigate a respite facility as the department deems necessary, including a review of patient health care records of any individuals served by the respite facility, to determine if any person is in violation of this section.
- (d) The past record of violations of applicable federal laws or regulations or of state statutes or rules of this or any other state, in the operation of any health-related organization, by an operator, managing employee, or direct or indirect owner of a respite facility or of an interest of a respite facility is relevant to the issue of the fitness of an applicant for a license. The department or the department's designated representative shall inspect and investigate as necessary to determine the conditions existing in each case under this paragraph and shall prepare and maintain a written report concerning the investigation and inspection.
- (4) Use of NAME OR ADVERTISING PROHIBITED. No entity that is not a respite facility licensed under this section or an applicant for a license under this section may designate itself as a "respite facility" or use the word "respite facility" to represent or tend to represent the entity as a respite facility or services provided by the entity as services provided by a respite facility.
  - (5) LICENSING PROCEDURE. (a) The application for a license shall:
  - 1. Be in writing on a form provided by the department.
  - 2. Contain such information as the department requires.
  - 3. Include licensing fee payment, as specified in sub. (6).
  - (b) 1. A respite facility license is valid until suspended or revoked.
- 2. Each license shall be issued only for the applicant named in the application and may not be transferred or assigned.
- 3. Any license granted under special limitations prescribed by the department shall state the limitations.

(6) LICENSURE FEE. The annual fee for a licensed respite facility is \$18 per bed
based on the number of licensed beds of the respite facility.

- (7) Suspension and revocation. (a) The department, after notice to the applicant or licensee, may suspend or revoke a license in any case in which the department finds that there has been a substantial failure to comply with the requirements of this section or the rules promulgated under this section. No state or federal funds passing through the state treasury may be paid to a respite facility that does not have a valid license issued under this section.
- (b) Notice under this subsection shall include a clear and concise statement of the violations on which the revocation is based, the statute or rule violated and notice of the opportunity for an evidentiary hearing under par. (c).
- (c) If a respite facility desires to contest the revocation of a license, the respite facility shall, within 10 days after receipt of notice under par. (b), notify the department in writing of its request for a hearing under s. 227.44.
- (d) 1. Subject to s. 227.51 (3), revocation shall become effective on the date set by the department in the notice of revocation, or upon final action after a hearing under ch. 227, or after court action if a stay is granted under ch. 227, whichever is later.
- 3. The department may extend the effective date of license revocation in any case in order to permit orderly removal and relocation of individuals served by the respite facility.
- (8) RULE-MAKING AUTHORITY. The department shall promulgate all of the following rules:
- (a) Standards for the care, treatment, health, safety, rights, and welfare of persons with like or similar disabilities who receive respite care care from a respite

- facility and the maintenance, general hygiene and operation of a respite facility, which will permit the use of advancing knowledge to promote safe and adequate care and treatment for these individuals. These standards shall permit persons with like or similar disabilities who receive day care from a respite facility to share dining facilities and day trips with persons with with like or similar disabilities who receive overnight care from a respite facility. The standards shall also allow provision of fire safety training by a local fire inspector or a fire department.
- (b) Inspection or investigation procedures that the department or the department's designated representative may use to assure the provision of care and treatment that is commensurate with the standards established under par. (a).
  - (c) Criteria for determining that the applicant for licensure is fit and qualified.
- (d) A procedure for waiver of and variance from standards under par. (a) or criteria under par. (c). The department may limit the duration of the waiver or variance.
  - (e) A definition of "disability" for the purposes of this section.
  - (f) A definition of "like or similar disabilities" for the purposes of this section.
- (9) RIGHT OF INJUNCTION. The department may, upon the advice of the attorney general, who shall represent the department in all proceedings under this section, institute an action in the name of the state in the circuit court for Dane County for injunctive relief or other process against any licensee, owner, operator, administrator or representative of any owner of a respite facility for the violation of any of the provisions of this section or rules promulgated under this section if the violation affects the health, safety, or welfare of persons with like or similar disabilities.

- (10) FORFEITURES. (a) Any person who violates this subchapter or rules promulgated under this subchapter may be required to forfeit not more than \$100 for the first violation and may be required to forfeit not more than \$200 for the 2nd or any subsequent violation within a year. The period shall be measured using the dates of issuance of citations of the violations. Each day of violation constitutes a separate violation.
- (b) In determining whether a forfeiture is to be imposed and in fixing the amount of the forfeiture to be imposed, if any, for a violation, the following factors shall be considered:
- 1. The gravity of the violation, including the probability that death or serious physical or psychological harm to a person receiving respite care from a respite facility will result or has resulted; the severity of the actual or potential harm; and the extent to which the provisions of the applicable statutes or rules were violated.
- 2. Good faith exercised by the licensee. Indications of good faith include, but are not limited to, awareness of the applicable statutes and regulation and reasonable diligence in complying with such requirements, prior accomplishments manifesting the licensee's desire to comply with the requirements, efforts to correct and any other mitigating factors in favor of the licensee.
  - 3. Any previous violations committed by the licensee.
- 4. The financial benefit to the respite facility of committing or continuing the violation.
- (c) The department may directly assess forfeitures provided for under par. (a). If the department determines that a forfeiture should be assessed for a particular violation or for failure to correct the violation, the department shall send a notice of assessment to the respite facility. The notice shall specify the amount of the

forfeiture assessed, the violation, and the statute or rule alleged to have been violated, and shall inform the licensee of the right to a hearing under par. (d).

- (d) A respite facility may contest an assessment of forfeiture, by sending, within 10 days after receipt of notice under par. (c), a written request for hearing under s. 227.44 to the division of hearings and appeals created under s. 15.103 (1). The administrator of the division may designate a hearing examiner to preside over the case and recommend a decision to the administrator under s. 227.46. The decision of the administrator of the division shall be the final administrative decision. The division shall commence the hearing within 30 days after receipt of the request for hearing and shall issue a final decision within 15 days after the close of the hearing. Proceedings before the division are governed by ch. 227. In any petition for judicial review of a decision by the division, the party, other than the petitioner, who was in the proceeding before the division shall be the named respondent.
- (e) All forfeitures shall be paid to the department within 10 days after receipt of notice of assessment or, if the forfeiture is contested under par. (d), within 10 days after receipt of the final decision after exhaustion of administrative review, unless the final decision is appealed and the order is stayed by court order under the same terms and conditions as found in s. 50.03 (11). The department shall remit all forfeitures paid to the state treasurer for deposit in the school fund.
- (f) The attorney general may bring an action in the name of the state to collect any forfeiture imposed under this section if the forfeiture has not been paid following the exhaustion of all administrative and judicial reviews. The only issue to be contested in any such action shall be whether the forfeiture has been paid.

\*b1417/2.2\* Section 1900d. 50.90 (intro.) of the statutes is amended to read:
50.90 Definitions. (intro.) In this subchapter section to s. 50.981:

1	*b1417/2.2* Section 1900e. 50.91 of the statutes is amended to read:
2	50.91 Departmental powers and duties. The department shall provide
3	uniform, statewide licensing, inspection and regulation of hospices as specified in
4	this subchapter ss. 50.90 to 50.981.
5	*b1417/2.2* Section 1900f. 50.92 (2) of the statutes is amended to read:
6	50.92 (2) The department shall issue a license if the department finds that the
7	applicant is fit and qualified and that the hospice meets the requirements of this
8	subchapter ss. 50.90 to 50.981 and the rules promulgated under this subchapter ss.
9	50.90 to 50.981.
10	* <b>b1417/2.2</b> * <b>Section 1900g.</b> 50.92 (3) of the statutes is amended to read:
11	50.92 (3) The department or the department's designated representative shall
12	inspect or investigate a hospice prior to issuance of a license for the hospice except
13	as provided in sub. (4) and may inspect or investigate a hospice as the department
14	deems necessary, including conducting home visits or a review of health care records
15	of any individuals with terminal illness served by the hospice, to determine if any
16	person is in violation of this subchapter ss. 50.90 to 50.981.
17	*b1417/2.2* Section 1900h. 50.925 of the statutes is amended to read:
18	50.925 Use of name or advertising prohibited. No entity that is not a
19	hospice licensed under this subchapter ss. 50.90 to 50.981 or an applicant for a
20	license or a provisional license under this subchapter ss. 50.90 to 50.981 may
21	designate itself as a "hospice" or use the word "hospice" to represent or tend to
22	represent the entity as a hospice or services provided by the entity as services
23	provided by a hospice.
24	*h1417/2.2* Section 1900i. 50.93 (3) of the statutes is amended to read:

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50.93 (3) Provisional License. If the applicant has not been previously licensed under this subchapter s. 50.92 or if the hospice is not in operation at the time that application is made, the department may issue a provisional license. Unless sooner suspended or revoked under sub. (4), a provisional license shall be valid for 24 months from the date of issuance. Within 30 days prior to the termination of a provisional license, the department shall fully and completely inspect the hospice and, if the hospice meets the applicable requirements for licensure, shall issue a regular license under sub. (2). If the department finds that the hospice does not meet the requirements for licensure, the department may not issue a regular license under sub. (2).

\*b1417/2.2\* Section 1900j. 50.93 (4) (a) of the statutes is amended to read:

50.93 (4) (a) The department, after notice to the applicant or licensee, may suspend or revoke a license in any case in which the department finds that there has been a substantial failure to comply with the requirements of this subchapter ss. 50.90 to 50.981 or the rules promulgated under this subchapter ss. 50.90 to 50.981. No state or federal funds passing through the state treasury may be paid to a hospice not having a valid license issued under this section.

\*b1417/2.2\* Section 1900k. 50.97 of the statutes is amended to read:

50.97 Right of injunction. The department may, upon the advice of the attorney general, who shall represent the department in all proceedings under this section, institute an action in the name of the state in the circuit court for Dane County for injunctive relief or other process against any licensee, owner, operator, administrator or representative of any owner of a hospice for the violation of any of the provisions of this subchapter ss. 50.90 to 50.981 or rules promulgated under this

subchapter ss. 50.90 to 50.981 if the violation affects the health, safety or welfare of
individuals with terminal illness.

\*b1417/2.2\* Section 19001. 50.98 (1) of the statutes is amended to read:

50.98 (1) Any person who violates this subchapter ss. 50.90 to 50.981 or rules promulgated under this subchapter ss. 50.90 to 50.981 may be required to forfeit not more than \$100 for the first violation and may be required to forfeit not more than \$200 for the 2nd or any later violation within a year. The period shall be measured using the dates of issuance of citations of the violations. Each day of violation constitutes a separate violation.

\*b1417/2.2\* Section 1900m. 50.981 of the statutes is amended to read:

50.981 Fees permitted for a workshop or seminar. If the department develops and provides a workshop or seminar relating to the provision of services by hospices under this subchapter ss. 50.90 to 50.981, the department may establish a fee for each workshop or seminar and impose the fee on registrants for the workshop or seminar. A fee so established and imposed shall be in an amount sufficient to reimburse the department for the costs directly associated with developing and providing the workshop or seminar.

\*b0358/1.5\* Section 1955b. 51.02 (1) (e) of the statutes is repealed.

\*-0424/5.6\* Section 1961. 51.06 (1) (intro.) of the statutes is renumbered 51.06 (1) and amended to read:

51.06 (1) Purpose. The purpose of the northern center for developmentally disabled, central center for developmentally disabled and southern center for developmentally disabled is to provide services needed by developmentally disabled citizens of this state which that are otherwise unavailable to them, and to return

1	such those persons to the community when their needs can be met at the local level.
2	Services to be provided by the department at such centers shall include:
3	*-0424/5.7* Section 1962. 51.06 (1) (a) to (d) of the statutes are renumbered
4	51.06  (1m)  (a) to (d), and $51.06  (1m)$ (d), as renumbered, is amended to read:
5	51.06 (1m) (d) Services for up to 36 50 individuals with developmental
6	disability who are also diagnosed as mentally ill or who exhibit extremely aggressive
7	and challenging behaviors.
8	*-0424/5.8* Section 1963. 51.06 (1m) (intro.) of the statutes is created to read:
9	51.06 (1m) Services. (intro.) Services to be provided by the department at
10	centers for the developmentally disabled shall include:
11	*-0424/5.9* Section 1964. 51.06 (1r) of the statutes is created to read:
12	51.06 (1r) Alternative services. (a) In addition to services provided under
13	sub. (1m), the department may, when the department determines that community
14	services need to be supplemented, authorize a center for the developmentally
15	disabled to offer short-term residential services, dental and mental health services,
16	therapy services, psychiatric and psychological services, general medical services,
17	pharmacy services, and orthotics.
18	(b) Services under this subsection may be provided only under contract
19	between the department and a county department under s. 46.215, 46.22, 46.23,
20	51.42, or 51.437, a school district, or another public or private entity within the state
21	to persons referred from those entities, at the discretion of the department. The
22	department shall charge the referring entity all costs associated with providing the
23	services. Unless a referral is made, the department may not offer services under this
24	subsection to the person who is to receive the services or to his or her family. The
-25	department may not impose a charge for services under this subsection upon the

- person receiving the services or upon his or her family. Any revenues received under this subsection shall be credited to the appropriation account under s. 20.435 (2) (g).
- (c) 1. Services under this subsection are governed by subchapter XVI of ch. 48 and ss. 50.03, 50.032, 50.033, 50.034 (1) to (3), 50.035, 50.04, 50.09, 51.04, 51.42 (7) (b), and 51.61, for the application of which the services shall be considered to be provided by a private entity, by rules promulgated under those statutes, and by the terms of the contract between the department, except that, in the event of a conflict between the contractual terms and the statutes or rules, the services shall comply with the contractual, statutory, or rules provision that is most protective of the service recipient's health, safety, welfare, or rights.
- 2. Sections 46.03 (18), 46.10, 51.15 (2), 51.20 (13) (c) 1., and 51.42 (3) (as) and zoning or other ordinances or regulations of the county, city, town, or village in which the services are provided or the facility is located do not apply to the services under this subsection.
- 3. The department may not be required, by court order or otherwise, to offer services under this subsection.
- (d) A residential facility operated by a center for the developmentally disabled that is authorized by the department under this subsection may not be considered to be a hospital, as defined in s. 50.33 (2), an inpatient facility, a state treatment facility, or a treatment facility.

\*b1432/1.1\* Section 1966cb. 51.13 (1) (a) of the statutes is amended to read: 51.13 (1) (a) Except as provided in par. (c) and s. 51.45 (2m), the application for voluntary admission of a minor who is under 14 years of age or older to an approved inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission of a minor who is under 14

years of age to an approved inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse shall be executed by a parent who has legal custody of the minor or the minor's guardian. Any statement or conduct by a minor under the age of 14 who is the subject of an application for voluntary admission under this paragraph indicating that the minor does not agree to admission to the facility shall be noted on the face of the application and shall be noted in the petition required by sub. (4).

\*b1432/1.1\* Section 1966cc. 51.13 (1) (b) of the statutes is amended to read: 51.13 (1) (b) The application for voluntary admission of a minor who is 14 years of age or over older to an approved inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or the minor's guardian, except as provided in par. (c) 1.

\*b1432/1.1\* Section 1966cd. 51.13 (1) (c) of the statutes is renumbered 51.13 (1) (c) 1. and amended to read:

51.13 (1) (c) 1. If a minor 14 years of age or older wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian refuses to execute the application for admission or cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the parent or guardian's consent is of the parent or guardian is being unreasonably withheld ex, that the parent or guardian cannot be found, or that there is no parent

with legal custody, and that the admission is proper under the standards prescribed
in sub. (4) (d), it the court shall approve the minor's admission without the parent
or guardian's consent of the parent or guardian.

3. The court may, at the minor's request, temporarily approve the admission pending hearing on the petition. If a hearing is held under this subsection subd. 1. or 2., no review or hearing under sub. (4) is required.

\*b1432/1.1\* Section 1966ce. 51.13 (1) (c) 2. of the statutes is created to read: 51.13 (1) (c) 2. If a minor under 14 years of age wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the parent or guardian cannot be found or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), the court shall approve the minor's admission without the consent of the parent or guardian.

\*b1432/1.1\* Section 1966cf. 51.13 (1) (d) of the statutes is amended to read: 51.13 (1) (d) A minor against whom a petition or statement has been filed under s. 51.15, 51.20, or 51.45 (12) or (13) may be admitted under this section. The court may permit the minor to become a voluntary patient pursuant to under this section upon approval by the court of an application executed pursuant to under par. (a), (b), or (c), and the judge. The court shall then dismiss the proceedings under s. 51.15,

51.20, or 51.45 (12) or (13). If a hearing is held under this subsection, no hearing under sub. (4) is required.

\*b1432/1.1\* Section 1966cg. 51.13 (1) (e) of the statutes is amended to read:

51.13 (1) (e) A minor may be admitted immediately upon the approval of the application executed under par. (a) or (b) by the treatment director of the facility or his or her designee or, in the case of a center for the developmentally disabled, the director of the center or his or her designee, and the director of the appropriate county department under s. 51.42 or 51.437 if such the county department is to be responsible for the cost of the minor's therapy and treatment. Approval shall be based upon an informed professional opinion that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse, that the treatment facility offers inpatient therapy or treatment which that is appropriate for the minor's needs, and that inpatient care in the facility is the least restrictive therapy or treatment consistent with the minor's needs. In the case of a minor who is being admitted for the primary purpose of treatment for alcoholism or drug abuse, approval shall also be based on the results of an alcohol or other drug abuse assessment that conforms to the criteria specified in s. 938,547 (4).

\*b1432/1.1\* Section 1966ch. 51.13 (2) (a) of the statutes is amended to read: 51.13 (2) (a) A minor may be admitted to an inpatient treatment facility without complying with the requirements of this section if the admission does not involve the department or a county department under s. 51.42 or 51.437, or a contract between a treatment facility and the department or between a treatment facility and a county department. The application for voluntary admission of a minor who is 14 years of age or older to an inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission

of a minor who is under 14 years of age to an inpatient treatment facility for the
primary purpose of treatment for mental illness, developmental disability,
alcoholism, or drug abuse shall be executed by a parent who has legal custody of the
minor or by the minor's guardian. The application for voluntary admission of a minor
who is 14 years of age or over older to an inpatient treatment facility for the primary
purpose of treatment for mental illness or developmental disability shall be executed
by the minor and a parent who has legal custody of the minor or the minor's guardian.

\*b1432/1.1\* Section 1966ci. 51.13 (2) (b) of the statutes is amended to read: 51.13 (2) (b) Notwithstanding par. (a), any minor who is 14 years of age or older and who is admitted to an inpatient treatment facility for the primary purpose of treatment of mental illness, or developmental disability, alcoholism or drug abuse has the right to be discharged within 48 hours of after his or her request, as provided in sub. (7) (b). At the time of admission, any minor who is 14 years of age or older and who is admitted to an inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability, and the minor's parent or guardian, shall be informed of this right orally and in writing by the director of the hospital or such person's designee. This paragraph does not apply to individuals who receive services in hospital emergency rooms.

\*b1432/1.1\* Section 1966ck. 51.13 (2) (d) of the statutes is amended to read: 51.13 (2) (d) Writing materials for use in requesting a discharge shall be made available at all times to all minors who are 14 years of age or older and who are admitted under this subsection for the primary purpose of treatment for mental illness or developmental disability. The staff of the facility shall assist such minors in preparing or submitting requests for discharge.

\*b1432/1.1\* Section 1966cm. 51.13 (3) (b) of the statutes is amended to read:

51.13 (3) (b) A minor 14 years of age or older who has been admitted to an
inpatient treatment facility for the primary purpose of treatment for mental illness
or developmental disability, a minor who is voluntarily admitted under sub. (1) (c)
1. or 2., and his or her the minor's parent or guardian shall also be informed by the
director or his or her designee, both orally and in writing, in easily understandable
language, of the minor's right to request discharge and to be discharged within 48
hours of the request if no petition or statement is filed for emergency detention,
emergency commitment, involuntary commitment, or protective placement, and the
minor's right to consent to or refuse treatment as provided in s. 51.61 (6).

\*b1432/1.1\* Section 1966cn. 51.13 (3) (c) of the statutes is amended to read: 51.13 (3) (c) A minor 14 years of age or older who has been admitted to an inpatient facility for the primary purpose of treatment for alcoholism or drug abuse, a minor under 14 years of age who has been admitted to an inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, and his or her the minor's parent or guardian shall also be informed by the director or his or her designee, both orally and in writing, in easily understandable language, of the right of the parent or guardian to request the minor's discharge as provided in sub. (7) (b) and of the minor's right to a hearing to determine continued appropriateness of the admission as provided in sub. (7) (c).

\*b1432/1.1\* Section 1966cp. 51.13 (4) (a) (intro.) of the statutes is amended to read:

51.13 (4) (a) (intro.) Within 3 days of <u>after</u> the admission of a minor under sub. (1), or within 3 days of <u>after</u> application for admission of the minor, whichever occurs first, the treatment director of the facility to which the minor is admitted or, in the

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case of a center for the developmentally disabled, the director of the center, shall file a verified petition for review of the admission in the court assigned to exercise jurisdiction under chs. 48 and 938 in the county in which the facility is located. A copy of the application for admission and of any relevant professional evaluations shall be attached to the petition. The petition shall contain all of the following:

\*b1432/1.1\* Section 1966cr. 51.13 (4) (c) of the statutes is amended to read: 51.13 (4) (c) A copy of the petition shall be provided by the petitioner to the minor and his or her parents or guardian within 5 days of after admission.

\*b1432/1.1\* Section 1966ct. 51.13 (4) (d) of the statutes is amended to read: 51.13 (4) (d) Within 5 days of after the filing of the petition, the court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the admission is voluntary on the part of the minor if the minor is 14 years of age or older and whether there is a prima facie showing that the minor is in need of psychiatric services, or services for developmental disability, alcoholism, or drug abuse, that the treatment facility offers inpatient therapy or treatment which that is appropriate to the minor's needs, and that inpatient care in the treatment facility is the least restrictive therapy or treatment consistent with the needs of the minor, and, if the minor is 14 years of age or older and has been admitted to the treatment facility for the primary purpose of treatment for mental illness or developmental disability, whether the admission is voluntary on the part of the minor. If such a showing is made, the court shall permit voluntary admission. If the court is unable to make such those determinations based on the petition and accompanying documents, it shall the court may dismiss the petition as provided in par. (h); or order additional information to be produced as it deems necessary for the court to make such review, and make

such those determinations within 14 days of after admission or application for admission, whichever is sooner; or it may hold a hearing within 14 days of after admission or application for admission, whichever is sooner. If a notation of the minor's unwillingness appears on the face of the petition, or if a hearing has been requested by the minor, or by the minor's counsel, parent, or guardian, the court shall hold a hearing to review the admission within 14 days of after admission or application for admission, whichever is sooner, and shall appoint counsel to represent the minor if the minor is unrepresented. If the court deems considers it necessary, it the court shall also appoint a guardian ad litem to represent the minor.

\***b1432/1.1**\* **Section 1966cv.** 51.13 (4) (g) (intro.) of the statutes is amended to read:

51.13 (4) (g) (intro.) If the court finds that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse in an inpatient facility, and that the inpatient facility to which the minor is admitted offers therapy or treatment that is appropriate for the minor's needs and that is the least restrictive therapy or treatment consistent with the minor's needs, and, in the case of a minor aged 14 or older who is being admitted for the primary purpose of treatment for mental illness or developmental disability, that the application is voluntary on the part of the minor, the court shall permit voluntary admission. If the court finds that the therapy or treatment in the inpatient facility to which the minor is admitted is not appropriate or is not the least restrictive therapy or treatment consistent with the minor's needs, the court may order placement in or transfer to another more appropriate or less restrictive inpatient facility, except that the court may not permit or order placement in or transfer to the northern or southern centers for the developmentally disabled of a minor unless the department gives approval

for th	e placement	or transfer,	, and if the	e order of	the court	is approved	by all	of the
follow	ing if applic	able:						

\*b1432/1.1\* Section 1966cvv. 51.13 (4) (g) 1. of the statutes is amended to read:

51.13 (4) (g) 1. The minor if he or she is aged 14 or older and is being admitted for the primary purpose of treatment for mental illness or developmental disability.

\*b1432/1.1\* Section 1966cw. 51.13 (6) (a) of the statutes is amended to read:

51.13 (6) (a) A minor may be admitted to an inpatient treatment facility without review of the application under sub. (4) for diagnosis and evaluation or for dental, medical, or psychiatric services for a period not to exceed 12 days. The application for short-term admission of a minor shall be executed by the minor's parent or guardian, and by the minor if he or she, if the minor is 14 years of age or older and is being admitted for the primary purpose of diagnosis, evaluation, or services for mental illness or developmental disability, by the minor. A minor may not be readmitted to an inpatient treatment facility for psychiatric services under

\*b1432/1.1\* Section 1966cx. 51.13 (7) (a) of the statutes is amended to read: 51.13 (7) (a) If a minor is admitted to an inpatient treatment facility while under 14 years of age, and if upon reaching age 14 is in need of further inpatient care and treatment primarily for mental illness or developmental disability, the director of the facility shall request the minor and the minor's parent or guardian to execute an application for voluntary admission. Such an application may be executed within 30 days prior to a minor's 14th birthday. If the application is executed, a petition for review shall be filed in the manner prescribed in sub. (4), unless such a review has been held within the last 120 days. If the application is not executed by the time of

this paragraph within 120 days of a previous admission under this paragraph.

protective placement.

the minor's 14th birthday, the minor shall be discharged unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement by the end of the next day in which the court transacts business.

\*b1432/1.1\* Section 1966cy. 51.13 (7) (b) of the statutes is amended to read:

51.13 (7) (b) Any minor 14 years of age or ever older who is voluntarily admitted under this section for the primary purpose of treatment for mental illness or developmental disability, and any minor who is voluntarily admitted under sub. (1) (c) 1. or 2., may request discharge in writing. In the case of a minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse or a minor under 14 years of age who is voluntarily admitted under this section for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, the parent or guardian of the minor may make the request. Upon receipt of any form of written request for discharge from a minor, the director of the facility in which the minor is admitted shall immediately notify the minor's parent or guardian. The minor shall

\*b1432/1.1\* Section 1966cz. 51.13 (7) (c) of the statutes is amended to read: 51.13 (7) (c) Any minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse, and who is not discharged under par. (b), and any minor under 14 years of age who is voluntarily admitted under this section for the primary purpose of treatment for

be discharged within 48 hours after submission of the request, exclusive of

Saturdays, Sundays, and legal holidays, unless a petition or statement is filed for

emergency detention, emergency commitment, involuntary commitment, or

mental illness, developmental disability, alcoholism, or drug abuse, and who is not
discharged under par. (b), may submit a written request to the court for a hearing
to determine the continued appropriateness of the admission. If the director or staff
of the inpatient treatment facility to which a minor under the age of 14 described in
this paragraph is admitted observes conduct by the minor which that demonstrates
an unwillingness to remain at the facility, including but not limited to a written
expression of opinion or unauthorized absence, the director shall file a written
request with the court to determine the continued appropriateness of the admission.
A request which that is made personally by a minor under this paragraph shall be
signed by the minor but need not be written or composed by him or her the minor.
A request for a hearing under this paragraph which that is received by staff or the
director of the facility in which the child is admitted shall be filed with the court by
the director. The court shall order a hearing upon request if no hearing concerning
the minor's admission has been held within 120 days of after receipt of the request.
The court shall appoint counsel and, if the court deems considers it necessary, a
guardian ad litem to represent the minor and if a hearing is held shall hold the
hearing within 14 days of after the request, unless the parties agree to a longer
period. After the hearing, the court shall make disposition of the matter in the
manner provided in sub. (4).

\*b1409/1.1\* Section 1966d. 51.15 (1) (a) (intro.) of the statutes is amended to read:

51.15 (1) (a) (intro.) A law enforcement officer or other person authorized to take a child into custody under ch. 48 or to take a juvenile into custody under ch. 938 may take an individual into custody if the officer or person has cause to believe that such the individual is mentally ill or, except as provided in subd. 5., is drug

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dependent, or <u>is</u> developmentally disabled, and that the individual evidences any of the following:

\*b1409/1.1\* Section 1966e. 51.15 (1) (a) 5. of the statutes is repealed.

\*b1409/1.1\* Section 1966f. 51.15 (1) (c) of the statutes is repealed.

\*b1409/1.1\* Section 1966g. 51.15 (4) (a) of the statutes is amended to read:

51.15 (4) (a) In counties having a population of 500,000 or more, the law enforcement officer or other person authorized to take a child into custody under ch. 48 or to take a juvenile into custody under ch. 938 shall sign a statement of emergency detention which shall provide detailed specific information concerning the recent overt act, attempt, or threat to act or omission on which the belief under sub. (1) is based and the names of the persons observing or reporting the recent overt act, attempt, or threat to act or omission. The law enforcement officer or other person is not required to designate in the statement whether the subject individual is mentally ill, developmentally disabled, or drug dependent, but shall allege that he or she has cause to believe that the individual evidences one or more of these conditions if sub. (1) (a) 1., 2., 3. or 4. is believed or mental illness, if sub. (1) (a) 5. is believed. The law enforcement officer or other person shall deliver, or cause to be delivered, the statement to the detention facility upon the delivery of the individual to it.

## \*b1409/1.1\* Section 1966h. 51.15 (5) of the statutes is amended to read:

51.15 (5) DETENTION PROCEDURE; OTHER COUNTIES. In counties having a population of less than 500,000, the law enforcement officer or other person authorized to take a child into custody under ch. 48 or to take a juvenile into custody under ch. 938 shall sign a statement of emergency detention which that shall provide detailed specific information concerning the recent overt act, attempt, or threat to

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act or omission on which the belief under sub. (1) is based and the names of persons observing or reporting the recent overt act, attempt, or threat to act or omission. The law enforcement officer or other person is not required to designate in the statement whether the subject individual is mentally ill, developmentally disabled, or drug dependent, but shall allege that he or she has cause to believe that the individual evidences one or more of these conditions if sub. (1) (a) 1., 2., 3. or 4. is believed or mental illness, if sub. (1) (a) 5. is believed. The statement of emergency detention shall be filed by the officer or other person with the detention facility at the time of admission, and with the court immediately thereafter. The filing of the statement has the same effect as a petition for commitment under s. 51.20. When, upon the advice of the treatment staff, the director of a facility specified in sub. (2) determines that the grounds for detention no longer exist, he or she shall discharge the individual detained under this section. Unless a hearing is held under s. 51.20 (7) or 55.06 (11) (b), the subject individual may not be detained by the law enforcement officer or other person and the facility for more than a total of 72 hours, exclusive of Saturdays, Sundays, and legal holidays.

\*b1409/1.1\* Section 1966i. 51.20 (1) (a) 2. e. of the statutes is amended to read:

51.20 (1) (a) 2. e. For an individual, other than an individual who is alleged to be drug dependent or developmentally disabled, after the advantages and disadvantages of and alternatives to accepting a particular medication or treatment have been explained to him or her and because of mental illness, evidences either incapability of expressing an understanding of the advantages and disadvantages of accepting medication or treatment and the alternatives, or substantial incapability of applying an understanding of the advantages, disadvantages, and alternatives to

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his or her mental illness in order to make an informed choice as to whether to accept or refuse medication or treatment; and evidences a substantial probability, as demonstrated by both the individual's treatment history and his or her recent acts or omissions, that the individual needs care or treatment to prevent further disability or deterioration and a substantial probability that he or she will, if left untreated, lack services necessary for his or her health or safety and suffer severe mental, emotional, or physical harm that will result in the loss of the individual's ability to function independently in the community or the loss of cognitive or volitional control over his or her thoughts or actions. The probability of suffering severe mental, emotional, or physical harm is not substantial under this subd. 2. e. if reasonable provision for the individual's care or treatment is available in the community and there is a reasonable probability that the individual will avail himself or herself of these services or if the individual is appropriate for protective placement under s. 55.06. Food, shelter, or other care that is provided to an individual who is substantially incapable of obtaining food, shelter, or other care for himself or herself by any person other than a treatment facility does not constitute reasonable provision for the individual's care or treatment in the community under this subd. 2. e. The individual's status as a minor does not automatically establish a substantial probability of suffering severe mental, emotional, or physical harm under this subd. 2. e. This subd. 2. e. does not apply after November 30, 2001.

\*b1409/1.1\* Section 1966j. 51.20 (1) (ad) 1. of the statutes is amended to read: 51.20 (1) (ad) 1. If a petition under par. (a) is based on par. (a) 2. e., the petition shall be reviewed and approved by the attorney general or by his or her designee prior to or within 12 hours after the time that it is filed. If the attorney general or his or her designee disapproves or fails to act with respect to the petition, the petition may

not be filed. If the attorney general or his or her designee disapproves or fails to act
with respect to a petition under this subdivision within 12 hours after the time that
it is filed, the individual, if detained under the petition, shall be released and the
petition is void.

\*b1409/1.1\* Section 1966k. 51.20 (1) (ad) 3. of the statutes is repealed.

\*b1409/1.1\* Section 1966L. 51.20 (10) (cm) 1. of the statutes is renumbered 51.20 (10) (cm) and amended to read:

51.20 (10) (cm) Prior to or at the final hearing, for individuals for whom a petition is filed under sub. (1) (a) 2. e., the county department under s. 51.42 or 51.437 shall furnish to the court and the subject individual an initial recommended written treatment plan that contains the goals of treatment, the type of treatment to be provided, and the expected providers. The treatment plan shall address the individual's needs for inpatient care, residential services, community support services, medication and its monitoring, case management, and other services to enable the person to live in the community upon release from an inpatient facility. The treatment plan shall contain information concerning the availability of the needed services and community treatment providers' acceptance of the individual into their programs. The treatment plan is only a recommendation and is not subject to approval or disapproval by the court. Failure to furnish a treatment plan under this subdivision paragraph does not constitute grounds for dismissal of the petition unless the failure is made in bad faith.

\*b1409/1.1\* Section 1966m. 51.20 (10) (cm) 2. of the statutes is repealed.

\*b1409/1.1\* Section 1966n. 51.20 (13) (g) 2d. c. of the statutes is repealed.

\*b1432/1.1\* Section 1966r. 51.22 (2) of the statutes is amended to read:

51.22 (2) Voluntary Except as provided in s. 51.13 (2), voluntary admissions
under ss. $51.10$ , $51.13$ , and $51.45$ (10) shall be through the county department under
s. 51.42 or 51.437 serving the person's county of residence, or through the
department if the person to be admitted is a nonresident of this state. Admissions
through a county department under s. 51.42 or 51.437 shall be made in accordance
with s. 51.42 (3) (as) 1. or 51.437 (4rm) (a). Admissions through the department shall
be made in accordance with sub. (3).
*b1409/1.1* Section 1966t. 51.30 (3) (b) of the statutes is amended to read:

51.30 (3) (b) An individual's attorney or guardian ad litem and the corporation counsel shall have access to the files and records of the court proceedings under this chapter without the individual's consent and without modification of the records in order to prepare for involuntary commitment or recommitment proceedings, reexaminations, appeals, or other actions relating to detention, admission, or commitment under this chapter or ch. 971 or 975.

\*b1409/1.1\* Section 1966v. 51.30 (4) (b) 11. of the statutes is amended to read: 51.30 (4) (b) 11. To the subject individual's counsel or guardian ad litem and the corporation counsel, without modification, at any time in order to prepare for involuntary commitment or recommitment proceedings, reexaminations, appeals, or other actions relating to detention, admission, commitment, or patients' rights under this chapter or ch. 48, 971, or 975.

\*b1409/1.1\* Section 1966x. 51.30 (4) (b) 14. of the statutes is repealed.

\*b1432/1.1\* Section 1967f. 51.35 (3) (a) of the statutes is amended to read:

51.35 (3) (a) A licensed psychologist of a secured correctional facility ex, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined

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in the secured correctional facility, secured child caring institution, or secured group home is, in his or her opinion, in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, and who has obtained voluntary consent to make a transfer for treatment, shall make a report. in writing, to the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief and verifying the consent. In the case of a minor age 14 and over or older who is in need of services for developmental disability or who is in need of psychiatric services, the minor and the minor's parent or guardian shall consent unless the minor is admitted under s. 51.13 (1) (c); and in 1. In the case of a minor age 14 or older who is in need of services for alcoholism or drug dependency or a minor under the age of 14 who is in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, only the minor's parent or guardian need consent unless the minor is admitted under s. 51.13 (1) (c). The superintendent shall inform, orally and in writing, the minor and the minor's parent or guardian, that transfer is being considered and shall inform them of the basis for the request and their rights as provided in s. 51.13 (3). If the department of corrections, upon review of a request for transfer, determines that transfer is appropriate, that department shall immediately notify the department of health and family services and, if the department of health and family services consents, the department of corrections may immediately transfer the individual. The department of health and family services shall file a petition under s. 51.13 (4) (a) in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the treatment facility is located.

\*b1432/1.1\* Section 1967g. 51.35 (3) (b) of the statutes is amended to read:

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51.35 (3) (b) The court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the transfer is voluntary on the part of the minor if he or she is aged 14 or over, and whether the transfer of the minor to an inpatient facility is appropriate and consistent with the needs of the minor. In the event that and, if the minor is 14 years of age or older and is being transferred for the purpose of receiving services for developmental disability or psychiatric services, whether the transfer is voluntary on the part of the minor. If the court is unable to make such those determinations based on the petition and accompanying documents, it shall the court may order additional information to be produced as it deems necessary to make such review, and make such those determinations within 14 days of after admission, or it the court may hold a hearing within 14 days of after admission. If a notation of the minor's unwillingness appears on the face of the petition, or that if a hearing has been requested by the minor, or by the minor's counsel, guardian ad litem, parent, or guardian, the court shall hold a hearing and appoint counsel or a guardian ad litem for the minor as provided in s. 51.13 (4) (d). At the conclusion of the hearing, the court shall approve or disapprove the request for transfer. If the minor is under the continuing jurisdiction of the court of another county, the court may order the case transferred together with all appropriate records to that court.

\*b1432/1.1\* Section 1967h. 51.35 (3) (c) of the statutes is amended to read: 51.35 (3) (c) A licensed psychologist of a secured correctional facility er, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally

disabled and is dangerous as described in s. 51.20 (1) (a) 2. a., b., c., or d., is mentally ill, is dangerous, and satisfies the standard under s. 51.20 (1) (a) 2. e., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45 in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the secured correctional facility, secured child caring institution, or secured group home is located. The court shall hold a hearing according to procedures provided in s. 51.20 or 51.45 (13).

\*b1432/1.1\* Section 1967i. 51.35 (3) (c) of the statutes, as affected by 1999 Wisconsin Λct 9, section 1558d, and 2001 Wisconsin Act .... (this act), is repealed and recreated to read:

51.35 (3) (c) A licensed psychologist of a secured correctional facility, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally disabled and is dangerous as described in s. 51.20 (1) (a) 2., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45

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in the court assigned to exercise jurisdiction under ch. 48 of the county where the secured correctional facility, secured child caring institution, or secured group home is located. The court shall hold a hearing according to procedures provided in s. 51.20 or 51.45 (13).

\*b1432/1.1\* Section 1967j. 51.35 (3) (g) of the statutes is amended to read:

51.35 (3) (g) A minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services may request in writing a return to the secured correctional facility, secured child caring institution, or secured group home. In the case of a minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for alcoholism or drug dependency or a minor under 14 years of age, who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability, alcoholism, or drug dependency, or psychiatric services, the parent or guardian may make the request. Upon receipt of a request for return from a minor 14 years of age or ever older, the director shall immediately notify the minor's parent or guardian. The minor shall be returned to the secured correctional facility, secured child caring institution, or secured group home within 48 hours after submission of the request unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement.

\***b2053/2.3**\* **Section 1967n.** 51.375 (2) of the statutes is renumbered 51.375 (2) (a).

\*b2053/2.3\* Section 1967p. 51.375 (2) (b) of the statutes is created to read: 51.375 (2) (b) The department may administer a lie detector test to a sex offender as part of the sex offender's programming, care, or treatment. A patient may

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refuse to submit to a lie detector test under this paragraph. This refusal does not constitute a general refusal to participate in treatment. A person administering a lie detector test under this paragraph may not ask the subject of the test any question that can reasonably be anticipated to elicit information as to whether the subject committed an offense for which the subject has not been convicted, found not guilty by reason of mental disease or defect, or adjudicated delinquent. The results of a lie detector test under this paragraph may be used only in the care, treatment, or assessment of the subject or in programming for the subject. The results of a test may be disclosed only to persons employed at the facility at which the subject is placed who need to know the results for purposes related to care, treatment, or assessment of the patient, the committing court, the patient's attorney, or the attorney representing the state in a proceeding under ch. 980.

\*b2042/2.2\* Section 1968d. 51.42 (3) (ar) 4m. of the statutes is amended to read:

51.42 (3) (ar) 4m. If state, federal, and county funding for alcohol and other drug abuse treatment services provided under subd. 4. are insufficient to meet the needs of all eligible individuals, ensure that first priority for services is given to pregnant women who suffer from alcoholism or alcohol abuse or are drug dependent and that second priority be given to individuals who are 20 years of age and were eligible for the medical assistance program under s. 49.46 (1) (a) 5m. but became ineligible for the program solely because they attained the age of 20.

\*b2042/2.2\* SECTION 1968dh. 51.42 (3) (ar) 4p. of the statutes is created to read:

51.42 (3) (ar) 4p. If state, federal, and county funding for mental health services provided under subd. 4. are insufficient to meet the needs of all eligible individuals,

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ensure that first priority for services is given to individuals who are 20 years of age and were eligible for the medical assistance program under s. 49.46 (1) (a) 5m. but became ineligible for the program solely because they attained the age of 20.

\*-0423/1.1\* SECTION 1970. 51.42 (3) (as) 1. of the statutes is amended to read:

51.42 (3) (as) 1. A county department of community programs shall authorize all care of any patient in a state, local or private facility under a contractual agreement between the county department of community programs and the facility, unless the county department of community programs governs the facility. The need for inpatient care shall be determined by the program director or designee in consultation with and upon the recommendation of a licensed physician trained in psychiatry and employed by the county department of community programs or its contract agency. In cases of emergency, a facility under contract with any county department of community programs shall charge the county department of community programs having jurisdiction in the county where the patient is found. The county department of community programs shall reimburse the facility for the actual cost of all authorized care and services less applicable collections under s. 46.036, unless the department of health and family services determines that a charge is administratively infeasible, or unless the department of health and family services, after individual review, determines that the charge is not attributable to the cost of basic care and services. A Except as provided in subd. 1m., a county department of community programs may not reimburse any state institution or receive credit for collections for care received therein by nonresidents of this state, interstate compact clients, transfers under s. 51.35 (3), and transfers from Wisconsin state prisons under s. 51.37 (5) (a), commitments under s. 975.01, 1977 stats., or s. 975.02, 1977 stats., or s. 971.14, 971.17 or 975.06 or admissions under s. 975.17, 1977

stats., or children placed in the guardianship of the department of health and family services under s. 48.427 or 48.43 or under the supervision of the department of corrections under s. 938.183 or 938.355. The exclusionary provisions of s. 46.03 (18) do not apply to direct and indirect costs which are attributable to care and treatment of the client.

\*-0423/1.2\* Section 1971. 51.42 (3) (as) 1m. of the statutes is created to read: 51.42 (3) (as) 1m. A county department of community programs shall reimburse a mental health institute at the institute's daily rate for custody of any person who is ordered by a court located in that county to be examined at the mental health institute under s. 971.14 (2) for all days that the person remains in custody at the mental health institute, beginning 48 hours, not including Saturdays, Sundays, and legal holidays, after the sheriff and county department receive notice under s. 971.14 (2) (d) that the examination has been completed.

\*b2089/2.7\* Section 1971L. 51.421 (3) (e) of the statutes is created to read: 51.421 (3) (e) Distribute, from the appropriation under s. 20.435 (7) (bL), \$1,000,000 in each fiscal year for community support program services.

\*b0323/3.13\* Section 1971p. 51.423 (1) of the statutes is amended to read: 51.423 (1) The department shall fund, within the limits of the department's allocation for mental health services under s. 20.435 (3) (o) and (7) (b), (kw) and (o) and subject to this section, services for mental illness, developmental disability, alcoholism, and drug abuse to meet standards of service quality and accessibility. The department's primary responsibility is to guarantee that county departments established under either s. 51.42 or 51.437 receive a reasonably uniform minimum level of funding and its secondary responsibility is to fund programs which meet exceptional community needs or provide specialized or innovative services. Moneys

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appropriated under s. 20.435 (7) (b) and earmarked by the department for mental health services under s. 20.435 (7) (o) shall be allocated by the department to county departments under s. 51.42 or 51.437 in the manner set forth in this section.

\***b0323/3.13**\* **Section 1971r.** 51.423 (2) of the statutes is amended to read:

51.423 (2) From the appropriations under s. 20.435 (3) (o) and (7) (b), (kw) and (o), the department shall distribute the funding for services provided or purchased by county departments under s. 46.23, 51.42, or 51.437 to such county departments as provided under s. 46.40. County matching funds are required for the distributions under s. 46.40 (2) and (9) (b). Each county's required match for the distributions under s. 46.40 (2) for a year equals 9.89% of the total of the county's distributions under s. 46.40 (2) for that year for which matching funds are required plus the amount the county was required by s. 46.26 (2) (c), 1985 stats., to spend for juvenile delinquency-related services from its distribution for 1987. Each county's required match for the distribution under s. 46.40 (9) (b) for a year equals 9.89% of that county's amounts described in s. 46.40 (9) (a) (intro.) for that year. Matching funds may be from county tax levies, federal and state revenue sharing funds, or private donations to the counties that meet the requirements specified in sub. (5). Private donations may not exceed 25% of the total county match. If the county match is less than the amount required to generate the full amount of state and federal funds distributed for this period, the decrease in the amount of state and federal funds equals the difference between the required and the actual amount of county matching funds.

\*-0424/5.10\* SECTION 1972. 51.437 (4rm) (c) 2m. of the statutes is amended to read:

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51.437 (4rm) (c) 2m. Bill the county department of developmental disabilities
services for services provided under s. 51.06 (1) (1m) (d) to individuals who are
eligible for medical assistance that are not provided by the federal government, using
the procedure established under subd. 1.
*-1712/2.10* Section 1973. 51.437 (14) (i) of the statutes is repealed.
*b0358/1.6* Section 1974m. 51.437 (14p) of the statutes is repealed.
*b0358/1.6* Section 1981b. 51.437 (14r) (a) 2. (intro.) of the statutes is
amended to read:
51.437 (14r) (a) 2. (intro.) Perform the following responsibilities related to the
state plan, for the delivery of services, that is required under 42 USC 6022, including
the construction of facilities:
*b0328/3.2* Section 1982r. 51.44 (3) (c) of the statutes is created to read:
51.44 (3) (c) No county may contribute less funding for early intervention
services under this section than the county contributed for early intervention
services in 1999, except that, for a county that demonstrated extraordinary effort in
1999, the department may waive this requirement and establish with the county a
lesser required contribution.
*b1432/1.2* Section 1993f. 51.47 (title) of the statutes is amended to read:
51.47 (title) Alcohol and other drug abuse treatment for minors
without parental consent.
*b1432/1.2* Section 1993g. 51.47 (1) of the statutes is amended to read:
51.47 (1) Except as provided in subs. (2) and (3), any physician or health care
facility licensed, approved, or certified by the state for the provision of health services
may render preventive, diagnostic, assessment, evaluation, or treatment services for
the abuse of alcohol or other drugs to a minor 12 years of age or over without

obtaining the consent of or notifying the minor's parent or guardian and may render those services to a minor under 12 years of age without obtaining the consent of or notifying the minor's parent or guardian, but only if a parent with legal custody or guardian of the minor under 12 years of age cannot be found or there is no parent with legal custody of the minor under 12 years of age. An assessment under this subsection shall conform to the criteria specified in s. 938.547 (4). Unless consent of the minor's parent or guardian is required under sub. (2), the physician or health care facility shall obtain the minor's consent prior to billing a 3rd party for services under this section. If the minor does not consent, the minor shall be solely responsible for paying for the services, which the department shall bill to the minor under s. 46.03 (18) (b).

\*b1432/1.2\* Section 1993h. 51.48 of the statutes is amended to read:

treatment of minor without minor's consent. A minor's parent or guardian may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body or to have the minor assessed by an approved treatment facility for the minor's abuse of alcohol or other drugs according to the criteria specified in s. 938.547 (4). If, based on the assessment, the approved treatment facility determines that the minor is in need of treatment for the abuse of alcohol or other drugs, the approved treatment facility shall recommend a plan of treatment that is appropriate for the minor's needs and that provides for the least restrictive form of treatment consistent with the minor's needs. That treatment may consist of outpatient treatment, day treatment, or, if the minor is admitted in accordance with s. 51.13, inpatient treatment. The parent or guardian of the minor may consent to the treatment

1	recommended under this section. Consent of the minor is not required for testing,
2	assessment, or treatment under this section is not required.
3	* <b>b2053/2.4</b> * <b>Section 1993j.</b> 51.61 (1) (c) of the statutes is renumbered 51.61
4	(1) (cm) 1. and amended to read:
5	51.61 (1) (cm) 1. Have Patients have an unrestricted right to send sealed mail
6	and receive sealed mail to or from legal counsel, the courts, governmental
7	government officials, private physicians, and licensed psychologists, and have
8	reasonable access to letter writing materials including postage stamps. A patient
9	shall also have a right to send sealed mail and receive sealed mail to or from other
10	persons, subject to physical examination in the patient's presence if there is reason
11	to believe that such communication contains contraband materials or objects which
12	that threaten the security of patients, prisoners, or staff. Such reasons shall be
13	written in the individual's treatment record. The officers and staff of a facility may
14	not read any mail covered by this paragraph subdivision.
15	*b2053/2.4* Section 1993L. 51.61 (1) (cm) (intro.) of the statutes is created
16	to read:
17	51.61 (1) (cm) Have the rights specified under subd. 1. to send and receive
18	sealed mail, subject to the limitations specified under subd. 2.
19	*b2053/2.4* Section 1993n. 51.61 (1) (cm) 2. of the statutes is created to read:
20	51.61 (1) (cm) 2. The rights of a patient detained or committed under ch. 980
21	to send and receive sealed mail are subject to the following limitations:
22	a. If the mail appears to be from legal counsel, a court, a government official,
23	or a private physician or licensed psychologist, an officer or staff member of the
24	facility at which the patient is placed may delay delivery of the mail to the patient
25	for a reasonable period of time to verify whether the person named as the sender

actually sent the mail; may open the mail in the presence of the patient and inspect it for contraband; or may, if the officer or staff member cannot determine whether the mail contains contraband, return the mail to the sender along with notice of the facility mail policy.

b. If the mail appears to be from a person other than a person specified in subd.

2. a., the director of the facility or his or her designee may, in accordance with the standards and the procedure under sub. (2) for denying a right for cause, authorize a member of the facility treatment staff to read the mail, if the director or his or her designee has reason to believe that the mail could pose a threat to security at the facility or seriously interfere with the treatment, rights, or safety of others.

\*b1409/1.2\* Section 1993p. 51.61 (1) (g) 3m. of the statutes is amended to read:

51.61 (1) (g) 3m. Following a final commitment order for a subject individual who is determined to meet the commitment standard under s. 51.20 (1) (a) 2. e., the court shall issue an order permitting medication or treatment to be administered to the individual regardless of his or her consent. This subdivision does not apply after November 30, 2001.

\*b2053/2.4\* Section 1993r. 51.61 (1) (i) 1. of the statutes is amended to read: 51.61 (1) (i) 1. Except as provided in subd. 2., have a right to be free from physical restraint and isolation except for emergency situations or when isolation or restraint is a part of a treatment program. Isolation or restraint may be used only when less restrictive measures are ineffective or not feasible and shall be used for the shortest time possible. When a patient is placed in isolation or restraint, his or her status shall be reviewed once every 30 minutes. Each facility shall have a written policy covering the use of restraint or isolation which that ensures that the dignity

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of the individual is protected, that the safety of the individual is ensured, and that there is regular, frequent monitoring by trained staff to care for bodily needs as may be required. Isolation or restraint may be used for emergency situations only when it is likely that the patient may physically harm himself or herself or others. The treatment director shall specifically designate physicians who are authorized to order isolation or restraint, and shall specifically designate licensed psychologists who are authorized to order isolation. In the instance where If the treatment director is not a physician, the medical director shall make the designation. In the case of a center for the developmentally disabled, use shall be authorized by the director of the center. The authorization for emergency use of isolation or restraint shall be in writing, except that isolation or restraint may be authorized in emergencies for not more than one hour, after which time an appropriate order in writing shall be obtained from the physician or licensed psychologist designated by the director, in the case of isolation, or the physician so designated in the case of restraint. Emergency isolation or restraint may not be continued for more than 24 hours without a new written order. Isolation may be used as part of a treatment program if it is part of a written treatment plan, and the rights specified in this subsection are provided to the patient. The use of isolation as a part of a treatment plan shall be explained to the patient and to his or her guardian, if any, by the person who undertakes such provides the treatment. Such A treatment plan that incorporates isolation shall be evaluated at least once every 2 weeks. Patients who have a recent history of physical aggression may be restrained during transport to or from the facility. Persons who are committed or transferred under s. 51.35 (3) or 51.37 or under ch. 971 or 975, or who are detained or committed under ch. 980, and who, while under this status, are transferred to a hospital, as defined in s. 50.33 (2), for medical

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care may be isolated for security reasons within locked facilities in the hospital. Patients who are committed or transferred under s. 51.35 (3) or 51.37 or under ch. 971 or 975, or who are detained or committed under ch. 980, may be restrained for security reasons during transport to or from the facility.

\*b2053/2.4\* Section 1993t. 51.61 (1) (i) 2. of the statutes is amended to read: 51.61 (1) (i) 2. Patients in the maximum security facility at the Mendota Mental Health Institute may be locked in their rooms during the night shift and for a period of no longer than one hour and 30 minutes during each change of shift by staff to permit staff review of patient needs. Patients detained or committed under ch. 980 and placed in a facility specified under s. 980.065 may be locked in their rooms during the night shift, if they reside in a maximum or medium security unit in which each room is equipped with a toilet and sink, or if they reside in a unit in which each room is not equipped with a toilet and sink and the number of patients outside their rooms equals or exceeds the number of toilets in the unit, except that patients who do not have toilets in their rooms must be given an opportunity to use a toilet at least once every hour, or more frequently if medically indicated. Patients in the maximum security facility at the Mendota Mental Health Institute, or patients detained or committed under ch. 980 and placed in a facility specified under s. 980.065, may also be locked in their rooms on a unit-wide or facility-wide basis as an emergency measure as needed for security purposes to deal with an escape or attempted escape, the discovery of a dangerous weapon in the unit or facility or the receipt of reliable information that a dangerous weapon is in the unit or facility, or to prevent or control a riot or the taking of a hostage. A unit-wide or facility-wide emergency isolation order may only be authorized by the director of the unit or maximum security facility where the order is applicable or his or her designee and shall. A unit-wide or

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facility-wide emergency isolation order affecting the Mendota Mental Health <u>Institute must</u> be approved within one hour after it is authorized by the director of the Mendota mental health facility Mental Health Institute or the director's designee. An emergency order for unit-wide or facility-wide isolation may only be in effect for the period of time needed to preserve order while dealing with the situation and may not be used as a substitute for adequate staffing. During a period of unit-wide or facility-wide isolation, the status of each patient shall be reviewed every 30 minutes to ensure the safety and comfort of the patient, and each patient who is locked in a room without a toilet shall be given an opportunity to use a toilet at least once every hour, or more frequently if medically indicated. Each unit in the maximum security facility at the Mendota Mental Health Institute and each unit in a facility specified under s. 980.065 shall have a written policy covering the use of isolation which that ensures that the dignity of the individual is protected, that the safety of the individual is secured, and that there is regular, frequent monitoring by trained staff to care for bodily needs as may be required. Each policy The isolation policies shall be reviewed and approved by the director of the Mendota Mental Health Institute or the director's designee, or by the director of the facility specified under s. 980.065 or his or her designee, whichever is applicable.

\*b2053/2.4\* Section 1993u. 51.61 (1) (a) of the statutes is amended to read: 51.61 (1) (b) Except as otherwise provided, have a right not to be filmed or taped, unless the patient signs an informed and voluntary consent which that specifically authorizes a named individual or group to film or tape the patient for a particular purpose or project during a specified time period. The patient may specify in such consent periods during which, or situations in which, the patient may not be filmed or taped. If a patient is legally incompetent, such consent shall be granted on

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behalf of the patient by the patient's guardian. A patient in Goodland Hall at the Mendota Mental Health Institute, or a patient detained or committed under ch. 980 and placed in a facility specified under s. 980.065, may be filmed or taped for security purposes without the patient's consent, except that such a patient may not be filmed in patient bedrooms or bathrooms for any purpose without the patient's consent.

\*b1432/1.2\* Section 1993w. 51.61 (6) of the statutes is amended to read:

51.61 (6) Subject to the rights of patients provided under this chapter, the department, county departments under s. 51.42 or 51.437, and any agency providing services under an agreement with the department or those county departments have the right to use customary and usual treatment techniques and procedures in a reasonable and appropriate manner in the treatment of patients who are receiving services under the mental health system, for the purpose of ameliorating the conditions for which the patients were admitted to the system. The written, informed consent of any patient shall first be obtained, unless the person has been found not competent to refuse medication and treatment under s. 51.61 (1) (g) or the person is a minor 14 years or older who is receiving services for alcoholism or drug abuse or a minor under 14 years of age who is receiving services for mental illness. developmental disability, alcoholism, or drug abuse. In the case of a minor, the written, informed consent of the parent or guardian is required. Except, except as provided under an order issued under s. 51.13 (1) (c) or 51.14 (3) (h) or (4) (g), if. If the minor is 14 years of age or older and is receiving services for mental illness or developmental disability, the written, informed consent of the minor and the minor's parent or guardian is required. A refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for admission to an approved inpatient treatment facility is reviewable under s. 51.13 (1) (c) 1, and

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a refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for outpatient mental health treatment is reviewable under s. 51.14.

\*b2221/3.108\* SECTION 1993z. 59.01 of the statutes is amended to read:

59.01 Body corporate; status. Each county in this state is a body corporate, authorized to sue and be sued, to acquire and hold, lease or rent real and personal estate for public uses or purposes, including lands acquired under ch. 75, to sell, lease and convey the same, including the authority to enter into leases or contracts with the state for a period of years for the uses and purposes specified in s. ss. 23.09 (2) (d) and 28.02 (2), to make such contracts and to do such other acts as are necessary and proper to the exercise of the powers and privileges granted and the performance of the legal duties charged upon it.

## \*b1601/1.6\* Section 1994m. 59.08 (9) of the statutes is amended to read:

59.08 (9) The ballot shall have on the back or reverse side the endorsements provided by law for ballots for general elections and shall be marked, punched or labeled by the elector and counted and canvassed as other ballots cast on questions in the county are counted and canvassed. The election shall be conducted by the same officers and in the same manner as are other elections in the county. The results of the election shall be certified to the judges of the circuit courts for the counties.

\*-1394/2.28\* Section 1996. 59.25 (3) (f) 2. of the statutes is amended to read: 59.25 (3) (f) 2. For all court imposed fines and forfeitures required by law to be deposited in the state treasury, the amounts required by s. 757.05 for the penalty assessment surcharge, the amounts required by s. 165.755 for the crime laboratories and drug law enforcement assessment, the amounts required by s. 167.31 (5) for the

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weapons assessment, the amounts required by s. 973.045 for the crime victim and witness assistance surcharge, the amounts required by s. 938.34 (8d) for the delinquency victim and witness assistance surcharge, the amounts required by s. 973.046 for the deoxyribonucleic acid analysis surcharge, the amounts required by s. 961.41 (5) for the drug abuse program improvement surcharge, the amounts required by s. 100.261 for the consumer information protection assessment, the amounts authorized by s. 971.37 (1m) (c) 1. or required by s. 973.055 (1) for the domestic abuse assessment, the amounts required by s. 253.06 (4) (c) for the enforcement assessment under the supplemental food program for women, infants and children, the amounts required by s. 349.04 for the truck driver education assessment, the amounts required by ss. 346.177, 346.495 and 346.65 (4r) for the railroad crossing improvement assessment, the amounts required by s. 346.655 (2) (a) and (b) for the driver improvement surcharge, the amounts required by s. 102.85 (4) for the uninsured employer assessment, the amounts required by s. 299.93 for the environmental assessment, the amounts required by s. 29.983 for the wild animal protection assessment, the amounts required by s. 29.987 for the natural resources assessment surcharge, the amounts required by s. 29.985 for the fishing shelter removal assessment, the amounts required by s. 350.115 for the snowmobile registration restitution payment, and the amounts required by s. 29.989 for natural resources restitution payments, transmit to the state treasurer a statement of all moneys required by law to be paid on the actions entered during the preceding month on or before the first day of the next succeeding month, certified by the county treasurer's personal signature affixed or attached thereto, and at the same time pay to the state treasurer the amount thereof.

\***b0595/4.2**\* **SECTION 1996f.** 59.25 (3) (j) of the statutes is renumbered 59.25 (3) (j) 1. and amended to read:

59.25 (3) (j) 1. Retain 10% for fees in receiving and paying into the state treasury all money received by the treasurer for the state for fines and penalties, except that 50% of the state forfeitures, fines and penalties under chs. 341 to 347, 349 and 351 shall be retained as fees as provided in subd. 2., and retain the other fees for receiving and paying money into the state treasury that are prescribed by law.

\*b0595/4.2\* Section 1996h. 59.25 (3) (j) 2. of the statutes is created to read:

59.25 (3) (j) 2. Retain 50% as fees for receiving and paying into the state treasury all money received by the treasurer for the state for state forfeitures, fines, and penalties under chs. 341 to 347, 349, and 351, unless, during that state fiscal year, the treasurer has already retained under this subdivision an amount equal to the amount that the treasurer retained under s. 59.25 (3) (j), 1999 stats., as fees from state forfeitures, fines, and penalties under chs. 341 to 347, 349, and 351 in the 2000–01 state fiscal year.

\*b0595/4.2\* Section 1996j. 59.25 (3) (jm) of the statutes is created to read:

59.25 (3) (jm) Forward to the state treasurer all money received by the treasurer for the state for state forfeitures, fines, and penalties under chs. 341 to 347, 349, and 351 if, during that state fiscal year, the treasurer has already retained under par. (j) 2. an amount equal to the amount that the treasurer retained under s. 59.25 (3) (j), 1999 stats., as fees from state forfeitures, fines, and penalties under chs. 341 to 347, 349, and 351 in the 2000–01 state fiscal year. The state treasurer shall deposit 50% of the amounts received under this paragraph in the general fund and shall credit them to the appropriation account under s. 20.475 (1) (g).

\***b0457/2.1**\* **S**ECTION **1996m.** 59.34 (1) (a) of the statutes is amended to read:

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59.34 (1) (a) Participate in inquest proceedings when required by law, except that in any county with a population of 500,000 or more and all counties which that have instituted the medical examiner system this duty and the powers incident thereto shall be vested exclusively in the office of the medical examiner. Except as provided under s. 59.38 (5), the board shall appoint the medical examiner. The office may be occupied on a full-time or part-time basis, and the officeholder shall be paid compensation as the board by ordinance provides. The duties performed by the county coroner and not vested in the medical examiner shall be performed by the clerk. The medical examiner may appoint such assistants as the board authorizes. Whenever requested by the court, attorney general, or district attorney, the medical examiner shall testify to facts and conclusions disclosed by autopsies performed by him or her, at his or her direction or in his or her presence; shall make physical examinations and tests incident to any matter of a criminal nature up for consideration before either the court, attorney general, or district attorney upon request; shall testify as an expert for either the court or the state in all matters where the examinations or tests have been made; and shall perform such other duties of a pathological or medicolegal nature as may be required.

\*-1394/2.29\* SECTION 1997. 59.40 (2) (m) of the statutes is amended to read: 59.40 (2) (m) Pay monthly to the treasurer for the use of the state the state's percentage of the fees required to be paid on each civil action, criminal action and special proceeding filed during the preceding month and pay monthly to the treasurer for the use of the state the percentage of court imposed fines and forfeitures required by law to be deposited in the state treasury, the amounts required by s. 757.05 for the penalty assessment surcharge, the amounts required by s. 165.755 for the crime laboratories and drug law enforcement assessment, the amounts required

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by s. 167.31 (5) for the weapons assessment, the amounts required by s. 973.045 for the crime victim and witness assistance surcharge, the amounts required by s. 938.34 (8d) for the delinquency victim and witness assistance surcharge, the amounts required by s. 973.046 for the deoxyribonucleic acid analysis surcharge, the amounts required by s. 961.41 (5) for the drug abuse program improvement surcharge, the amounts required by s. 100.261 for the consumer information protection assessment, the amounts authorized by s. 971.37 (1m) (c) 1. or required by s. 973.055 for the domestic abuse assessment surcharge, the amounts required by s. 253.06 (4) (c) for the enforcement assessment under the supplemental food program for women, infants and children, the amounts required by s. 349.04 for the truck driver education assessment, the amounts required by ss. 346.177, 346.495 and 346.65 (4r) for the railroad crossing improvement assessment, the amounts required by s. 346.655 for the driver improvement surcharge, the amounts required by s. 102.85 (4) for the uninsured employer assessment, the amounts required by s. 299.93 for the environmental assessment, the amounts required under s. 29.983 for the wild animal protection assessment, the amounts required under s. 29.987 (1) (d) for the natural resources assessment surcharge, the amounts required by s. 29.985 for the fishing shelter removal assessment, the amounts required by s. 350.115 for the snowmobile registration restitution payment, and the amounts required under s. 29.989 (1) (d) for the natural resources restitution payments. The payments shall be made by the 15th day of the month following receipt thereof.

\*b0670/3.20\* Section 1999m. 59.43 (2) (ag) 1. of the statutes is amended to read:

59.43 (2) (ag) 1. After June 30, 1991, and subject Subject to s. 59.72 (5), for recording any instrument entitled to be recorded in the office of the register of deeds,

$\$10 \ \$11$ for the first page and $\$2$ for each additional page, except that no fee may be
collected for recording a change of address that is exempt from a filing fee under s.
185.83 (1) (b).
*b0670/3.20* Section 1999n. 59.43 (2) (ag) 1. of the statutes, as affected by
2001 Wisconsin Act (this act), is amended to read:
59.43 (2) (ag) 1. Subject to s. 59.72 (5), for For recording any instrument
entitled to be recorded in the office of the register of deeds, \$11 for the first page and
\$2 for each additional page, except that no fee may be collected for recording a change
of address that is exempt from a filing fee under s. 185.83 (1) (b).
*-1923/1.1* Section 2000. 59.43 (2) (b) of the statutes is amended to read:
59.43 (2) (b) For copies of any records or papers, \$2 for the first page plus \$1
for each additional page, plus $25$ cents $1$ for the certificate of the register of deeds,
except that the department of revenue is exempt from the fees under this paragraph.
* $\mathbf{b0670/3.21*}$ Section 2001m. 59.43 (2) (e) of the statutes is amended to read:
59.43 (2) (e) After June 30, 1991, and subject Subject to s. 59.72 (5), for filing
any instrument which is entitled to be filed in the office of register of deeds and for
which no other specific fee is specified, \$10 \$11 for the first page and \$2 for each
additional page.
*b0670/3.21* Section 2001n. 59.43 (2) (e) of the statutes, as affected by 2001
Wisconsin Act (this act), is amended to read:
59.43 (2) (e) Subject to s. 59.72 (5), for For filing any instrument which is
entitled to be filed in the office of register of deeds and for which no other specific fee
is specified, \$11 for the first page and \$2 for each additional page.
*b2221/3.109* Section 2001nm. 59.52 (6) (a) of the statutes is amended to
read:

59.52 (6) (a) How acquired; purposes. Take and hold land acquired under ch. 75 and acquire, lease or rent property, real and personal, for public uses or purposes of any nature, including without limitation acquisitions for county buildings, airports, parks, recreation, highways, dam sites in parks, parkways and playgrounds, flowages, sewage and waste disposal for county institutions, lime pits for operation under s. 59.70 (24), equipment for clearing and draining land and controlling weeds for operation under s. 59.70 (18), ambulances, acquisition and transfer of real property to the state for new collegiate institutions or research facilities, and for transfer to the state for state parks, for state forests and for the other uses and purposes specified in s. 23.09 (2) (d).

\*b0624/1.1\* Section 2001q. 59.52 (11) (c) of the statutes is amended to read: 59.52 (11) (c) Employee insurance. Provide for individual or group hospital, surgical and life insurance for county officers and employees and for payment of premiums for such officers and employees. In addition, a A county with at least 100 employees may elect to provide health care benefits on a self-insured basis to its officers and employees, and any 2 or more counties which together have at least 100 employees may jointly provide health care benefits on a self-insured basis to officers and employees of the counties. A county and one or more cities, villages, towns, or other counties, that together have at least 100 employees, may jointly provide health care benefits to their officers and employees on a self-insured basis. Counties which elect to provide health care benefits on a self-insured basis to their officers and employees shall be subject to the requirements set forth under s. 120.13 (2) (c) to (e) and (g).

\***b0957/1.6**\* **Section 2001r.** 59.52 (29) (c) of the statutes is created to read:

59.52 (29) (c) If a county enacts an ordinance or adopts a resolution that authorizes preferences or set—asides to minority businesses in the awarding of a public work contract under par. (a), the ordinance or resolution shall require that the minority business be certified by the department of commerce under s. 560.036 (2).

\***b2012/2.4**\* **Section 2002j.** 59.54 (27) of the statutes is created to read:

- 59.54 (27) Religious organizations; contract powers. (a) *Definition*. In this subsection, "board" includes any department, as defined in s. 59.60 (2) (a).
- (b) General purpose and authority. The purpose of this subsection is to allow the board to contract with, or award grants to, religious organizations, under any program administered by the county dealing with delinquency and crime prevention or the rehabilitation of offenders, on the same basis as any other nongovernmental provider, without impairing the religious character of such organizations and without diminishing the religious freedom of beneficiaries of assistance funded under such program.
- (c) Nondiscrimination against religious organizations. If the board is authorized to contract with a nongovernmental entity, or is authorized to award grants to a nongovernmental entity, religious organizations are eligible, on the same basis as any other private organization, to be contractors and grantees under any program administered by the board so long as the programs are implemented consistently with the first amendment to the U.S. Constitution and article I, section 18, of the Wisconsin constitution. Except as provided in par. (L), the board may not discriminate against an organization that is or applies to be a contractor or grantee on the basis that the organization does or does not have a religious character or because of the specific religious nature of the organization.