SECTION 2042c. 121.41 (1) of the statutes is repealed.

SECTION 2042f. 121.41 (2) (title) of the statutes is repealed.

Section 2042h. 121.41 (2) of the statutes is renumbered 121.41.

SECTION 2042k. 121.54 (2) (c) of the statutes is amended to read:

121.54 (2) (c) An annual or special meeting of a common or union high school district, or the school board of a unified school district, or the board of school directors in charge of the school district operating under ch. 119, may elect to provide transportation for pupils who are not required to be transported under this section, including pupils attending public school under s. 118.145 (4). Transportation may be provided for all or some of the pupils who reside in the school district to and from the public school they are entitled to attend; the charter school that they attend; or the private school, within or outside the school district, within whose attendance area they reside. If transportation is provided for less than all such pupils there shall be reasonable uniformity in the minimum distance that pupils attending public and private schools will be transported. Except for elementary school districts electing to furnish transportation under par. (b) 2., this paragraph does not permit a school district operating only elementary grades to provide transportation for pupils attending private schools.

SECTION 2042m. 121.85 (6) (b) 2. of the statutes is amended to read:

121.85 **(6)** (b) 2. In each the 2003–04 school year, the school district of attendance of pupils transferring from one school district to another under sub. (3) (a) shall receive an amount equal to that produced by multiplying the number of pupils transferred into the school district under sub. (3) (a) in the previous school year by the amount produced by dividing the school district's net school cost by the sum of the membership, plus the number of pupils transferred into the school district

of attendance in the previous school year under sub. (3) (a). This subdivision applies
to aid paid in the 1995–96 school year only if the number of pupils transferring from
one school district to another under sub. (3) (a) in the 1994–95 school year constitutes
less than 5% of the total membership of the school district of attendance.
SECTION 2042r. 121.85 (6) (b) 2m. of the statutes is created to read:
121.85 (6) (b) 2m. Following the 2003-04 school year, the school district of
attendance of pupils transferring from one school district to another under sub. (3)
(a) shall receive the lesser of the average net cost per pupil under subd. 2., as
determined by the department, or:
a. In the 2004–05 school year, \$11,000 per pupil transferred.
b. In the 2005–06 school year, \$10,000 per pupil transferred.
c. In the 2006–07 school year, \$9,000 per pupil transferred.
d. In the 2007–08 school year and each subsequent school year, \$8,000 per pupil
transferred.
SECTION 2042v. 121.90 (1) (f) of the statutes is created to read:
121.90 (1) (f) In determining a school district's revenue limit for the 2003–04
school year or for any school year thereafter, the department shall calculate the
number of pupils enrolled in each school year prior to the 2003-04 school year by
counting pupils enrolled in a 4-year-old kindergarten program as provided in s.
121.004 (7) (c) and (cm).
SECTION 2043b. 121.905 (1) of the statutes is amended to read:
121.905 (1) In this section, "revenue ceiling" means \$6,700 in the 2001-02
school year and in any subsequent school year means \$6,900, except that "revenue
ceiling" means \$7,400 in the 2003-04 school year and \$7,800 in any subsequent

1	school year if a school board adopts a resolution to that effect by a two-thirds vote
2	of the members elect.
3	SECTION 2043d. 121.91 (2m) (e) (intro.) of the statutes is amended to read:
4	121.91 (2m) (e) (intro.) Except as provided in subs. (3) and (4), no school district
5	may increase its revenues for the 1999–2000, 2000–01, 2001–02, or 2002–03 school
6	year or for any school year thereafter to an amount that exceeds the amount
7	calculated as follows:
8	SECTION 2043h. 121.91 (2m) (f) of the statutes is created to read:
9	121.91 (2m) (f) Except as provided in subs. (3) and (4), no school district may
10	increase its revenues for the 2003-04 school year to an amount that exceeds the
11	amount calculated as follows:
12	1. Divide the sum of the amount of state aid received in the previous school year
13	and property taxes levied for the previous school year, excluding property taxes
14	levied for the purpose of s. 120.13 (19) and excluding funds described under sub. (4)
15	(c), by the average of the number of pupils enrolled in the 3 previous school years.
16	2. Add \$120 to the result under subd. 1.
17	3. Multiply the result under subd. 2. by the average of the number of pupils
18	enrolled in the current and the 2 preceding school years.
19	Section 2043s. 121.91 (2m) (g) of the statutes is created to read:
20	121.91 (2m) (g) Except as provided in subs. (3) and (4), no school district may
21	increase its revenues for the 2004–05 school year or for any school year thereafter
22	to an amount that exceeds the amount calculated as follows:
23	1. Divide the sum of the amount of state aid received in the previous school year

and property taxes levied for the previous school year, excluding property taxes

1	levied for the purpose of s. 120.13 (19) and excluding funds described under sub. (4)
2	(c), by the average of the number of pupils enrolled in the 3 previous school years.
3	2. Add \$100 to the result under subd. 1.
4	3. Multiply the result under subd. 2. by the average of the number of pupils
5	enrolled in the current and the 2 preceding school years.
6	SECTION 2043u. 121.91 (2m) (r) 1. (intro.) of the statutes is amended to read:
7	121.91 (2m) (r) 1. (intro.) Notwithstanding pars. (c), (d) and (e) to (g), if a school
8	district is created under s. 117.105, its revenue limit under this section for the school
9	year beginning with the effective date of the reorganization shall be determined as
10	follows except as provided under subs. (3) and (4):
11	SECTION 2043w. 121.91 (2m) (r) 2. (intro.) of the statutes is amended to read:
12	121.91 (2m) (r) 2. (intro.) If a school district is created under s. 117.105, the
13	following adjustments to the calculations under pars. (c), (d) and (e) to (g) apply for
14	the 2 school years beginning on the July 1 following the effective date of the
15	reorganization:
16	SECTION 2043y. 121.91 (4) (f) of the statutes is amended to read:
17	121.91 (4) (f) 1. For the 1999–2000 school year or any school year thereafter,
18	if the average of the number of pupils enrolled in the current and the 2 preceding
19	school years is less than the average of the number of pupils enrolled in the 3 previous
20	school years, the limit otherwise applicable under sub. (2m) (e) (f) or (g) is increased
21	by the additional amount that would have been calculated had the decline in average
22	enrollment been 25% of what it was.
23	2. Any additional revenue received by a school district as a result of subd. 1.
24	shall not be included in the base for determining the school district's limit under sub.

(2m) (e) (f) or (g) for the following school year.

SECTION 2043z. 125.14 (1) of the statutes is amended to read:

125.14 (1) Arrest. Any Subject to s. 175.38, any peace officer may arrest without warrant any person committing in his or her presence a violation of this chapter or ch. 139 and may, without a search warrant, seize any personal property used in connection with the violation.

Section 2044. 125.14 (2) (e) of the statutes is amended to read:

125.14 (2) (e) Disposal. The department shall dispose of the alcohol beverages turned over to it by the court by either giving it to law enforcement agencies free of charge for use in criminal investigations, giving it to state—operated veterans' hospitals in amounts needed for medicinal purposes, selling it to the highest bidder if the bidder is a person holding a license or permit issued under this chapter, or destroying it, at the discretion of the department. If the department elects to sell the alcohol beverages, it shall publish a class 2 notice under ch. 985 asking for sealed bids from qualified bidders. Any items or groups of items in the inventory subject to a security interest, the existence of which was established in the proceedings for conviction as being bona fide and as having been created without the secured party having notice that the items were being used or were to be used in connection with the violation, shall be sold separately. The net proceeds from the sale, less all costs of seizure, storage, and sale, shall be turned over to the state treasurer secretary of administration and credited to the common school fund.

SECTION 2045. 125.14 (2) (f) of the statutes is amended to read:

125.14 (2) (f) Sale. Any personal property, other than alcohol beverages, seized under par. (a) and fit for sale, shall be turned over by the department to the department of administration for disposal at public auction to the highest bidder, at a time and place stated in a notice of sale which describes the property to be sold.

The sale shall be held in a conveniently accessible place in the county where the property was confiscated. A copy of the notice shall be published as a class 2 notice under ch. 985. The last insertion shall be at least 10 days before the sale. The department of revenue shall serve a copy of the notice of sale at least 2 weeks before the date thereof on all persons who are or may be owners or holders of security interests in the property. Any confiscated property worth more than \$100 shall be sold separately, and the balance of the confiscated property shall be sold in bulk or separately at the discretion of the department of administration. The net proceeds from the sale, less all costs of seizure, storage, and sale, shall be turned over to the state—treasurer secretary of administration. No motor vehicle or motorboat confiscated under this section may be sold within 30 days after the date of seizure.

SECTION 2048. 134.80 of the statutes is amended to read:

134.80 Home heating fuel dealers. Any dealer selling fuel of any kind for the purpose of heating a private residence shall notify each private residential customer whose account is subject to disconnection of the existence of the fuel assistance programs provided by the department of administration under s. 16.385 16.27.

SECTION 2052. 138.052 (5) (am) 2. a. of the statutes is amended to read:

138.052 (5) (am) 2. a. On January 1, 1994, and annually thereafter Annually, the division of banking for banks, the division of savings institutions for savings and loan associations, and savings banks, and the office of credit unions for credit unions, shall determine the interest rate that is the average of the interest rates paid, rounded to the nearest one–hundredth of a percent, on regular passbook deposit accounts by institutions under the division's or office's jurisdiction at the close of the

1	last quarterly reporting period that ended at least 30 days before the determination
2	is made.
3	SECTION 2053. 138.052 (5) (am) 2. b. of the statutes is amended to read:
4	138.052 (5) (am) 2. b. The office of credit unions and the division of banking
5	shall report the rate calculated to the division of savings institutions within Within
6	5 days after the date on which the determination is made. The, the division of savings
7	institutions banking shall calculate the average, rounded to the nearest
8	one-hundredth of a percent, of the 3 rates determined by the division of banking and
9	the office of credit unions and report that interest rate to the revisor of statutes
10	within 5 days after the date on which the determination is made.
11	SECTION 2054. 138.055 (4) (a) of the statutes is repealed.
12	SECTION 2055. 138.056 (1) (a) 4. a. of the statutes is repealed.
13	SECTION 2056. 139.10 (title) of the statutes is amended to read:
14	139.10 (title) Refunds by state treasurer secretary of administration.
15	SECTION 2057. 139.10 (1) of the statutes is amended to read:
16	139.10 (1) On the certificate of the secretary, the state treasurer secretary of
17	administration shall refund to any purchaser or any banking institution in
18	Wisconsin the tax paid on intoxicating liquor or on whole cases or full kegs of
19	fermented malt beverages which are spoiled or unfit to drink and the tax paid on
20	fermented malt beverages sold to the U.S. armed forces or the secretary may make
21	allowance of the amount of the tax.
22	Section 2057m. 139.323 (intro.) of the statutes is amended to read:
23	139.323 Refunds to Indian tribes. (intro.) The department shall refund 70%
24	30% of the taxes collected under s. 139.31 (1) in respect to sales on reservations or
25	trust lands of an Indian tribe to the tribal council of the tribe having jurisdiction over

the reservation or trust land on which the sale is made if all the following conditions are fulfilled:

SECTION 2057v. 139.362 of the statutes is created to read:

139.362 Bad debt deductions. (1) In this section, "bad debt" means an amount that is equal to the purchase price of cigarettes, if such amount may be claimed as a deduction under section 166 of the Internal Revenue Code. "Bad debt" does not include financing charges, interest on the wholesale price of cigarettes, uncollectible amounts on property that remains in the seller's possession until the full purchase price is paid, expenses incurred in attempting to collect any debt, debts sold or assigned to 3rd parties for collection, and repossessed property.

(2) A person who pays the taxes imposed under this subchapter may claim as a deduction on a return under s. 139.38, and against the purchase of stamps under s. 139.32, the amount of any such taxes that are attributable to bad debt that the person writes off as uncollectible in the person's books and records and that is eligible to be deducted as bad debt for federal income tax purposes, regardless of whether the person is required to file a federal income tax return. A person who claims a deduction under this section shall claim the deduction on the return under s. 139.38 that is submitted for the period in which the person writes off the amount of the bad debt as uncollectible in the person's books and records and in which such amount is eligible to be deducted as bad debt for federal income tax purposes. If the person subsequently collects in whole or in part any bad debt for which a deduction is claimed under this section, the person shall submit to the department the portion of the deduction related to the amount collected, in the manner prescribed by the department and for the period in which the amount is collected.

- (3) A person who claims a deduction under this section shall submit the claim on a form prescribed by the department and shall submit with the form all of the following:
- (a) A copy of the original invoice for the sale of cigarettes that represents bad debt.
- (b) Evidence that the cigarettes described in the invoice under par. (a) were delivered to the person who ordered them.
- (c) Evidence that the person who ordered and received the cigarettes did not pay the person who claims a deduction under this section for the cigarettes.
- (d) Evidence that the person who claims a deduction under this section used reasonable collection practices in attempting to collect the amount owed under par.(c).

SECTION 2058. 139.39 (4) of the statutes is amended to read:

139.39 (4) No suit shall be maintained in any court to restrain or delay the collection or payment of the tax levied in s. 139.31. The aggrieved taxpayer shall pay the tax when due and, if paid under protest, may at any time within 90 days from the date of payment, sue the state to recover the tax paid. If it is finally determined that any part of the tax was wrongfully collected, the department secretary of administration shall issue a warrant on the state treasurer for pay the amount wrongfully collected, and the treasurer shall pay the same out of the general fund. A separate suit need not be filed for each separate payment made by any taxpayer, but a recovery may be had in one suit for as many payments as may have been made.

SECTION 2058f. 139.801 of the statutes is created to read:

139.801 Bad debt deductions. (1) In this section, "bad debt" means an amount that is equal to the purchase price of tobacco products, if such amount may

- be claimed as a deduction under section 166 of the Internal Revenue Code. "Bad debt" does not include financing charges, interest on the wholesale price of tobacco products, uncollectible amounts on property that remains in the seller's possession until the full purchase price is paid, expenses incurred in attempting to collect any debt, debts sold or assigned to 3rd parties for collection, and repossessed property.
- (2) A distributor who pays the taxes imposed under s. 139.76 may claim as a deduction on a return under s. 139.77 the amount of any such taxes that are attributable to bad debt that the distributor writes off as uncollectible in the distributor's books and records and that is eligible to be deducted as bad debt for federal income tax purposes, regardless of whether the distributor is required to file a federal income tax return. A distributor who claims a deduction under this section shall claim the deduction on the return under s. 139.77 that is submitted for the period in which the distributor writes off the amount of the deduction as uncollectible in the distributor's books and records and in which such amount is eligible to be deducted as bad debt for federal income tax purposes. If the distributor subsequently collects in whole or in part any bad debt for which a deduction is claimed under this section, the distributor shall include the amount collected in the return filed for the period in which the amount is collected and shall pay the tax with the return.
- (3) A distributor who claims a deduction under this section shall submit with the return under sub. (2) all of the following:
- (a) A copy of the original invoice for the sale of tobacco products that represents bad debt.
- (b) Evidence that the tobacco products described in the invoice under par. (a) were delivered to the person who ordered them.

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1	(c) Evidence that the person who ordered and received the cigarettes did not
2	pay the distributor for the tobacco products.
3	(d) Evidence that the distributor used reasonable collection practices in
4	attempting to collect the amount owed under par. (c).
5	SECTION 2059. 146.185 (1) (i) of the statutes is amended to read:
6	146.185 (1) (i) "State agency" has the meaning given in s. 16.70 (1) (1e).
7	SECTION 2059g. 146.185 (3) of the statutes is amended to read:
8	146.185 (3) From the appropriation under s. 20.435 (5) (kb), the department
9	shall annually award up to \$200,000 in grants for activities to improve the health
10	status of economically disadvantaged minority group members. A person may apply
11	in the manner specified by the department, for a grant of up to \$50,000 in each fiscal
12	year to conduct these activities. An awardee of a grant under this subsection shall
13	provide, for at least 50% of the grant amount, matching funds that may consist of
14	funding or an in-kind contribution. An applicant that is not a federally qualified
15	health center, as defined under 42 CFR 405.2401 (b) shall receive priority for grants
16	awarded under this subsection.
17	SECTION 2060. 146.59 (3) (b) of the statutes is amended to read:
18	146.59 (3) (b) Any authorization under par. (a) shall comply with all applicable
19	provisions of subch. V of ch. 111 and ch. 230, any delegation of authority by the
20	department of employment relations office of state human resources management
21	to the board, and any collective bargaining agreement with respect to employees or
22	the board.
23	SECTION 2061. 146.65 (1) (a) and (b) of the statutes are amended to read:

146.65 (1) (a) In-state fiscal year 2001-02, not more than \$618,000 and in fiscal

year 2002-03 each fiscal year, not more than \$232,000, to the rural health dental

1	clinic located in Ladysmith that provides dental services to persons who are
2	developmentally disabled or elderly or who have low income, in the counties of Rusk,
3	Price, Taylor, Sawyer, and Chippewa.
4	(b) In fiscal year 2001-02, not more than \$294,500 and in state fiscal year
5	2002-03 each fiscal year, not more than \$355,600, to the rural health dental clinic
6	located in Menomonie that provides dental services to persons who are
7	developmentally disabled or elderly or who have low income, in the counties of
8	Barron, Chippewa, Dunn, Pepin, Pierce, Polk, and St. Croix.
9	SECTION 2061s. 146.885 of the statutes is repealed.
10	SECTION 2062. 146.93 of the statutes is repealed.
11	SECTION 2064. 146.997 (4) (a) of the statutes is amended to read:
12	146.997 (4) (a) Subject to par. (b), any Any employee of a health care facility
13	or health care provider who is subjected to disciplinary action, or who is threatened
14	with disciplinary action, in violation of sub. (3) may file a complaint with the
15	department under s. 106.54 (6). If the department finds that a violation of sub. (3)
16	has been committed, the department may take such action under s. 111.39 as will
17	effectuate the purpose of this section.
18	SECTION 2065. 146.997 (4) (b) of the statutes is repealed.
19	SECTION 2066. 146.997 (4) (c) of the statutes is amended to read:
20	146.997 (4) (c) Section 111.322 (2m) applies to a disciplinary action arising in
21	connection with any proceeding under par. (a) or (b).
22	SECTION 2067. 149.10 (8b) of the statutes is repealed.
23	SECTION 2068. 149.14 (5) (e) of the statutes is amended to read:
24	149.14 (5) (e) Subject to sub. (8) (b), the department may, by rule under s. 149.17
25	(4), establish for prescription drug coverage under sub. (3) (d) copayment amounts,

coinsurance rates, and copayment and coinsurance out—of—pocket limits over which the plan will pay 100% of covered costs under sub. (3) (d). The department may provide subsidies for prescription drug copayment amounts paid by eligible persons under s. 149.165 (2) (a) 1. to 5. Any copayment amount, coinsurance rate, or out—of—pocket limit established under this paragraph is subject to the approval of the board. Copayments and coinsurance paid by an eligible person under this paragraph are separate from and do not count toward the deductible and covered costs not paid by the plan under pars. (a) to (c).

SECTION 2069. 149.143 (1) (a) of the statutes is repealed.

SECTION 2070. 149.143 (1) (b) (intro.) of the statutes is repealed.

SECTION 2071. 149.143 (1) (b) 1. of the statutes is renumbered 149.143 (1) (am), and 149.143 (1) (am) 1., 2., 3. and 4., as renumbered, are amended to read:

149.143 (1) (am) 1. First, from premiums from eligible persons with coverage under s. 149.14 (2) (a) set at a rate that is 140% to 150% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan and from eligible persons with coverage under s. 149.14 (2) (b) set in accordance with s. 149.14 (5m), including amounts received for premium and, deductible, and prescription drug copayment subsidies under s. 149.144 and under the transfer to the fund from the appropriation account under s. 20.435 (4) (ah), and from premiums collected from eligible persons with coverage under s. 149.146 set in accordance with s. 149.146 (2) (b).

- 2. Second, from moneys specified under sub. (2m), to the extent that the amounts under subd. 1. -a. are insufficient to pay 60% of plan costs.
- 3. Third, by increasing premiums from eligible persons with coverage under s. 149.14 (2) (a) to more than the rate at which premiums were set under subd. 1. -a.

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but not more than 200% of the rate that a standard risk would be charged under an
individual policy providing substantially the same coverage and deductibles as are
provided under the plan and from eligible persons with coverage under s. $149.14(2)$
(b) by a comparable amount in accordance with s. 149.14 (5m), including amounts
received for premium and, deductible, and prescription drug copayment subsidies
$under\ s.\ 149.144\ and\ under\ the\ transfer\ to\ the\ fund\ from\ the\ appropriation\ account$
under s. 20.435 (4) (ah), and by increasing premiums from eligible persons with
coverage under s. 149.146 in accordance with s. 149.146 (2) (b), to the extent that the
amounts under subd. 1. a. subds. 1. and b. 2. are insufficient to pay 60% of plan costs.

4. Fourth, notwithstanding subd. 2. par. (bm), by increasing insurer assessments, excluding assessments under s. 149.144, and adjusting provider payment rates, subject to s. 149.142 (1) (b) and excluding adjustments to those rates under s. 149.144, in equal proportions and to the extent that the amounts under subd. 1. a. to c. subds. 1. to 3. are insufficient to pay 60% of plan costs.

Section 2072. 149.143(1)(b)(2). of the statutes is renumbered 149.143(1)(bm).

Section 2073. 149.143 (2) (a) (intro.) of the statutes is amended to read:

149.143 (2) (a) (intro.) Prior to each plan year, the department shall estimate the operating and administrative costs of the plan and the costs of the premium reductions under s. 149.165 and, the deductible reductions under s. 149.14 (5) (a), and any prescription drug copayment reductions under s. 149.14 (5) (e) for the new plan year and do all of the following:

Section 2074. 149.143 (2) (a) 1. a. of the statutes is amended to read:

149.143 (2) (a) 1. a. Estimate the amount of enrollee premiums that would be received in the new plan year if the enrollee premiums were set at a level sufficient, when including amounts received for premium and, deductible, and prescription

<u>drug copayment</u> subsidies under s. 149.144 and under the transfer to the fund from
the appropriation account under s. 20.435 (4) (ah) and from premiums collected from
eligible persons with coverage under s. 149.146 set in accordance with s. 149.146 (2)
(b), to cover 60% of the estimated plan costs for the new plan year, after deducting
from the estimated plan costs the amount available for transfer to the fund from the
appropriation account under s. 20.435 (4) (af) for that plan year.
SECTION 2075. 149.143 (2) (a) 1. b. of the statutes is amended to read:
149.143 (2) (a) 1. b. Estimate the amount of enrollee premiums that will be
received under sub. (1) (b) 1. a. (am) 1.
SECTION 2076. 149.143 (2) (a) 2. of the statutes is amended to read:
149.143 (2) (a) 2. After making the determinations under subd. 1., by rule set
premium rates for the new plan year, including the rates under s. 149.146 (2) (b), in
the manner specified in sub. (1) (b) 1. a. and c. (am) 1. and 3. and such that a rate for
coverage under s. 149.14 (2) (a) is approved by the board and is not less than 140%
nor more than 200% of the rate that a standard risk would be charged under an
individual policy providing substantially the same coverage and deductibles as are
provided under the plan.
SECTION 2077. 149.143 (2) (a) 3. of the statutes is amended to read:
149.143 (2) (a) 3. By rule set the total insurer assessments under s. 149.13 for
the new plan year by estimating and setting the assessments at the amount
necessary to equal the amounts specified in sub. (1) (b) 1. d. and 2. a. (am) 4. and (bm)
1. and notify the commissioner of the amount.
SECTION 2078. 149.143 (2) (a) 4. of the statutes is amended to read:

149.143 (2) (a) 4. By the same rule as under subd. 3. adjust the provider

payment rate for the new plan year, subject to s. 149.142 (1) (b), by estimating and

1	setting the rate at the level necessary to equal the amounts specified in sub. (1) (b)
2	1. d. and 2. b. (am) 4. and (bm) 2. and as provided in s. 149.145.
3	SECTION 2079. 149.143 (2) (b) of the statutes is amended to read:
4	149.143 (2) (b) In setting the premium rates under par. (a) 2., the insurer
5	assessment amount under par. (a) 3. and the provider payment rate under par. (a)
6	4. for the new plan year, the department shall include any increase or decrease
7	necessary to reflect the amount, if any, by which the rates and amount set under par.
8	(a) for the current plan year differed from the rates and amount which would have
9	equaled the amounts specified in sub. (1) (b) (am) and (bm) in the current plan year.
10	SECTION 2080. 149.143 (2m) (a) 1. of the statutes is amended to read:
11	149.143 (2m) (a) 1. The amount of premiums received in a plan year from all
12	eligible persons, including amounts received for premium and, deductible, and
13	prescription drug copayment subsidies.
14	SECTION 2081. 149.143 (2m) (a) 2. of the statutes is amended to read:
15	149.143 (2m) (a) 2. The amount of premiums, including amounts received for
16	premium and, deductible, and prescription drug copayment subsidies, necessary to
17	cover 60% of the plan costs for the plan year, after deducting the amount transferred
18	to the fund from the appropriation account under s. 20.435 (4) (af).
19	SECTION 2082. 149.143 (2m) (b) 1. of the statutes is amended to read:
20	149.143 (2m) (b) 1. To reduce premiums in succeeding plan years as provided
21	in sub. (1) (b) 1. b. (am) 2. For eligible persons with coverage under s. 149.14 (2) (a),
22	premiums may not be reduced below 140% of the rate that a standard risk would be
23	charged under an individual policy providing substantially the same coverage and
24	deductibles as are provided under the plan.
25	SECTION 2083. 149.143 (3) (a) of the statutes is amended to read:

149.143 (3) (a) If, during a plan year, the department determines that the amounts estimated to be received as a result of the rates and amount set under sub. (2) (a) 2. to 4. and any adjustments in insurer assessments and the provider payment rate under s. 149.144 will not be sufficient to cover plan costs, the department may by rule increase the premium rates set under sub. (2) (a) 2. for the remainder of the plan year, subject to s. 149.146 (2) (b) and the maximum specified in sub. (2) (a) 2., by rule increase the assessments set under sub. (2) (a) 3. for the remainder of the plan year, subject to sub. (1) (b) 2. a. (bm) 1., and by the same rule under which assessments are increased adjust the provider payment rate set under sub. (2) (a) 4. for the remainder of the plan year, subject to sub. (1) (b) 2. b. (bm) 2. and s. 149.142 (1) (b).

SECTION 2084. 149.143 (3) (b) of the statutes is amended to read:

149.143 (3) (b) If the department increases premium rates and insurer assessments and adjusts the provider payment rate under par. (a) and determines that there will still be a deficit and that premium rates have been increased to the maximum extent allowable under par. (a), the department may further adjust, in equal proportions, assessments set under sub. (2) (a) 3. and the provider payment rate set under sub. (2) (a) 4., without regard to sub. (1) (b) 2. (bm) but subject to s. 149.142 (1) (b).

Section 2085. 149.144 of the statutes is amended to read:

149.144 Adjustments to insurer assessments and provider payment rates for premium and, deductible, and prescription drug copayment reductions. If the moneys transferred to the fund under the appropriation under s. 20.435 (4) (ah) are insufficient to reimburse the plan for premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a), or the department

determines that the moneys transferred or to be transferred to the fund under the appropriation under s. 20.435 (4) (ah) will be insufficient to reimburse the plan for premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a), the The department may shall, by rule, adjust in equal proportions the amount of the assessment set under s. 149.143 (2) (a) 3. and the provider payment rate set under s. 149.143 (2) (a) 4., subject to ss. 149.142 (1) (b) and 149.143 (1) (b) 1. (am), sufficient to reimburse the plan for premium reductions under s. 149.165 and, deductible reductions under s. 149.14 (5) (a). If the department makes the adjustment under this section, the, and any prescription drug copayment reductions under s. 149.14 (5) (e). The department shall notify the commissioner so that the commissioner may levy any increase in insurer assessments.

SECTION 2086. 149.145 of the statutes is amended to read:

149.145 Program budget. The department, in consultation with the board, shall establish a program budget for each plan year. The program budget shall be based on the provider payment rates specified in s. 149.142 and in the most recent provider contracts that are in effect and on the funding sources specified in s. ss. 149.143 (1) and 149.144, including the methodologies specified in ss. 149.143, 149.144, and 149.146 for determining premium rates, insurer assessments, and provider payment rates. Except as otherwise provided in s. 149.143 (3) (a) and (b) and subject to s. 149.142 (1) (b), from the program budget the department shall derive the actual provider payment rate for a plan year that reflects the providers' proportional share of the plan costs, consistent with ss. 149.143 and 149.144. The department may not implement a program budget established under this section unless it is approved by the board.

SECTION 2087. 149.146 (2) (a) of the statutes is amended to read:

149.146 (2) (a) Except as specified by the department, the terms of coverage
under s. 149.14, including deductible reductions under s. 149.14 (5) (a) and
prescription drug copayment reductions under s. 149.14 (5) (e), do not apply to the
coverage offered under this section. Premium reductions under s. 149.165 do not
apply to the coverage offered under this section.
SECTION 2088. 149.16 (1) of the statutes is repealed.
SECTION 2089. 149.16 (1m) of the statutes is created to read:
149.16 (1m) The plan administrator may be selected by the department in a
competitive bidding process.
SECTION 2090. 149.16 (4) of the statutes is amended to read:
149.16 (4) The If the plan administrator is the fiscal agent under s. 49.45 (2)
(b) 2., the plan administrator shall account for costs related to the plan separately
from costs related to medical assistance under subch. IV of ch. 49.
SECTION 2091. 149.165 (4) of the statutes is amended to read:
149.165 (4) The department shall reimburse the plan for premium reductions
under sub. (2) and, deductible reductions under s. 149.14 (5) (a) with moneys
transferred to the fund, and prescription drug copayment reductions under s. 149.14
(5) (e) from the appropriation account under s. 20.435 (4) (ah) (v).
SECTION 2092. 150.963 (3) (e) of the statutes is amended to read:
150.963 (3) (e) Accept on behalf of the state and deposit with the state treasurer
secretary of administration any grant, gift, or contribution made to assist in meeting
the cost of carrying out the purposes of this subchapter, and expend those funds for
the purposes of this subchapter.
SECTION 2092c. 153.01 (4j) of the statutes is created to read:

1	153.01 (4j) "Entity" means a nonstock corporation organized under ch. 181 that
2	is described in section 501 (c) (6) of the Internal Revenue Code and is exempt from
3	federal income tax under section 501 (a) of the Internal Revenue Code, and that does
4	all of the following:
5	(a) Represents at least 70% of the hospitals in Wisconsin.
6	(b) Receives oversight with respect to services performed by the entity under
7	this chapter from a group that is composed of all of the following:
8	1. The secretary of health and family services, who shall serve as chairperson
9	and nonvoting member of the group.
10	2. Two members designated by Wisconsin Manufacturers and Commerce, Inc.
11	3. Two members designated by the Wisconsin Association of Health Plans, Inc.
12	4. One member designated by the Wisconsin State AFL-CIO.
13	5. Two members designated by the Wisconsin Hospital Association, Inc.
14	6. One member designated by the speaker of the assembly.
15	7. One member designated by the senate majority leader.
16	SECTION 2092d. 153.05 (1) of the statutes is amended to read:
17	153.05 (1) In order to provide to hospitals, health care providers, insurers,
18	consumers, governmental agencies and others information concerning health care
19	providers and uncompensated health care services, and in order to provide
20	information to assist in peer review for the purpose of quality assurance, the:
21	(a) The department shall collect from health care providers other than
22	hospitals and ambulatory surgery centers, analyze, and disseminate health care
23	information, as adjusted for case mix and severity, in language that is
24	understandable to lay persons <u>laypersons</u> .

SECTION 2092e. 153.05 (1) (b) of the statutes is created to read:

153.05 (1) (b) The entity under contract under sub. (2m) (a) shall collect from hospitals and ambulatory surgery centers the health care information required of hospitals and ambulatory surgery centers by the department under ch. 153, 2001 stats., and the rules promulgated under ch. 153, 2001 stats., including, by the date that is 18 months after the date of the contract under sub. (2m) (a), all outpatient hospital—based services. The entity shall analyze and disseminate that health care information, as adjusted for case mix and severity, in the manner required under this chapter, under ch. 153, 2001 stats., and under the rules promulgated under ch. 153, 2001 stats., and in language that is understandable to laypersons.

Section 2092f. 153.05 (2m) of the statutes is created to read:

153.05 (2m) (a) Notwithstanding s. 16.75 (1), (2), and (3m), by the date that is the first day of the 2nd month after the effective date of this paragraph [revisor inserts date], the department of administration shall, from the appropriation under s. 20.505 (1) (im), contract with an entity to perform services under this chapter that are specified for the entity with respect to the collection, analysis, and dissemination of health care information of hospitals and ambulatory surgery centers. The department of administration may not, by this contract, require from the entity any collection, analysis, or dissemination of health care information of hospitals and ambulatory surgery centers that is in addition to that required under this chapter, and may include in the contract only terms standard to contracts with the department of administration under subch. IV of ch. 16.

(b) Biennially, the group specified under s. 153.01 (4j) (b) shall review the entity's performance, including the timeliness and quality of the reports generated by the entity. If the group is dissatisfied with the entity's performance, the group may recommend to the department of administration that that department use a

competitive request–for–proposal process to solicit offers from other organizations
for performance of the services. If no organization responds to the request for
proposal, the department of health and family services shall perform the services
specified for the entity with respect to the collection, analysis, and dissemination of
health care information of hospitals and ambulatory surgery centers under this
chapter.

(c) By April 1, 2004, and annually thereafter, the secretary of health and family services, as chairperson of the group specified under s. 153.01 (4j) (b), shall submit to the chief clerk of each house of the legislature for distribution to the legislature under s. 13.172 (2), a report concerning the content and number of reports and currency of information and reports generated in the previous calendar year by the entity under contract under s. 153.05 (2m).

SECTION 2092g. 153.05 (3) of the statutes is renumbered 153.05 (3) (a) and amended to read:

153.05 (3) (a) Upon request of the department for health care information relating to health care providers other than hospitals and ambulatory surgery centers, state agencies shall provide that health care information to the department for use in preparing reports under this chapter.

Section 2092h. 153.05 (3) (b) of the statutes is created to read:

153.05 (3) (b) Upon request of the entity under contract under sub. (2m) (a) for health care information relating to hospitals and ambulatory surgery centers, state agencies shall provide that health care information to the entity for use in preparing reports under this chapter.

Section 2092i. 153.05 (5) of the statutes is renumbered 153.05 (5) (a) and amended to read:

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153.05 (5) (a) Unless sub. (13) (a) applies, the department may require health care providers other than hospitals and ambulatory surgery centers to submit to the department information specified by rule under s. 153.75 (1) (n) for the preparation of reports, plans, and recommendations in the form specified by the department by rule.

Section 2092j. 153.05 (5) (b) of the statutes is created to read:

153.05 (5) (b) Unless sub. (13) (b) applies, the entity under contract under sub. (2m) (a) may require hospitals and ambulatory surgery centers to submit to the entity information for the preparation of reports, plans, and recommendations in the form specified by the entity.

SECTION 2092k. 153.05 (6) of the statutes is amended to read:

153.05 **(6)** The department may contract with a public or private entity organization that is not a major purchaser, payer or provider of health care services in this state for the provision of data processing services for the collection, analysis and dissemination of health care information under sub. (1) (a).

SECTION 2092L. 153.05 (6r) of the statutes is amended to read:

153.05 (**6r**) The department shall study and, based on the results of the study, may develop and implement a voluntary system of health care plan reporting that enables purchasers and consumers to assess the performance of health care plans and the health care providers, other than hospitals and ambulatory surgery centers, that are employed or reimbursed by the health care plans. The department shall undertake the study and any development and implementation in cooperation with private health care purchasers, the board, the department of employee trust funds, the office of the commissioner of insurance, the interagency coordinating council created under s. 15.107 (7), major associations of health care providers, health care

plans and consumers. If implemented, the department shall operate the system in a manner so as to enable purchasers, consumers, the public, the governor and legislators to assess the performance of health care plans and health care providers other than hospitals and ambulatory surgery centers.

SECTION 2093bg. 153.05 (8) of the statutes is renumbered 153.05 (8) (a) and amended to read:

and disseminate, in language that is understandable to lay persons laypersons, claims information and other health care information, as adjusted for case mix and severity, under the provisions of this chapter, as determined by rules promulgated by the department, from health care providers, other than hospitals and ambulatory surgery centers, specified by rules promulgated by the department. Data from those health care providers may be obtained through sampling techniques in lieu of collection of data on all patient encounters and data collection procedures shall minimize unnecessary duplication and administrative burdens. If the department collects health care provider specific data from health care plans data that is specific to health care providers other than hospitals and ambulatory surgery centers, the department shall attempt to avoid collecting the same data from those health care providers.

Section 2093bh. 153.05 (8) (b) of the statutes is created to read:

153.05 (8) (b) Unless sub. (13) (b) applies, the entity under contract under sub. (2m) (a) shall collect, analyze, and disseminate, in language that is understandable to laypersons, claims information and other health care information, as adjusted for case mix and severity, under the provisions of this chapter, from hospitals and ambulatory surgery centers. Data from hospitals and ambulatory surgery centers

1	may be obtained through sampling techniques in lieu of collection of data on all
2	patient encounters, and data collection procedures shall minimize unnecessary
3	duplication and administrative burdens.
4	Section 2093c. 153.05 (9) of the statutes is renumbered 153.05 (9) (a) and
5	amended to read:
6	153.05 (9) (a) The department shall provide orientation and training to health
7	care providers, other than hospitals and ambulatory surgery centers, who submit
8	data under this chapter, to explain the process of data collection and analysis and the
9	procedures for data verification, comment, interpretation, and release.
10	Section 2093d. 153.05 (9) (b) of the statutes is created to read:
11	153.05 (9) (b) The entity under contract under sub. (2m) (a) shall provide
12	orientation and training to hospitals and ambulatory surgery centers that submit
13	data under this chapter, to explain the process of data collection and analysis and the
14	procedures for data verification, comment, interpretation, and release.
15	Section 2093e. 153.05 (12) of the statutes is renumbered 153.05 (12) (a).
16	Section 2093f. 153.05 (12) (b) of the statutes is created to read:
17	153.05 (12) (b) The entity under contract under sub. (2m) (a) shall, to the extent
18	possible and upon request, assist members of the public in interpreting data in
19	health care information disseminated by the entity.
20	Section 2094c. 153.05 (13) of the statutes is renumbered 153.05 (13) (a) and
21	amended to read:
22	153.05 (13) (a) The department may waive the requirement under sub. (1) (a),
23	(5) (a), or (8) (a) for a health care provider, other than a hospital or ambulatory
24	surgery center, who requests the waiver and presents evidence to the department
25	that the requirement under sub. (1) (a), (5) (a), or (8) (a) is burdensome, under

1	standards established by the department by rule. The department shall develop a
2	form for use by -a the health care provider in submitting a request under this
3	subsection paragraph.
4	SECTION 2094d. 153.05 (13) (b) of the statutes is created to read:
5	153.05 (13) (b) The entity under contract under sub. (2m) (a) may waive the
6	requirement under sub. (1) (b), (5) (b), or (8) (b) for a hospital or ambulatory surgery
7	center that requests the waiver and presents evidence to the entity that the
8	requirement under sub. (1) (b), (5) (b), or (8) (b) is burdensome. The entity shall
9	develop a form for use by the hospital or ambulatory surgery center in submitting a
10	request under this paragraph.
11	SECTION 2094e. 153.07 (1) of the statutes is amended to read:
12	153.07 (1) The board shall advise the department with regard to the collection,
13	analysis and dissemination of health care information required of the department
14	by this chapter.
15	SECTION 2094f. 153.07 (4) (b) of the statutes is amended to read:
16	153.07 (4) (b) Provide oversight on the standard reports required of the
17	$\underline{\text{department}}$ under this chapter, including the $\underline{\text{reports}}$ $\underline{\text{report}}$ under $\underline{\text{ss. }153.20}$ and $\underline{\text{s. }}$
18	153.21 <u>(1)</u> .
19	Section 2094g. 153.07 (4) (c) of the statutes is amended to read:
20	153.07 (4) (c) Develop the overall strategy and direction for implementation of
21	the department's duties and powers under this chapter.
22	Section 2094h. 153.08 (5) of the statutes is created to read:
23	153.08 (5) The entity under contract under s. 153.05 (2m) (a) shall annually
24	publish a hospital rate increase report that contains all of the following information:
25	(a) For each hospital that publishes a notice under sub (4) all of the following:

1. The name of the hospital and the city, village, or town in which the hospital
is located.
2. The date the rate increase is to take effect.
3. The annualized percentage rate increase that will result.
4. The geographic area of analysis in which the hospital is located.
(b) A list of hospitals that have closed since 1993.
SECTION 2094i. 153.10 of the statutes is renumbered 153.10 (1) and amended
to read:
153.10 (1) The department shall prepare, and submit to the governor and the
chief clerk of each house of the legislature for distribution to the legislature under
s. 13.172 (2), standard reports concerning health care providers other than hospitals
and ambulatory surgery centers that the department prepares and shall collect
information necessary for preparation of those reports.
SECTION 2094j. 153.10 (2) of the statutes is created to read:
153.10 (2) The entity under contract under s. 153.05 (2m) (a) shall prepare, and
submit to the governor and the chief clerk of each house of the legislature for
distribution to the legislature under s. 13.172 (2), standard reports concerning
hospitals and ambulatory surgery centers that the entity prepares and shall collect
information necessary for preparation of those reports.
SECTION 2094k. 153.20 of the statutes is amended to read:
153.20 Uncompensated health care services report. (1) The department
entity under contract under s. 153.05 (2m) (a) shall prepare, and submit to the
governor and to the chief clerk of each house of the legislature for distribution to the
legislature under s. 13.172 (2), an annual report setting forth the number of patients

to whom uncompensated health care services were provided by each hospital and the

total charges for the uncompensated health care services provided to the patients for the preceding year, together with the number of patients and the total charges that were projected by the hospital for that year in the plan filed under sub. (2).

(2) Every hospital shall file with the department entity under contract under s. 153.05 (2m) (a) an annual plan setting forth the projected number of patients to whom uncompensated health care services will be provided by the hospital and the projected total charges for the uncompensated health care services to be provided to the patients for the ensuing year.

SECTION 2094L. 153.21 of the statutes is renumbered 153.21 (1) and amended to read:

153.21 (1) The department shall prepare and submit to the governor and to the chief clerk of each house of the legislature for distribution to the legislature under s. 13.172 (2) an annual guide to assist consumers in selecting health care providers other than hospitals and ambulatory surgery centers and health care plans. The guide shall be written in language that is understandable to lay persons laypersons. The department shall widely publicize and distribute the guide to consumers.

Section 2094m. 153.21 (2) of the statutes is created to read:

153.21 (2) The entity under contract under s. 153.05 (2m) (a) shall prepare and submit to the governor and to the chief clerk of each house of the legislature for distribution to the legislature under s. 13.172 (2) an annual guide to assist consumers in selecting hospitals and ambulatory surgery centers. The guide shall be written in language that is understandable to laypersons and shall include data derived from the annual survey of hospitals conducted by the American Hospital Association and the annual hospital fiscal survey. The entity shall widely publicize and distribute the guide to consumers.

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1	SECTION 2094n. 153.22 of the statutes is created to read:
2	153.22 Patient-level data utilization, charge, and quality report. (1)
3	The entity under contract under s. 153.05 (2m) (a) shall prepare and submit to the
4	governor and to the chief clerk of each house of the legislature for distribution to the
5	legislature under s. 13.172 (2), an annual report that summarizes utilization, charge,
6	and quality data on patients treated by hospitals and ambulatory surgery centers
7.	during the most recent calendar year.
8	SECTION 2094q. 153.45 (title) of the statutes is amended to read:
9	153.45 (title) Release of data by department.
10	Section 2094r. 153.45 (1) (b) 1. of the statutes is renumbered 153.46 (1) (b) and
11	amended to read:
12	153.46 (1) (b) For information that is submitted by hospitals or ambulatory
13	surgery centers, public use data files that do not permit the identification of specific
14	patients, employers, or health care providers, as defined by rules promulgated by the
15	department. The identification of patients, employers, or health care providers shall
16	be protected by all necessary means, including the deletion of patient identifiers and
17	the use of calculated variables and aggregated variables.
18	Section 2094s. 153.45 (1) (b) 2. of the statutes is renumbered 153.45 (1) (b),
19	and 153.45 (1) (b) (intro.), as renumbered, is amended to read:
20	153.45 (1) (b) (intro.) For information that is submitted by health care
21	providers other than hospitals or ambulatory surgery centers, public use data files
22	that do not permit the identification of specific patients, employers, or health care

providers, as defined by rules promulgated by the department. The identification of

patients, employers, or health care providers shall be protected by all necessary

means, including the deletion of patient identifiers; the use of calculated variables

and aggregated variables; the specification of counties as to residence, rather than zip codes; the use of 5—year categories for age, rather than exact age; not releasing information concerning a patient's race or, ethnicity, or dates of admission, discharge, procedures, or visits; and masking sensitive diagnoses and procedures by use of larger diagnostic and procedure categories. Public use data files under this subdivision paragraph may include only the following:

SECTION 2094t. 153.45 (1) (c) (intro.) of the statutes is amended to read:

153.45 (1) (c) (intro.) Custom-designed reports containing portions of the data under par. (b). Of information submitted by health care providers that are not hospitals or ambulatory surgery centers, requests under this paragraph for data elements other than those available for public use data files under par. (b) 2π , including the patient's month and year of birth, require review and approval by the independent review board before the data elements may be released. Information that contains the name of a health care provider that is not a hospital or ambulatory surgery center may be released only if the independent review board first reviews and approves the release or if the department promulgates rules that specify circumstances under which the independent review board need not review and approve the release. Reports under this paragraph may include the patient's zip code only if at least one of the following applies:

Section 2094u. 153.45 (2) of the statutes is amended to read:

153.45 (2) The department shall provide to other entities agencies or to organizations the data necessary to fulfill their statutory mandates for epidemiological purposes or to minimize the duplicate collection of similar data elements.

SECTION 2094v. 153.45 (3) of the statutes is amended to read:

	153.45 (3) The department may, but is not required to, release health care
	provider-specific and employer-specific data that relates to health care providers
	other than hospitals and ambulatory surgery centers, except in public use data files
	as specified under sub. (1) (b), in a manner that is specified in rules promulgated by
	the department.
	SECTION 2094w. 153.45 (5) of the statutes is amended to read:
	153.45 (5) The department may not release any health care information that
	is subject to rules promulgated under s. 153.75 (1) (b) until the verification, comment
	and review procedures required under those rules have been complied with. Nothing
	in this subsection prohibits release of health care provider-specific information to
	the a health care provider that is not a hospital or ambulatory surgery center, to
	whom the information relates is specific.
	SECTION 2094x. 153.46 of the statutes is created to read:
	153.46 Release of data by entity. (1) After completion of data verification,
	comment, and review procedures, the entity under contract under s. 153.05 (2m) (a)
	shall release data, together with comments, if any, in the following forms:
	(a) Standard reports.
	(c) Custom-designed reports containing portions of the data under par. (b).
	Reports under this paragraph may include the patient's zip code only if at least one
	of the following applies:
	1. Other potentially identifying data elements are not released.
	2. Population density is sufficient to mask patient identity.
_	3. Other potentially identifying data elements are grouped to provide

population density sufficient to protect identity.

4. Multiple years of data elements are added to protect identity.

1	(1m) After completion of data verification and review procedures specified
2	under s. 153.01 (4j), the entity may, but is not required to, release special data
3	compilations.
4	(2) The entity under contract under s. 153.05 (2m) (a) shall provide to the
5	department and to any other organization or agency the data necessary to fulfill the
6	department's, organization's, or agency's statutory mandates for epidemiological
7	purposes.
8	(3) The entity under contract under s. 153.05 (2m) (a) may, but is not required
9	to, release hospital-specific, ambulatory surgery center-specific, and hospital or
10	ambulatory surgery center employer-specific data, except in public use data files as
11	specified under sub. (1) (b).
12	(4) The entity under contract under s. 153.05 (2m) (a) shall, as limited by this
13	section and s. 153.50, provide equal access to the data collected and reports
14	generated by the entity to all requesters that pay the fees under s. 153.65 (2).
15	(5) The entity under contract under s. 153.05 (2m) (a) shall provide to the
16	department, without charge, claims and provider survey information that is
17	requested by or required to be provided to the department.
18	(6) No person who purchases a data compilation or report under s. 153.65 (2)
19	may release or sell the data sets so purchased, except that the department may
20	release data and information as part of reports created by the department.
21	SECTION 2094y. 153.50 (3) (intro.) of the statutes is amended to read:
22	153.50 (3) $\overline{\text{Departmental measures}}$ $\underline{\text{Measures}}$ to ensure protection of patient
23	IDENTITY. (intro.) To ensure that the identity of patients is protected when

information obtained by the department or by the entity under contract under s.

1	153.05 (2m) (a) is disseminated, the department and the entity shall do all of the
2	following:
3	Section 2095c. 153.50 (3) (a) of the statutes is amended to read:
4	153.50 (3) (a) Aggregate any data element category containing small numbers,
5	using. The department, in so doing, shall use procedures that are developed by the
6	department and approved by the board and that follow commonly accepted
7	statistical methodology.
8	SECTION 2095d. 153.50 (3) (b) (intro.) of the statutes is amended to read:
9	153.50 (3) (b) (intro.) Remove and destroy all of the following data elements on
10	the uniform patient billing forms that are received by the department or by the entity
11	under the requirements of this chapter:
12	Section 2095e. 153.50 (3) (b) 7. of the statutes is amended to read:
13	153.50 (3) (b) 7. The patient's account number, after use only as verification of
14	data by the department or by the entity.
15	Section 2095f. 153.50 (3) (d) of the statutes is amended to read:
16	153.50 (3) (d) Require that a purchaser of data under this chapter sign and have
17	notarized the data use agreement of the department or of the entity specified in par.
18	(c).
19	Section 2095g. 153.50 (4) (a) 1. of the statutes is renumbered 153.50 (4) (a)
20	1. a.
21	SECTION 2095h. 153.50 (4) (a) 1. b. of the statutes is created to read:
22	153.50 (4) (a) 1. b. An agent of the entity under contract under s. 153.05 (2m)
23	(a) who is responsible for the patient-identifiable data of the entity, in order to store
24	the data and ensure the accuracy of the information in the database of the entity.
25	Section 2095i. 153.50 (4) (a) 2. of the statutes is amended to read:

153.50 (4) (a) 2. A health care provider that is not a hospital or ambulatory
surgery center or the agent of such a health care provider, to ensure the accuracy of
the information in the database of the department, or a health care provider that is
a hospital or ambulatory surgery center or the agent of such a health care provider,
to ensure the accuracy of the information in the database of the entity under contract
under s. 153.05 (2m) (a).
SECTION 2095j. 153.50 (4) (a) 3. of the statutes is amended to read:
153.50 (4) (a) 3. The department, for purposes of epidemiological investigation
or, with respect to information from health care providers that are not hospitals or
ambulatory surgery centers, to eliminate the need for duplicative databases.
SECTION 2095k. 153.50 (4) (a) 4. of the statutes is amended to read:
153.50 (4) (a) 4. An entity agency or organization that is required by federal
or state statute to obtain patient-identifiable data for purposes of epidemiological
investigation or to eliminate the need for duplicative databases.
SECTION 2095L. 153.50 (5) (a) (intro.) of the statutes is amended to read:
153.50 (5) (a) (intro.) The department or an entity that is under contract under
s. 153.05 (2m) (a) may not release or provide access to patient–identifiable data to
a person authorized under sub. (4) (a) unless the authorized person requests the
department or entity, in writing, to release the patient-identifiable data. The
request shall include all of the following:
Section 2095m. 153.50 (5) (a) 4. (intro.) of the statutes is amended to read:
153.50 (5) (a) 4. (intro.) For an entity agency or organization that is authorized
under sub. (4) (a) 4. to receive or have access to patient-identifiable data, evidence,
in writing, of all of the following:
Section 2095n. 153.50 (5) (b) (intro.) of the statutes is amended to read:

153.50 (5) (b) (intro.) Upon receipt of a request under par. (a), the department
or entity under contract under s. 153.05 (2m) (a), whichever is appropriate, shall, as
soon as practicable, comply with the request or notify the requester, in writing, of all
of the following:

Section 2095p. 153.50 (5) (b) 1. of the statutes is amended to read:

153.50 (5) (b) 1. That the department <u>or entity</u> is denying the request in whole or in part.

Section 2095q. 153.50 (6) (a) of the statutes is amended to read:

153.50 (6) (a) The department or entity under contract under s. 153.05 (2m) (a) may not require a health care provider submitting health care information under this chapter to include the patient's name, street address or social security number.

SECTION 2095rc. 153.60 (1) of the statutes is amended to read:

153.60 (1) The department shall, by the first October 1 after the commencement of each fiscal year, estimate the total amount of expenditures under this chapter for the department and the board for that fiscal year for data collection, database development and maintenance, generation of data files and standard reports, orientation and training provided under s. 153.05 (9) (a) and maintaining the board. The department shall assess the estimated total amount for that fiscal year less the estimated total amount to be received for purposes of administration of this chapter under s. 20.435 (4) (hi) during the fiscal year, the unencumbered balance of the amount received for purposes of administration of this chapter under s. 20.435 (4) (hi) from the prior fiscal year and the amount in the appropriation account under s. 20.435 (1) (dg), 1997 stats., for the fiscal year, to health care providers, other than hospitals and ambulatory surgery centers, who are in a class of health care providers from whom the department collects data under this chapter

in a manner specified by the department by rule. The department shall obtain approval from the board for the amounts of assessments for health care providers other than hospitals and ambulatory surgery centers. The department shall work together with the department of regulation and licensing to develop a mechanism for collecting assessments from health care providers other than hospitals and ambulatory surgery centers. No health care provider that is not a facility may be assessed under this subsection an amount that exceeds \$75 per fiscal year. Each hospital shall pay the assessment on or before December 1. All payments of assessments shall be deposited in credited to the appropriation under s. 20.435 (4) (hg).

SECTION 2095rd. 153.65 of the statutes is renumbered 153.65 (1) and amended to read:

153.65 (1) The department may, but is not required to, provide, upon request from a person, a data compilation or a special report based on the information collected by the department. The department shall establish user fees for the provision of these compilations or reports, payable by the requester, which shall be sufficient to fund the actual necessary and direct cost of the compilation or report. All moneys collected under this section subsection shall be credited to the appropriation under s. 20.435 (4) (hi).

Section 2095re. 153.65 (2) of the statutes is created to read:

153.65 (2) Beginning January 1, 2004, unless the entity under contract under s. 153.05 (2m) (a) otherwise agrees and except as provided in s. 153.46 (6), the entity has the exclusive right to use and to provide for a fee, upon request from a person, a data compilation or a special report based on the information concerning hospitals and ambulatory surgery centers that is collected by the entity or provided by the

department to the entity. Subject to approval by the group specified under s. 153.01
(4j) (b), the entity shall establish reasonable and necessary user fees for the provision
of a compilation or report, payable by the requester, which shall be sufficient to fund
the actual necessary and direct cost of the compilation or report. The entity may
retain all user fees paid under this subsection.
SECTION 2095rf. 153.75 (1) (a) of the statutes is amended to read:
153.75 (1) (a) Providing procedures, for information submitted by health care
providers who are not hospitals or ambulatory surgery centers, to ensure the
protection of patient confidentiality under s. 153.50.
SECTION 2095rg. 153.75 (1) (b) of the statutes is amended to read:
153.75 (1) (b) Establishing procedures under which health care providers who
are not hospitals or ambulatory surgery centers are permitted to review, verify and
comment on information and include the comments with the information.
SECTION 2095rh. 153.75 (1) (L) of the statutes is repealed.
SECTION 2095ri. 153.75 (1) (m) of the statutes is amended to read:
153.75 (1) (m) Specifying the classes of health care providers, other than
hospitals and ambulatory surgery centers, from whom claims data and other health
care information will be collected.
SECTION 2095rj. 153.75 (1) (n) of the statutes is amended to read:
153.75 (1) (n) Specifying the uniform data set of health care information, as
adjusted for case mix and severity, to be collected from health care providers other
than hospitals and ambulatory surgery centers.
SECTION 2095rk. 153.75 (1) (p) of the statutes is amended to read:
153.75 (1) (p) Specifying the methods for using and disseminating health care
data in order for health care providers other than hospitals and ambulatory surgery

1	centers to provide health care that is effective and economically efficient and for
2	consumers and purchasers to make informed decisions in selecting health care plans
3	and health care providers.
4	SECTION 2095rL. 153.75 (1) (q) of the statutes is amended to read:
5	153.75 (1) (q) Specifying the information to be provided by the department in
6	the consumer guide under s. $153.21 (1)$.
7	Section 2095rm. 153.75 (1) (r) of the statutes is amended to read:
8	153.75 (1) (r) Specifying the standard reports that will be issued by the
9	department in addition to those required in ss. 153.20 and s. 153.21 (1).
10	SECTION 2095rn. 153.75 (1) (t) of the statutes is amended to read:
11	153.75 (1) (t) Establishing standards for determining under s. 153.05 (13) (a)
12	if a requirement under s. $153.05(1)(\underline{a}, (5)(\underline{a}), or (8)(\underline{a})$ is burdensome for a health
13	care provider other than a hospital or ambulatory surgery center.
14	Section 2095rp. 153.75 (1) (u) of the statutes is amended to read:
15	153.75 (1) (u) Specifying the methods for adjusting health care information
16	obtained from health care providers other than hospitals and ambulatory surgery
17	centers for case mix and severity.
18	Section 2095rt. 153.75 (2) (a) of the statutes is amended to read:
19	153.75 (2) (a) Exempting certain classes of health care providers that are not
20	hospitals or ambulatory surgery centers from providing all or portions of the data
21	required under this chapter.
22	Section 2099. 165.30 (3) of the statutes is amended to read:
23	165.30 (3) COLLECTION PROCEEDS. (a) All obligations collected by the
24	department of justice under this section shall be paid to the state treasurer secretary
25	of administration and deposited in the appropriate fund.

(b) From the amount of obligations collected by the department of justice under
this section, the treasurer secretary of administration shall credit an amount equal
to the reasonable and necessary expenses incurred by the department of justice
related to collecting those obligations to the appropriation account under s. 20.455
(1) (gs).
SECTION 2099f. 165.60 of the statutes is amended to read:
165.60 Law enforcement. The department of justice is authorized to enforce
ss. 101.123 (2), (5), and (8), 944.30, 944.31, 944.33, 944.34, 945.02 (2), 945.03 (1m),
and 945.04 (1m) and is invested with the powers conferred by law upon sheriffs and
municipal police officers in the performance of those duties. This section does not
deprive or relieve sheriffs, constables, and other local police officers of the power and
duty to enforce those sections, and those officers shall likewise enforce those sections.
SECTION 2099j. 165.70 (1) (b) of the statutes is amended to read:
165.70 (1) (b) Enforce Except as provided in sub. (1m), enforce chs. 945 and 961
and ss. 940.20 (3), 940.201, 941.25 to 941.27, 943.01 (2) (c), 943.011, 943.27, 943.28,
943.30, 944.30, 944.31, 944.32, 944.33, 944.34, 946.65, 947.02 (3) and (4), 948.075,
and 948.08.
SECTION 2099p. 165.70 (1m) of the statutes is created to read:
165.70 (1m) The department may not investigate violations of or otherwise
enforce s. 945.03 (2m) or 945.04 (2m).
SECTION 2099v. 165.70 (3) of the statutes is amended to read:
165.70 (3) It is the intention of this section to give the attorney general
responsibility for devising programs to control crime statewide in nature,
importance or influence, drugs and narcotics abuse, commercial gambling other than
what is described in s. 945.03 (2m) or 945.04 (2m), prostitution, and arson. Nothing

$\sqrt{1}$	herein shall deprive or relieve local peace officers of the power and duty to enforce
	those provisions enumerated in sub. (1).
3	SECTION 2099xd. 165.72 (title) of the statutes is amended to read:
$oxed{4}$	165.72 (title) Dangerous weapons in public schools and controlled
5	<u>Controlled</u> substances hotline and rewards for controlled substances tips.
6	SECTION 2099xg. 165.72 (1) (ad) of the statutes is repealed.
7	Section 2099xm. 165.72 (2) (c) of the statutes is repealed.
8	Section 2019xs. 165.72 (2g) of the statutes is repealed.
9	Section 2099ax. 165.72 (2m) of the statutes is repealed.
10	Section 2099xz. 165.72 (7) of the statutes is amended to read:
11	165.72 (7) Publicity From the appropriation under s. 20.455 (2) (a), the
12	department shall purchase public information and promotion services regarding the
13	toll-free telephone number under sub. (2). The department and any agency
14	providing publicity services under this subsection shall cooperate with the
15	department of public instruction in publicizing, in public schools, the use of the
16	toll–free telephone number <u>under sub. (2)</u> .
17	SECTION 2100. 165.755 (1) (a) of the statutes is amended to read:
18	165.755 (1) (a) Except as provided in par. (b), a court shall impose a crime
19	laboratories and drug law enforcement assessment of \$5 \undersigned 57 if the court imposes a
20	sentence, places a person on probation or imposes a forfeiture for a violation of state
21	law or for a violation of a municipal or county ordinance.
22	SECTION 2101. 165.755 (3) of the statutes is amended to read:
23	165.755 (3) Except as provided in sub. (4), after the court determines the
24	amount due under sub. (1) (a), the clerk of the court shall collect and transmit the

amount to the county treasurer under s. 59.40 (2) (m). The county treasurer shall