

**ASSEMBLY AMENDMENT 37,
TO ASSEMBLY SUBSTITUTE AMENDMENT 1,
TO 2005 ASSEMBLY BILL 100**

June 21, 2005 – Offered by Representative RICHARDS.

1 At the locations indicated, amend the substitute amendment as follows:

2 **1.** Page 17, line 5: after that line insert:

3 “**SECTION 41u.** 15.07 (2) (b) of the statutes is repealed.”.

4 **2.** Page 17, line 6: after that line insert:

5 “**SECTION 42s.** 15.07 (2) (n) of the statutes is created to read:

6 15.07 (2) (n) The chairperson of the health care quality and patient safety board

7 shall be designated biennially by the governor.”.

8 **3.** Page 17, line 12: after that line insert:

9 “**SECTION 45c.** 15.07 (3) (bm) 1. of the statutes is repealed.”.

10 **4.** Page 17, line 23: after that line insert:

11 “**SECTION 48f.** 15.105 (13) of the statutes is created to read:

1 15.105 **(13)** HEALTH CARE QUALITY AND PATIENT SAFETY BOARD. (a) *Creation;*
2 *membership.* There is created a health care quality and patient safety board,
3 attached to the department of administration under s. 15.03, consisting of the
4 following members:

5 1. The secretary of health and family services, the secretary of employee trust
6 funds, and the secretary of administration or their designees.

7 2. One physician, as defined in s. 448.01 (5).

8 3. One representative of hospitals.

9 4. One employer purchaser of health care.

10 5. One representative of the insurance industry.

11 6. One representative of health maintenance organizations, as defined in s.
12 609.01 (2).

13 7. One member who shall represent the public interest.

14 (b) *Terms.* The board members specified in par. (a) 2. to 7. shall be appointed
15 for 4–year terms.”.

16 **5.** Page 17, line 24: after that line insert:

17 “**SECTION 52p.** 15.195 (6) of the statutes is repealed.”.

18 **6.** Page 18, line 22: after that line insert:

19 “**SECTION 57g.** 16.03 (3) of the statutes is amended to read:

20 16.03 **(3)** REPORT. The interagency coordinating council shall report at least
21 twice annually to the health care quality and patient safety board ~~on health care~~
22 ~~information~~ in the department of health and family services administration,
23 concerning the council’s activities under this section.”.

1 **7.** Page 164, line 16: increase the dollar amount for fiscal year 2005–06 by
2 \$2,163,700 and increase the dollar amount for fiscal year 2006–07 by \$2,187,800 to
3 increase funding for the purpose for which the appropriation is made.

4 **8.** Page 165, line 24: increase the dollar amount for fiscal year 2005–06 by
5 \$1,616,400 and increase the dollar amount for fiscal year 2006–07 by \$1,616,400 to
6 increase funding for the purpose for which the appropriation is made.

7 **9.** Page 166, line 16: increase the dollar amount for fiscal year 2005–06 by
8 \$816,600 and increase the dollar amount for fiscal year 2006–07 by \$406,300 to
9 increase funding for the purpose for which the appropriation is made.

10 **10.** Page 167, line 4: increase the dollar amount for fiscal year 2005–06 by
11 \$250,000 and increase the dollar amount for fiscal year 2006–07 by \$250,000 to
12 increase funding for coverage of wigs.

13 **11.** Page 167, line 4: increase the dollar amount for fiscal year 2005–06 by
14 \$381,600 and increase the dollar amount for fiscal year 2006–07 by \$384,700 to
15 increase funding for coverage of bariatric surgery.

16 **12.** Page 167, line 4: increase the dollar amount for fiscal year 2005–06 by
17 \$1,783,300 and increase the dollar amount for fiscal year 2006–07 by \$2,388,900 to
18 increase funding for home health, personal care, and private duty nursing services
19 under Medical Assistance.

20 **13.** Page 169, line 22: after that line insert:

| | | | | | |
|---|--------------------------------------|-----|---|-----------|-------------|
| 1 | “(r) Health care quality improvement | | | | |
| 2 | fund; medical assistance | SEG | C | –0– | –0– |
| 3 | (rg) Health care quality improvement | | | | |
| 4 | fund; medical assistance pay- | | | | |
| 5 | ments | SEG | S | –0– | –0– |
| 6 | (rm) Health care quality improvement | | | | |
| 7 | fund; hospital supplemental pay- | | | | |
| 8 | ments | SEG | A | 9,703,400 | 9,714,000”. |

9 **14.** Page 170, line 13: increase the dollar amount for fiscal year 2006–07 by
10 \$1,096,100 to increase funding for the purposes for which the appropriation is made.

11 **15.** Page 205, line 7: delete lines 7 to 9.

12 **16.** Page 207, line 20: after that line insert:

| | | | | | |
|----|--------------------------------------|----|---|-----|-------|
| 13 | “(i) Health care quality and patient | | | | |
| 14 | safety board; gifts and grants | PR | C | –0– | –0–”. |

15 **17.** Page 208, line 19: after that line insert:

| | | | | | |
|----|--------------------------------------|-----|---|------------|---------|
| 16 | “(q) Health care quality and patient | | | | |
| 17 | safety board; general program | | | | |
| 18 | operations | SEG | B | 250,000 | 250,000 |
| 19 | (qb) Health care quality and patient | | | | |
| 20 | safety board; grants or loans | SEG | C | 10,000,000 | –0–”. |

21 **18.** Page 289, line 21: after that line insert:

22 “**SECTION 310g.** 20.435 (4) (b) of the statutes is amended to read:

1 20.435 (4) (b) *Medical Assistance program benefits.* Biennially, the amounts
2 in the schedule to provide a portion of the state share of Medical Assistance program
3 benefits administered under s. 49.45, to provide a portion of the Medical Assistance
4 program benefits administered under s. 49.45 that are not also provided under par.
5 (o), to fund the pilot project under s. 46.27 (9) and (10), to provide a portion of the
6 facility payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund services
7 provided by resource centers under s. 46.283, and for services under the family care
8 benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the department may
9 transfer from this appropriation account to the appropriation account under sub. (7)
10 (kb) funds in the amount of and for the purposes specified in s. 46.485.
11 Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or
12 deposit into this appropriation account and may transfer between fiscal years funds
13 that it transfers from the appropriation account under sub. (7) (kb) for the purposes
14 specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the department may
15 transfer from this appropriation account to the appropriation account under sub. (7)
16 (bd) funds in the amount and for the purposes specified in s. 49.45 (~~6v~~) (6L).”.

17 **19.** Page 290, line 8: after that line insert:

18 “**SECTION 312r.** 20.435 (4) (gp) of the statutes is amended to read:

19 20.435 (4) (gp) *Medical assistance; hospital assessments.* All moneys received
20 under s. 146.99, to provide a portion of the state share of Medical Assistance program
21 benefits administered under s. 49.45, to provide a portion of Medical Assistance
22 program benefits administered under s. 49.45 that are not also provided under par.
23 (o), to fund the pilot project under s. 46.27 (9) and (10), to provide a portion of the
24 facility payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund services

1 provided by resource centers under s. 46.283, and for services under the family care
2 benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the department may
3 transfer from this appropriation account to the appropriation account under sub. (7)
4 (kb) funds in the amount of and for the purposes specified in s. 46.485.
5 Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or
6 deposit into this appropriation account and may transfer between fiscal years funds
7 that it transfers from the appropriation account under sub. (7) (kb) for the purposes
8 specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the department may
9 transfer from this appropriation account to the appropriation account under sub. (7)
10 (bd) funds in the amount and for the purposes specified in s. 49.45 (~~6v~~) (6L).”.

11 **20.** Page 290, line 9: delete that line and substitute:

12 “**SECTION 313mg.** 20.435 (4) (hg) of the statutes is renumbered 20.435 (1) (hg)
13 and amended to read:

14 20.435 (1) (hg) *General program operations; health care information.* The
15 amounts in the schedule to fund the activities of the department of health and family
16 services and the board on health care information under ch. 153. The contract fees
17 paid under s. 153.05 (6m) and assessments paid under s. 153.60, less \$250,000 in
18 assessments paid in each fiscal year, shall be credited to this appropriation account.”.

19 **21.** Page 291, line 6: after that line insert:

20 “**SECTION 317h.** 20.435 (4) (r) of the statutes is created to read:

21 20.435 (4) (r) *Health care quality improvement fund; Medical Assistance.* From
22 the health care quality improvement fund, as a continuing appropriation, the
23 amounts in the schedule to provide a portion of the state share of Medical Assistance
24 program benefits administered under s. 49.45, to provide a portion of the Medical

1 Assistance program benefits administered under s. 49.45 that are not also provided
2 under par. (o), to fund the pilot project under s. 46.27 (9) and (10), to provide a portion
3 of the facility payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund
4 services provided by resource centers under s. 46.283, and for services under the
5 family care benefit under s. 46.284 (5).

6 **SECTION 317k.** 20.435 (4) (rg) of the statutes is created to read:

7 20.435 (4) (rg) *Health care quality improvement fund; Medical Assistance*
8 *payments.* From the health care quality improvement fund, a sum sufficient equal
9 to the amounts transferred under s. 16.518 (4), to provide a portion of the state share
10 of Medical Assistance program benefits administered under s. 49.45, to provide a
11 portion of the Medical Assistance program benefits administered under s. 49.45 that
12 are not also provided under par. (o), to fund the pilot project under s. 46.27 (9) and
13 (10), to provide a portion of the facility payments under 1999 Wisconsin Act 9, section
14 9123 (9m), to fund services provided by resource centers under s. 46.283, and for
15 services under the family care benefit under s. 46.284 (5).

16 **SECTION 317m.** 20.435 (4) (rg) of the statutes, as created by 2005 Wisconsin Act
17 (this act), is repealed.

18 **SECTION 317p.** 20.435 (4) (rm) of the statutes is created to read:

19 20.435 (4) (rm) *Health care quality improvement fund; hospital supplemental*
20 *payments.* From the health care quality improvement fund, the amounts in the
21 schedule to provide payments for direct graduate medical education, a major
22 managed care supplement, a pediatric services supplement, rural hospital
23 supplements under s. 49.45 (5m) (am), and an essential access city hospital under
24 s. 49.45 (6x) (a).”.

1 **22.** Page 291, line 21: after that line insert:

2 “**SECTION 322g.** 20.435 (5) (ab) of the statutes, as affected by 2005 Wisconsin
3 Act (this act), is amended to read:

4 20.435 (5) (ab) *Child abuse and neglect prevention and universal home*
5 *visitation grants.* The amounts in the schedule for child abuse and neglect
6 prevention grants under s. 46.515 and for universal home visitation grants under s.
7 46.516.”.

8 **23.** Page 294, line 10: after that line insert:

9 “**SECTION 330d.** 20.435 (7) (bd) of the statutes is amended to read:

10 20.435 (7) (bd) *Community options program; pilot projects; family care benefit.*
11 The amounts in the schedule for assessments, case planning, services,
12 administration and risk reserve escrow accounts under s. 46.27, for pilot projects
13 under s. 46.271 (1), to fund services provided by resource centers under s. 46.283 (5),
14 for services under the family care benefit under s. 46.284 (5) and for the payment of
15 premiums under s. 49.472 (5). If the department transfers funds to this
16 appropriation account from the appropriation account under sub. (4) (b), the
17 amounts in the schedule for the fiscal year for which the transfer is made are
18 increased by the amount of the transfer for the purposes specified in s. 49.45 (6v) (6L).
19 Notwithstanding ss. 20.001 (3) (a) and 20.002 (1), the department may under this
20 paragraph transfer moneys between fiscal years. Except for moneys authorized for
21 transfer under this appropriation account or under s. 46.27 (7) (fm) or (g), all moneys
22 under this appropriation account that are allocated under s. 46.27 and are not spent
23 or encumbered by counties or by the department by December 31 of each year shall

1 lapse to the general fund on the succeeding January 1 unless transferred to the next
2 calendar year by the joint committee on finance.”.

3 **24.** Page 309, line 11: after that line insert:

4 “**SECTION 402j.** 20.505 (4) (i) of the statutes is created to read:

5 20.505 (4) (i) *Health care quality and patient safety board; gifts and grants.* All
6 money received from gifts, grants, bequests, and devises to the health care quality
7 and patient safety board, for the purposes for which made.”.

8 **25.** Page 309, line 25: after that line insert:

9 “**SECTION 409j.** 20.505 (4) (q) of the statutes is created to read:

10 20.505 (4) (q) *Health care quality and patient safety board; general program*
11 *operations.* Biennially, from the health care quality improvement fund, the amounts
12 in the schedule for general program operations of the health care quality and patient
13 safety board.

14 **SECTION 409L.** 20.505 (4) (qb) of the statutes is created to read:

15 20.505 (4) (qb) *Health care quality and patient safety board; grants or loans.*

16 As a continuing appropriation, from the health care quality improvement fund, the
17 amounts in the schedule for grants or loans under s. 153.076.”.

18 **26.** Page 349, line 20: after that line insert:

19 “**SECTION 521r.** 25.17 (1) (gd) of the statutes is created to read:

20 25.17 (1) (gd) *Health care quality improvement fund (s. 25.775);”.*

21 **27.** Page 355, line 12: after that line insert:

22 “**SECTION 538m.** 25.775 of the statutes is created to read:

1 **25.775 Health care quality improvement fund.** There is created a
2 separate nonlapsible trust fund designated as the health care quality improvement
3 fund, consisting of all of the following:

4 **(1)** All moneys transferred to the fund from the general fund under 2005
5 Wisconsin Act (this act), section 9221 (5f).

6 **(2)** In each fiscal year, \$250,000 of the assessments paid under s. 153.60.

7 **(3)** Repayment of any loans made under s. 153.076 (2).”.

8 **28.** Page 439, line 21: after that line insert:

9 “**SECTION 857h.** 46.27 (9) (a) of the statutes is amended to read:

10 46.27 **(9)** (a) The department may select up to 5 counties that volunteer to
11 participate in a pilot project under which they will receive certain funds allocated for
12 long-term care. The department shall allocate a level of funds to these counties
13 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), (gp), (r), (rg),
14 or (w) to nursing homes for providing care because of increased utilization of nursing
15 home services, as estimated by the department. In estimating these levels, the
16 department shall exclude any increased utilization of services provided by state
17 centers for the developmentally disabled. The department shall calculate these
18 amounts on a calendar year basis under sub. (10).

19 **SECTION 857i.** 46.27 (9) (a) of the statutes, as affected by 2005 Wisconsin Act
20 (this act), is amended to read:

21 46.27 **(9)** (a) The department may select up to 5 counties that volunteer to
22 participate in a pilot project under which they will receive certain funds allocated for
23 long-term care. The department shall allocate a level of funds to these counties
24 equal to the amount that would otherwise be paid under s. 20.435 (4) (b), (gp), (r), ~~(rg)~~.

1 or (w) to nursing homes for providing care because of increased utilization of nursing
2 home services, as estimated by the department. In estimating these levels, the
3 department shall exclude any increased utilization of services provided by state
4 centers for the developmentally disabled. The department shall calculate these
5 amounts on a calendar year basis under sub. (10).

6 **SECTION 857m.** 46.27 (10) (a) 1. of the statutes is amended to read:

7 46.27 (10) (a) 1. The department shall determine for each county participating
8 in the pilot project under sub. (9) a funding level of state medical assistance
9 expenditures to be received by the county. This level shall equal the amount that the
10 department determines would otherwise be paid under s. 20.435 (4) (b), (gp), (r), (rg),
11 or (w) because of increased utilization of nursing home services, as estimated by the
12 department.

13 **SECTION 857n.** 46.27 (10) (a) 1. of the statutes, as affected by 2005 Wisconsin
14 Act (this act), is amended to read:

15 46.27 (10) (a) 1. The department shall determine for each county participating
16 in the pilot project under sub. (9) a funding level of state medical assistance
17 expenditures to be received by the county. This level shall equal the amount that the
18 department determines would otherwise be paid under s. 20.435 (4) (b), (gp), (r), (~~rg~~),
19 or (w) because of increased utilization of nursing home services, as estimated by the
20 department.”.

21 **29.** Page 439, line 22: after that line insert:

22 “**SECTION 862x.** 46.275 (5) (a) of the statutes is amended to read:

23 46.275 (5) (a) Medical Assistance reimbursement for services a county, or the
24 department under sub. (3r), provides under this program is available from the

1 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), (rg), and (w). If 2 or more
2 counties jointly contract to provide services under this program and the department
3 approves the contract, Medical Assistance reimbursement is also available for
4 services provided jointly by these counties.

5 “**SECTION 862y.** 46.275 (5) (a) of the statutes, as affected by 2005 Wisconsin Act
6 (this act), is amended to read:

7 46.275 (5) (a) Medical Assistance reimbursement for services a county, or the
8 department under sub. (3r), provides under this program is available from the
9 appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), ~~(rg)~~, and (w). If 2 or more
10 counties jointly contract to provide services under this program and the department
11 approves the contract, Medical Assistance reimbursement is also available for
12 services provided jointly by these counties.”.

13 **30.** Page 440, line 2: after that line insert:

14 “**SECTION 865p.** 46.275 (5) (c) of the statutes is amended to read:

15 46.275 (5) (c) The total allocation under s. 20.435 (4) (b), (gp), (o), (r), (rg), and
16 (w) to counties and to the department under sub. (3r) for services provided under this
17 section may not exceed the amount approved by the federal department of health and
18 human services. A county may use funds received under this section only to provide
19 services to persons who meet the requirements under sub. (4) and may not use
20 unexpended funds received under this section to serve other developmentally
21 disabled persons residing in the county.

22 **SECTION 865q.** 46.275 (5) (c) of the statutes, as affected by 2005 Wisconsin Act
23 (this act), is amended to read:

1 46.275 (5) (c) The total allocation under s. 20.435 (4) (b), (gp), (o), (r), ~~(rg)~~, and
2 (w) to counties and to the department under sub. (3r) for services provided under this
3 section may not exceed the amount approved by the federal department of health and
4 human services. A county may use funds received under this section only to provide
5 services to persons who meet the requirements under sub. (4) and may not use
6 unexpended funds received under this section to serve other developmentally
7 disabled persons residing in the county.”.

8 **31.** Page 440, line 8: delete “who has resided in a nursing”.

9 **32.** Page 440, line 9: delete “home for at least 100 consecutive days”.

10 **33.** Page 440, line 16: after that line insert:

11 “**SECTION 870g.** 46.278 (6) (d) of the statutes is amended to read:

12 46.278 (6) (d) If a county makes available nonfederal funds equal to the state
13 share of service costs under a waiver received under sub. (3), the department may,
14 from the appropriation under s. 20.435 (4) (o), provide reimbursement for services
15 that the county provides under this section to persons who are in addition to those
16 who may be served under this section with funds from the appropriation under s.
17 20.435 (4) (b), (r), (rg), or (w).

18 **SECTION 870h.** 46.278 (6) (d) of the statutes, as affected by 2005 Wisconsin Act
19 (this act), is amended to read:

20 46.278 (6) (d) If a county makes available nonfederal funds equal to the state
21 share of service costs under a waiver received under sub. (3), the department may,
22 from the appropriation under s. 20.435 (4) (o), provide reimbursement for services
23 that the county provides under this section to persons who are in addition to those

1 who may be served under this section with funds from the appropriation under s.
2 20.435 (4) (b), (r), ~~(rg)~~, or (w).”.

3 **34.** Page 444, line 18: after that line insert:

4 “**SECTION 873s.** 46.283 (5) of the statutes is amended to read:

5 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
6 (bm), (gp), (pa), (r), (rg), and (w) and (7) (b), (bd), and (md), the department may
7 contract with organizations that meet standards under sub. (3) for performance of
8 the duties under sub. (4) and shall distribute funds for services provided by resource
9 centers.

10 **SECTION 873t.** 46.283 (5) of the statutes, as affected by 2005 Wisconsin Act ...
11 (this act), is amended to read:

12 46.283 (5) FUNDING. From the appropriation accounts under s. 20.435 (4) (b),
13 (bm), (gp), (pa), (r), ~~(rg)~~, and (w) and (7) (b), (bd), and (md), the department may
14 contract with organizations that meet standards under sub. (3) for performance of
15 the duties under sub. (4) and shall distribute funds for services provided by resource
16 centers.

17 **SECTION 873u.** 46.284 (5) (a) of the statutes is amended to read:

18 46.284 (5) (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
19 (im), (o), (r), (rg), and (w) and (7) (b) and (bd), the department shall provide funding
20 on a capitated payment basis for the provision of services under this section.
21 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
22 under contract with the department may expend the funds, consistent with this
23 section, including providing payment, on a capitated basis, to providers of services
24 under the family care benefit.

1 **SECTION 873v.** 46.284 (5) (a) of the statutes, as affected by 2005 Wisconsin Act
2 (this act), is amended to read:

3 46.284 **(5)** (a) From the appropriation accounts under s. 20.435 (4) (b), (g), (gp),
4 (im), (o), (r), ~~(rg)~~, and (w) and (7) (b) and (bd), the department shall provide funding
5 on a capitated payment basis for the provision of services under this section.
6 Notwithstanding s. 46.036 (3) and (5m), a care management organization that is
7 under contract with the department may expend the funds, consistent with this
8 section, including providing payment, on a capitated basis, to providers of services
9 under the family care benefit.”.

10 **35.** Page 447, line 22: after that line insert:

11 “**SECTION 887g.** 46.515 (1) (i) of the statutes is repealed.

12 **SECTION 888g.** 46.515 (1) (j) of the statutes is repealed.”.

13 **36.** Page 448, line 16: after that line insert:

14 “**SECTION 890g.** 46.515 (2) of the statutes, as affected by 2005 Wisconsin Act
15 (this act), is amended to read:

16 46.515 **(2)** FUNDS PROVIDED. If a county or Indian tribe applies and is selected
17 by the department under sub. (5) to participate in the program under this section,
18 the department shall award, from the appropriation under s. 20.435 (5) (ab), a grant
19 annually to be used only for the purposes specified in sub. (4) (a) and (am). The
20 minimum amount of a grant is \$10,000. The department shall determine the amount
21 of a grant awarded to a county, ~~other than a county with a population of 500,000 or~~
22 ~~more,~~ or Indian tribe in excess of the minimum amount based on the number of births
23 that are funded by medical assistance under subch. IV of ch. 49 in that county or the
24 reservation of that Indian tribe ~~in proportion to the number of births that are funded~~

1 ~~by medical assistance under subch. IV of ch. 49 in all of the counties and the~~
2 ~~reservations of all of the Indian tribes to which grants are awarded under this~~
3 ~~section. The department shall determine the amount of a grant awarded to a county~~
4 ~~with a population of 500,000 or more in excess of the minimum amount based on 60%~~
5 ~~of the number of births that are funded by medical assistance under subch. IV of ch.~~
6 ~~49 in that county in proportion to the number of births that are funded by medical~~
7 ~~assistance under subch. IV of ch. 49 in all of the counties and the reservations of all~~
8 ~~of the Indian tribes to which grants are awarded under this section.~~

9 **SECTION 891g.** 46.515 (3) (title) of the statutes is repealed.

10 **SECTION 892g.** 46.515 (3) (a) of the statutes is repealed.

11 **SECTION 893g.** 46.515 (3) (b) of the statutes is renumbered 46.515 (3) and
12 amended to read:

13 **46.515 (3) JOINT APPLICATION PERMITTED.** Two or more counties and Indian tribes
14 may submit a joint application to the department. ~~Each county or Indian tribe in a~~
15 ~~joint application shall be counted as a separate county or Indian tribe for the purpose~~
16 ~~of limiting the number of counties and Indian tribes selected in each state fiscal~~
17 ~~biennium.~~

18 **SECTION 894g.** 46.516 of the statutes is created to read:

19 **46.516 Universal home visitation services. (1) DEFINITIONS.** In this
20 section:

21 (a) “County department” means a county department of human services or
22 social services under s. 46.215, 46.22, or 46.23.

23 (b) “Indian tribe” means a federally recognized American Indian tribe or band
24 in this state.

25 (c) “Local health department” has the meaning given in s. 250.01 (4).

1 (d) “Local partnership” means any combination of 2 or more county
2 departments, local health departments, Indian tribes, and private nonprofit
3 agencies that have agreed to implement jointly a program of universal home
4 visitation services under this section.

5 (e) “Organization” means a county department, local health department,
6 Indian tribe, private nonprofit agency, or local partnership.

7 (f) “Private nonprofit agency” means a nonstock corporation organized under
8 ch. 181 that is a nonprofit corporation, as defined in s. 181.0103 (17).

9 **(2) AWARDING OF GRANTS.** From the appropriation account under s. 20.435 (5)
10 (ab), the department shall award grants to applying organizations for the provision
11 of the home visitation services specified in sub. (3) (a). The department shall
12 determine the amount of a grant awarded to an organization based on the number
13 of first–time births in the community served by the organization. The department
14 shall provide competitive application procedures for selecting organizations to
15 receive grants under this subsection and shall establish a method for ranking
16 applicants based on the quality of their applications. The department shall require
17 a grant recipient to provide matching funds or in–kind contributions as determined
18 by the department and shall ensure that a grant recipient does not use any grant
19 moneys awarded to supplant any other moneys used by the grant recipient at the
20 time of the awarding of the grant to provide home visitation services.

21 **(3) PURPOSES OF GRANTS.** (a) *Universal home visitation services.* An
22 organization that receives a grant under sub. (2) shall use the grant moneys awarded
23 to provide a one–time visit to all first–time parents in the community served by the
24 organization for the purposes of providing those parents with basic information
25 regarding infant health and nutrition, the care, safety, and development of infants,

1 and emergency services for infants; identifying the needs of those parents; and
2 providing those parents with referrals to programs, services, and other resources
3 that may meet those needs. An organization may visit a first-time parent only if the
4 parent or, if the parent is a child, his or her parent, guardian, or legal custodian
5 consents to the visit. No person who is required or permitted to report suspected or
6 threatened abuse or neglect under s. 48.981 (2) may make or threaten to make such
7 a report based on a refusal of a person to receive a home visit under this paragraph.

8 (b) *Start-up costs and capacity building.* In the first year in which a grant
9 under sub. (2) is awarded to an organization, the organization may use a portion of
10 the grant to pay for start-up costs and capacity building related to the provision of
11 home visitation services by the organization. The department shall determine the
12 maximum amount of a grant that an organization may use to pay for those start-up
13 costs and that capacity building.

14 (4) CONFIDENTIALITY. (a) *Nondisclosure of information; exceptions.* No person
15 may use or disclose any information concerning an individual who is offered home
16 visitation services under sub. (3) (a), including an individual who declines to receive
17 those services, or concerning an individual who is provided with a referral under sub.
18 (3) (a), including an individual who declines the referral, unless disclosure of the
19 information is required or permitted under s. 48.981 (2), the use or disclosure of the
20 information is connected to the administration of the program under this section, or
21 the individual has given his or her written informed consent to the use or disclosure
22 of the information.

23 (b) *Explanation of confidentiality requirements.* An organization that receives
24 a grant under sub. (2) shall provide or shall designate an individual or entity to
25 provide an explanation of the confidentiality requirements under par. (a) to each

1 individual who is offered home visitation services under sub. (3) (a) by the
2 organization.

3 **(5)** NOTIFICATION OF PARENT PRIOR TO MAKING ABUSE OR NEGLECT REPORT. If a
4 person who is providing home visitation services under sub. (3) (a) determines that
5 he or she is required or permitted to make a report under s. 48.981 (2) about a child
6 in a family to which the person is providing those services, the person shall, prior to
7 making the report under s. 48.981 (2), make a reasonable effort to notify the child's
8 parent that a report under s. 48.981 (2) will be made and to encourage the parent to
9 contact a county department under s. 46.22 or 46.23 or, in a county having a
10 population of 500,000 or more, the department to request assistance. The
11 notification requirements under this subsection do not affect the reporting
12 requirements under s. 48.981 (2).

13 **(6)** INFORMATIONAL MATERIALS. Any informational materials about the home
14 visitation services provided under sub. (3) (a) that are distributed to a person who
15 is offered or who is receiving those services shall state the sources of funding for the
16 services.”.

17 **37.** Page 495, line 5: after that line insert:

18 **“SECTION 1120r.** 49.45 (2) (a) 17. of the statutes is amended to read:

19 49.45 **(2)** (a) 17. Notify the governor, the joint committee on legislative
20 organization, the joint committee on finance, and appropriate standing committees,
21 as determined by the presiding officer of each house, if the appropriation accounts
22 under s. 20.435 (4) (b) ~~and, (gp), (r), and (rg)~~ are insufficient to provide the state share
23 of medical assistance.

1 **SECTION 1120s.** 49.45 (2) (a) 17. of the statutes, as affected by 2005 Wisconsin
2 Act (this act), is amended to read:

3 49.45 **(2)** (a) 17. Notify the governor, the joint committee on legislative
4 organization, the joint committee on finance and appropriate standing committees,
5 as determined by the presiding officer of each house, if the appropriation accounts
6 under s. 20.435 (4) (b), (gp), and (r), ~~and (rg)~~ are insufficient to provide the state share
7 of medical assistance.”.

8 **38.** Page 495, line 11: after that line insert:

9 **“SECTION 1124p.** 49.45 (5m) (am) of the statutes is amended to read:

10 49.45 **(5m)** (am) Notwithstanding sub. (3) (e), from the appropriation accounts
11 under s. 20.435 (4) (b), ~~(gp)~~, (o), and ~~(w)~~ (rm), the department shall distribute not
12 more than \$2,256,000 in each fiscal year, to provide supplemental funds to rural
13 hospitals that, as determined by the department, have high utilization of inpatient
14 services by patients whose care is provided from governmental sources, and to
15 provide supplemental funds to critical access hospitals, except that the department
16 may not distribute funds to a rural hospital or to a critical access hospital to the
17 extent that the distribution would exceed any limitation under 42 USC 1396b (i) (3).”.

18 **39.** Page 495, line 16: after that line insert:

19 **“SECTION 1125x.** 49.45 (6m) (ag) (intro.) of the statutes is amended to read:

20 49.45 **(6m)** (ag) (intro.) Payment for care provided in a facility under this
21 subsection made under s. 20.435 (4) (b), (gp), (pa), (o), (r), (rg), (w), or (wm) shall,
22 except as provided in pars. (bg), (bm), and (br), be determined according to a
23 prospective payment system updated annually by the department. The payment
24 system shall implement standards that are necessary and proper for providing

1 patient care and that meet quality and safety standards established under subch. II
2 of ch. 50 and ch. 150. The payment system shall reflect all of the following:

3 **SECTION 1125y.** 49.45 (6m) (ag) (intro.) of the statutes is amended to read:

4 49.45 **(6m)** (ag) (intro.) Payment for care provided in a facility under this
5 subsection made under s. 20.435 (4) (b), (gp), (pa), (o), ~~(r), (rg)~~, (w), or (wm) shall,
6 except as provided in pars. (bg), (bm), and (br), be determined according to a
7 prospective payment system updated annually by the department. The payment
8 system shall implement standards that are necessary and proper for providing
9 patient care and that meet quality and safety standards established under subch. II
10 of ch. 50 and ch. 150. The payment system shall reflect all of the following:”.

11 **40.** Page 496, line 14: after that line insert:

12 “**SECTION 1133g.** 49.45 (6L) (b) of the statutes, as affected by 2005 Wisconsin
13 Act (this act), is amended to read:

14 49.45 **(6L)** (b) The department shall, each year, submit to the joint committee
15 on finance a report for the previous fiscal year, except for the 1997–98 fiscal year, that
16 provides information on the utilization of beds by recipients of medical assistance in
17 facilities and a discussion and detailed projection of the likely balances,
18 expenditures, encumbrances and carry over of currently appropriated amounts in
19 the appropriation accounts under s. 20.435 (4) (b), (gp), (o), and (r), ~~and (rg)~~.

20 **SECTION 1133gd.** 49.45 (6ur) of the statutes is created to read:

21 49.45 **(6ur)** PHYSICIAN ORDER ENTRY RECORD SYSTEM; INCENTIVE PAYMENTS. From
22 the appropriation accounts under s. 20.435 (4) (b) and (o), the department shall
23 annually make an incentive payment to each hospital that establishes, by January
24 1, 2009, and thereafter continues to maintain a physician order entry record system

1 for provided medical services that, at a minimum, include pharmacy, laboratory,
2 ultrasonography, and radiology services. The incentive payment shall equal 1% of
3 the Medical Assistance reimbursement to the hospital for the previous fiscal year.

4 **SECTION 1133j.** 49.45 (6v) of the statutes, as affected by 2005 Wisconsin Act ...
5 (this act), is renumbered 49.45 (6L).”.

6 **SECTION 1133k.** 49.45 (6v) (b) of the statutes is amended to read:

7 49.45 (6v) (b) The department shall, each year, submit to the joint committee
8 on finance a report for the previous fiscal year, ~~except for the 1997–98 fiscal year,~~ that
9 provides information on the utilization of beds by recipients of medical assistance in
10 facilities and a discussion and detailed projection of the likely balances,
11 expenditures, encumbrances, and carry over of currently appropriated amounts in
12 the appropriation accounts under s. 20.435 (4) (b), (gp), ~~and (o), (r), and (rg).~~”.

13 **41.** Page 496, line 17: delete lines 17 to 23 and substitute:

14 “**SECTION 1135dm.** 49.45 (6x) (a) of the statutes is amended to read:

15 49.45 (6x) (a) Notwithstanding sub. (3) (e), from the appropriation accounts
16 under s. 20.435 (4) (b), ~~(gp), (o), and (w)~~ (rm), the department shall distribute not
17 more than ~~\$4,748,000~~ \$6,248,000 in each fiscal year, to provide funds to an essential
18 access city ~~hospital~~ hospitals, except that the department may not allocate funds to
19 an essential access city hospital to the extent that the allocation would exceed any
20 limitation under 42 USC 1396b (i) (3).”.

21 **42.** Page 497, line 9: after that line insert:

22 “**SECTION 1135p.** 49.45 (6y) (a) of the statutes is amended to read:

23 49.45 (6y) (a) Notwithstanding sub. (3) (e), from the appropriation accounts
24 under s. 20.435 (4) (b), (gp), (o), (r), (rg), and (w), the department shall distribute

1 funding in each fiscal year to provide supplemental payment to hospitals that enter
2 into a contract under s. 49.02 (2) to provide health care services funded by a relief
3 block grant, as determined by the department, for hospital services that are not in
4 excess of the hospitals' customary charges for the services, as limited under 42 USC
5 1396b (i) (3). If no relief block grant is awarded under this chapter or if the allocation
6 of funds to such hospitals would exceed any limitation under 42 USC 1396b (i) (3),
7 the department may distribute funds to hospitals that have not entered into a
8 contract under s. 49.02 (2).

9 **SECTION 1135q.** 49.45 (6y) (a) of the statutes, as affected by 2005 Wisconsin Act
10 (this act), is amended to read:

11 49.45 **(6y)** (a) Notwithstanding sub. (3) (e), from the appropriation accounts
12 under s. 20.435 (4) (b), (gp), (o), (r), ~~(rg)~~, and (w), the department shall distribute
13 funding in each fiscal year to provide supplemental payment to hospitals that enter
14 into a contract under s. 49.02 (2) to provide health care services funded by a relief
15 block grant, as determined by the department, for hospital services that are not in
16 excess of the hospitals' customary charges for the services, as limited under 42 USC
17 1396b (i) (3). If no relief block grant is awarded under this chapter or if the allocation
18 of funds to such hospitals would exceed any limitation under 42 USC 1396b (i) (3),
19 the department may distribute funds to hospitals that have not entered into a
20 contract under s. 49.02 (2).

21 **SECTION 1135r.** 49.45 (6y) (am) of the statutes is amended to read:

22 49.45 **(6y)** (am) Notwithstanding sub. (3) (e), from the appropriation accounts
23 under s. 20.435 (4) (b), (h), (gp), (o), ~~(r)~~, ~~(rg)~~, and (w), the department shall distribute
24 funding in each fiscal year to provide supplemental payments to hospitals that enter
25 into contracts under s. 49.02 (2) with a county having a population of 500,000 or more

1 to provide health care services funded by a relief block grant, as determined by the
2 department, for hospital services that are not in excess of the hospitals' customary
3 charges for the services, as limited under 42 USC 1396b (i) (3).

4 **SECTION 1135s.** 49.45 (6y) (am) of the statutes, as affected by 2005 Wisconsin
5 Act (this act), is amended to read:

6 49.45 **(6y)** (am) Notwithstanding sub. (3) (e), from the appropriation accounts
7 under s. 20.435 (4) (b), (h), (gp), (o), (r), ~~(rg)~~, and (w), the department shall distribute
8 funding in each fiscal year to provide supplemental payments to hospitals that enter
9 into contracts under s. 49.02 (2) with a county having a population of 500,000 or more
10 to provide health care services funded by a relief block grant, as determined by the
11 department, for hospital services that are not in excess of the hospitals' customary
12 charges for the services, as limited under 42 USC 1396b (i) (3).

13 **SECTION 1135t.** 49.45 (6z) (a) (intro.) of the statutes is amended to read:

14 49.45 **(6z)** (a) (intro.) Notwithstanding sub. (3) (e), from the appropriation
15 accounts under s. 20.435 (4) (b), (gp), (o), (r), (rg), and (w), the department shall
16 distribute funding in each fiscal year to supplement payment for services to hospitals
17 that enter into a contract under s. 49.02 (2) to provide health care services funded
18 by a relief block grant under this chapter, if the department determines that the
19 hospitals serve a disproportionate number of low-income patients with special
20 needs. If no medical relief block grant under this chapter is awarded or if the
21 allocation of funds to such hospitals would exceed any limitation under 42 USC
22 1396b (i) (3), the department may distribute funds to hospitals that have not entered
23 into a contract under s. 49.02 (2). The department may not distribute funds under
24 this subsection to the extent that the distribution would do any of the following:

1 **SECTION 1135u.** 49.45 (6z) (a) (intro.) of the statutes, as affected by 2005
2 Wisconsin Act (this act), is amended to read:

3 49.45 **(6z)** (a) (intro.) Notwithstanding sub. (3) (e), from the appropriation
4 accounts under s. 20.435 (4) (b), (gp), (o), (r), (~~rg~~), and (w), the department shall
5 distribute funding in each fiscal year to supplement payment for services to hospitals
6 that enter into a contract under s. 49.02 (2) to provide health care services funded
7 by a relief block grant under this chapter, if the department determines that the
8 hospitals serve a disproportionate number of low-income patients with special
9 needs. If no medical relief block grant under this chapter is awarded or if the
10 allocation of funds to such hospitals would exceed any limitation under 42 USC
11 1396b (i) (3), the department may distribute funds to hospitals that have not entered
12 into a contract under s. 49.02 (2). The department may not distribute funds under
13 this subsection to the extent that the distribution would do any of the following:

14 **SECTION 1136h.** 49.45 (8) (b) of the statutes is amended to read:

15 49.45 **(8)** (b) Reimbursement under s. 20.435 (4) (b), (gp), (o), (r), (rg), and (w)
16 for home health services provided by a certified home health agency or independent
17 nurse shall be made at the home health agency's or nurse's usual and customary fee
18 per patient care visit, subject to a maximum allowable fee per patient care visit that
19 is established under par. (c).

20 **SECTION 1136i.** 49.45 (8) (b) of the statutes, as affected by 2005 Wisconsin Act
21 (this act), is amended to read:

22 49.45 **(8)** (b) Reimbursement under s. 20.435 (4) (b), (gp), (o), (r), (~~rg~~), and (w)
23 for home health services provided by a certified home health agency or independent
24 nurse shall be made at the home health agency's or nurse's usual and customary fee

1 per patient care visit, subject to a maximum allowable fee per patient care visit that
2 is established under par. (c).”.

3 **43.** Page 497, line 12: after that line insert:

4 “**SECTION 1145h.** 49.45 (24m) (intro.) of the statutes is amended to read:

5 49.45 (**24m**) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)

6 From the appropriation accounts under s. 20.435 (4) (b), (gp), (o), (~~r~~), (~~rg~~), and (w),
7 in order to test the feasibility of instituting a system of reimbursement for providers
8 of home health care and personal care services for medical assistance recipients that
9 is based on competitive bidding, the department shall:

10 **SECTION 1145i.** 49.45 (24m) (intro.) of the statutes, as affected by 2005

11 Wisconsin Act (this act), is amended to read:

12 49.45 (**24m**) HOME HEALTH CARE AND PERSONAL CARE PILOT PROGRAM. (intro.)

13 From the appropriation accounts under s. 20.435 (4) (b), (gp), (o), (r), (~~rg~~), and (w),
14 in order to test the feasibility of instituting a system of reimbursement for providers
15 of home health care and personal care services for medical assistance recipients that
16 is based on competitive bidding, the department shall:”.

17 **44.** Page 497, line 13: delete lines 13 to 17.

18 **45.** Page 500, line 22: after that line insert:

19 “**SECTION 1157c.** 49.46 (2) (b) 19. of the statutes is created to read:

20 49.46 (**2**) (b) 19. The cost of one wig for each recipient who has experienced hair
21 loss as a result of chemotherapy for treatment of cancer.”.

22 **46.** Page 500, line 23: delete the material beginning with that line and ending
23 with page 501, line 3.

24 **47.** Page 501, line 13: after that line insert:

1 **SECTION 1160h.** 49.472 (6) (a) of the statutes is amended to read:

2 49.472 **(6)** (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
3 under s. 20.435 (4) (b), (gp), (r), (rg), or (w), the department shall, on the part of an
4 individual who is eligible for medical assistance under sub. (3), pay premiums for or
5 purchase individual coverage offered by the individual's employer if the department
6 determines that paying the premiums for or purchasing the coverage will not be more
7 costly than providing medical assistance.

8 **SECTION 1160i.** 49.472 (6) (a) of the statutes, as affected by 2005 Wisconsin Act
9 (this act), is amended to read:

10 49.472 **(6)** (a) Notwithstanding sub. (4) (a) 3., from the appropriation account
11 under s. 20.435 (4) (b), (gp), (r), ~~(rg)~~, or (w), the department shall, on the part of an
12 individual who is eligible for medical assistance under sub. (3), pay premiums for or
13 purchase individual coverage offered by the individual's employer if the department
14 determines that paying the premiums for or purchasing the coverage will not be more
15 costly than providing medical assistance.

16 **SECTION 1160m.** 49.472 (6) (b) of the statutes is amended to read:

17 49.472 **(6)** (b) If federal financial participation is available, from the
18 appropriation account under s. 20.435 (4) (b), (gp), (r), (rg), or (w), the department
19 may pay medicare Medicare Part A and Part B premiums for individuals who are
20 eligible for medicare Medicare and for medical assistance under sub. (3).

21 **SECTION 1160n.** 49.472 (6) (b) of the statutes, as affected by 2005 Wisconsin Act
22 (this act), is amended to read:

23 49.472 **(6)** (b) If federal financial participation is available, from the
24 appropriation account under s. 20.435 (4) (b), (gp), (r), ~~(rg)~~, or (w), the department

1 may pay Medicare Part A and Part B premiums for individuals who are eligible for
2 Medicare and for medical assistance under sub. (3).

3 **SECTION 1160p.** 49.473 (5) of the statutes is amended to read:

4 49.473 (5) The department shall audit and pay, from the appropriation
5 accounts under s. 20.435 (4) (b), (gp), ~~and (o), (r), and (rg)~~ allowable charges to a
6 provider who is certified under s. 49.45 (2) (a) 11. for ~~medical assistance~~ Medical
7 Assistance on behalf of a woman who meets the requirements under sub. (2) for all
8 benefits and services specified under s. 49.46 (2).

9 **SECTION 1160q.** 49.473 (5) of the statutes, as affected by 2005 Wisconsin Act
10 (this act), is amended to read:

11 49.473 (5) The department shall audit and pay, from the appropriation
12 accounts under s. 20.435 (4) (b), (gp), (o), and (r), ~~and (rg)~~ allowable charges to a
13 provider who is certified under s. 49.45 (2) (a) 11. for medical assistance on behalf of
14 a woman who meets the requirements under sub. (2) for all benefits and services
15 specified under s. 49.46 (2).”.

16 **48.** Page 782, line 8: after that line insert:

17 **“SECTION 1936j.** 139.02 (1) of the statutes is amended to read:

18 139.02 (1) TAX IMPOSED; RATE; LIMITATION. ~~An occupational excise~~ excise tax is imposed
19 upon the removal for consumption or sale or selling of fermented malt beverages at
20 the rate of \$2 per barrel of 31 gallons and at a proportionate rate for any other
21 quantity or fractional parts thereof. ~~Not more than one occupational excise~~ excise tax shall
22 be required to be paid on any one container of fermented malt beverages.

23 **SECTION 1936k.** 139.03 (intro.) of the statutes is amended to read:

1 **139.03 Liquor tax.** (intro.) An occupational excise tax is imposed upon the
2 selling of intoxicating liquor as follows:

3 **SECTION 1936L.** 139.03 (3) of the statutes is amended to read:

4 139.03 (3) Not more than one occupational excise tax shall be required to be
5 paid on any one container of intoxicating liquor.

6 **SECTION 1936m.** 139.05 (2) of the statutes is amended to read:

7 139.05 (2) Each brewer and bottler in this state and each wholesaler of malt
8 beverages within this state to whom malt beverages are shipped from outside this
9 state shall on or before the fifteenth day of each month file with the secretary on
10 forms prescribed by the secretary a verified return containing such information as
11 may be required to compute and show the amount of occupational excise tax payable
12 by the brewer, bottler or wholesaler or by the shipper for the next preceding calendar
13 month on malt beverages.

14 **SECTION 1936n.** 139.05 (3) of the statutes is amended to read:

15 139.05 (3) The amount of the occupational excise tax disclosed by the return
16 shall accompany the return and shall be paid to the department.”.

17 **49.** Page 782, line 16: after that line insert:

18 “**SECTION 1947h.** 139.09 of the statutes is amended to read:

19 **139.09 Registration.** Every brewer, bottler, manufacturer, rectifier,
20 wholesaler or retailer liable for payment of the occupational excise tax imposed in
21 ss. 139.01 to 139.25 shall hold a valid certificate under s. 73.03 (50). The secretary
22 shall assign the person a registration number.”.

23 **50.** Page 799, line 13: after that line insert:

24 “**SECTION 2030g.** 146.65 (1) (b) of the statutes is amended to read:

1 146.65 (1) (b) In each fiscal year, not more than ~~-\$355,600~~ \$500,000, to the rural
2 health dental clinic located in Menomonie that provides dental services to persons
3 who are developmentally disabled or elderly or who have low income, in the counties
4 of Barron, Chippewa, Dunn, Pepin, Pierce, Polk, and St. Croix.”.

5 **51.** Page 812, line 22: after that line insert:

6 “**SECTION 2066k.** 153.01 (2) of the statutes is amended to read:

7 153.01 (2) “Board” means the health care quality and patient safety board on
8 ~~health care information.~~”.

9 **52.** Page 813, line 5: delete lines 5 to 19 and substitute:

10 “**SECTION 2068j.** 153.07 (5) of the statutes is created to read:

11 153.07 (5) By January 1, 2006, and at least annually thereafter, the board shall
12 report to the governor on the plans, activities, accomplishments, and
13 recommendations of the board.

14 **SECTION 2068m.** 153.07 (6) of the statutes is created to read:

15 153.07 (6) The board shall annually assess the extent to which automated
16 information and decision support systems are used by health care providers in this
17 state.

18 **SECTION 2068p.** 153.07 (7) of the statutes is created to read:

19 153.07 (7) The board shall annually assess options and develop a plan and
20 specific strategies to achieve automation of all health care systems in the state by
21 2010 or as soon as practicable.

22 **SECTION 2068r.** 153.07 (8) of the statutes is created to read:

23 153.07 (8) The board shall administer the health care quality improvement
24 fund.

1 **SECTION 2068t.** 153.07 (9) of the statutes is created to read:

2 153.07 **(9)** The board may accept gifts, grants, bequests, and devises to be used
3 in the execution of its functions.

4 **SECTION 2068v.** 153.076 of the statutes is created to read:

5 **153.076 Grants and loans. (1)** In this section:

6 (a) “Clinic” means a place, other than a residence, that is used primarily for the
7 provision of nursing, medical, podiatric, dental, chiropractic, or optometric care and
8 treatment.

9 (b) “Health maintenance organization” has the meaning given in s. 609.01 (2).

10 (c) “Hospital” has the meaning given in s. 50.33 (2).

11 (d) “Physician” has the meaning given in s. 448.01 (5).

12 **(2)** (a) From the appropriation under s. 20.505 (4) (qb), the board may make
13 grants or loans, under procedures and criteria determined by the board, to clinics,
14 health maintenance organizations, or other health care systems, hospitals, or
15 physicians for any of the following projects:

16 1. Installation of computer–assisted physician order entry, electronic medical
17 records, or other information system infrastructure, including clinical decision
18 support systems, to improve the quality, safety, and efficiency of patient care.

19 2. Development of health information exchanges, integrated health care data
20 repositories, and interoperable systems to facilitate the reporting of quality, safety,
21 and efficiency information for purposes of health care system improvement or
22 related purposes by informing consumers and health care purchasers.

23 3. Demonstration, through pilot projects, of rapid cycle improvement in quality,
24 safety, and efficiency of care.

1 4. Facilitation of group purchases of medical technology systems by assisting
2 health care providers in forming collaborative agreements for technology.

3 (b) Repayment of any loans made under par. (a) shall be deposited into the
4 health care quality improvement fund.”.

5 **53.** Page 815, line 12: after that line insert:

6 “**SECTION 2077h.** 153.75 (title) of the statutes is amended to read:

7 **153.75 (title) Rule making and enforcement.**

8 **SECTION 2077i.** 153.75 (3) of the statutes is created to read:

9 153.75 (3) Notwithstanding sub. (1) (a), (b), (f), (m), (n), (o), (s), (t), and (u) and
10 ss. 153.05 (1), (5), and (8) and 153.45, after June 30, 2007, the department may not
11 enforce rules promulgated under this chapter before July 1, 2007, relating to claims
12 data to be submitted by physicians, to procedures for verification, review, and
13 comment on the claims data, to adjustment of the data, and to waiver of the data
14 submission requirement.

15 **SECTION 2077j.** 153.75 (4) of the statutes is created to read:

16 153.75 (4) Notwithstanding sub. (1) (a), (b), (f), (m), (n), (o), (q), (t), and (u), and
17 ss. 153.05 (1), (5) and (8), 153.21, and 153.45, after the effective date of this
18 subsection [revisor inserts date], the department may not enforce rules
19 promulgated under this chapter before the effective date of this subsection
20 [revisor inserts date], relating to any of the following:

21 (a) The collection, from physicians, of health care plan affiliations and updating
22 information, hospital privileges updating information, and workforce and practice
23 information.

1 (b) The collection, from dentists, chiropractors, and podiatrists, of workforce
2 and practice information.

3 (c) Procedures for verification, review, and comment on the information
4 specified under pars. (a) and (b), to adjustment of the information, and to waiver of
5 the information collection requirement.

6 **SECTION 2077L.** 153.75 (5) of the statutes is created to read:

7 153.75 (5) After the effective date of this subsection [revisor inserts date],
8 notwithstanding ss. 227.10 (1) and 227.11 (2) (a) and (d), the department may
9 promulgate under this chapter only rules that are first approved by the health care
10 quality and patient safety board.

11 **SECTION 2077n.** 153.76 of the statutes is amended to read:

12 **153.76 Rule-making by the independent review board.**

13 Notwithstanding s. 15.01 (1r), the independent review board may promulgate only
14 those rules that are first reviewed and approved by the health care quality and
15 patient safety board ~~on health care information.~~”.

16 **54.** Page 823, line 23: after that line insert:

17 **“SECTION 2112j.** 231.03 (intro.) of the statutes is amended to read:

18 **231.03 Powers.** (intro.) The authority has all the powers necessary or
19 convenient to carry out and effectuate the purposes and provisions of this chapter.
20 In addition to all other powers granted by this chapter, subject to s. 231.035 the
21 authority may:

22 **SECTION 2112m.** 231.035 of the statutes is created to read:

23 **231.035 Health care quality and patient safety board approval.**

24 Beginning on the effective date of this section [revisor inserts date], the authority

1 may not provide any financial assistance to a health facility, hospital, or
2 participating health institution unless the health facility, hospital, or participating
3 health institution demonstrates to the health care quality and patient safety board
4 that it is making progress to improve medical information systems technology.”.

5 **55.** Page 831, line 4: after that line insert:

6 “**SECTION 2144n.** 254.42 of the statutes is created to read:

7 **254.42 State vehicle use.** The department of administration shall assign
8 from the state vehicle fleet 2 vehicles for use by the department of health and family
9 services for inspections, monitoring, enforcement, and other activities required of
10 the department of health and family services under this subchapter.”.

11 **56.** Page 934, line 6: after that line insert:

12 “(13v) HEALTH CARE QUALITY AND PATIENT SAFETY BOARD; INITIAL APPOINTMENTS.
13 Notwithstanding the length of terms specified in section 15.105 (13) (b) of the
14 statutes, as created by this act, the initial members of the health care quality and
15 patient safety board shall be appointed by the first day of the 4th month beginning
16 after the effective date of this subsection for the following terms:

17 (a) The representative of hospitals, the employer purchaser of health care, and
18 the representative of the insurance industry, for terms expiring on May 1, 2009.

19 (b) The physician, the representative of health maintenance organizations, and
20 the member who represents the public interest, for terms expiring on May 1, 2011.

21 (13w) HEALTH CARE QUALITY AND PATIENT SAFETY BOARD; STUDY OF PHYSICIAN
22 INFORMATION DATABASE. By March 1, 2006, the health care quality and patient safety
23 board shall study and make recommendations to the governor concerning the

1 feasibility of creating a centralized physician information database, including
2 through a joint public and private effort.

3 (13x) HEALTH CARE QUALITY AND PATIENT SAFETY BOARD; STUDY OF RULES. By
4 October 1, 2006, the health care quality and patient safety board shall do all of the
5 following:

6 (a) Study and make recommendations to the governor concerning the rules
7 required and authorized to be promulgated by the department of health and family
8 services under section 153.75 of the statutes.

9 (b) Promote the collection and availability of information regarding the quality
10 and price of health care required to enable consumers and health care purchasers to
11 make wise health care choices.

12 (c) Foster the creation and evolution of public–private health care
13 partnerships, agreements on standard health care data sets and reporting protocols,
14 and transparency of health care information for purchasing purposes, including the
15 development of an integrated health care data repository.

16 (13y) HEALTH CARE QUALITY AND PATIENT SAFETY BOARD; PLAN AND STRATEGIES. By
17 January 1, 2007, develop a plan and specific strategies, including awarding grants
18 or making loans under section 153.076 (2) of the statutes, as created by this act, to
19 deploy health care information systems technology for health care quality, safety,
20 and efficiency, within a reasonable time and using reasonable financial investments.
21 The plan shall consider the extent to which an integrated or interoperable system or
22 underlying technology may be most cost effective, including by assessing benefits of
23 the system for supporting rapid deployment for supporting medical care
24 practitioners, promoting accurate and appropriate shared information about
25 individual patients among health care providers, standardizing performance

1 indicators among health care provider organizations to improve organization
2 performance, and public reporting of quality, safety, and efficiency data for consumer
3 and health care purchaser decision making.”.

4 **57.** Page 980, line 9: after that line insert:

5 “(16v) TRANSFER OF FUNCTIONS OF THE BOARD ON HEALTH CARE INFORMATION.

6 (a) *Assets and liabilities.* On the effective date of this paragraph, the assets and
7 liabilities of the department of health and family services primarily related to the
8 functions of the board on health care information, as determined by the secretary of
9 administration, shall become the assets and liabilities of the department of
10 administration.

11 (b) *Position and employee transfers.* All incumbent employees holding
12 positions in the department of health and family services performing duties
13 primarily related to the functions of the board on health care information, as
14 determined by the secretary of administration, are transferred on the effective date
15 of this paragraph to the department of administration.

16 (c) *Employee status.* Employees transferred under paragraph (b) have all the
17 rights and the same status under subchapter V of chapter 111 and chapter 230 of the
18 statutes in the department of administration that they enjoyed in the department
19 of health and family services immediately before the transfer. Notwithstanding
20 section 230.28 (4) of the statutes, no employee so transferred who has attained
21 permanent status in class is required to serve a probationary period.

22 (d) *Tangible personal property.* On the effective date of this paragraph, all
23 tangible personal property, including records, of the department of health and family
24 services that is primarily related to the functions of the board on health care

1 information, as determined by the secretary of administration, is transferred to the
2 department of administration.

3 (e) *Contracts.* 1. All contracts entered into by the board on health care
4 information in effect on the effective date of this subdivision remain in effect and are
5 transferred to the health care quality and patient safety board. The health care
6 quality and patient safety board shall carry out any obligations under such a contract
7 until the contract is modified or rescinded by the health care quality and patient
8 safety board to the extent allowed under the contract.

9 2. All contracts entered into by the department of health and family services
10 in effect on the effective date of this subdivision that are primarily related to the
11 functions of the board on health care information, as determined by the secretary of
12 administration, remain in effect and are transferred to the department of
13 administration. The department of administration shall carry out any obligations
14 under such a contract until the contract is modified or rescinded by the department
15 of administration to the extent allowed under the contract.

16 (f) *Rules and orders.* All rules promulgated by the board on health care
17 information that are in effect on the effective date of this subdivision remain in effect
18 until their specified expiration date or until amended or repealed by the health care
19 quality and patient safety board.

20 (g) *Pending matters.* Any matter pending with the board on health care
21 information on the effective date of this paragraph is transferred to the health care
22 quality and patient safety board and all materials submitted to or actions taken by
23 the board on health care information with respect to the pending matter are
24 considered as having been submitted to or taken by the health care quality and
25 patient safety board.

1 (16w) HEALTH CARE INFORMATION; RULE MAKING. Notwithstanding the
2 requirement and authorization for the department of health and family services to
3 promulgate rules under section 153.75 of the statutes, as affected by this act, before
4 July 1, 2007, the department of health and family services may promulgate under
5 section 153.75 of the statutes only rules that are first approved by the health care
6 quality and patient safety board.”.

7 **58.** Page 1019, line 20: after that line insert:

8 “(4g) COMMUNITY INTEGRATION PROGRAM RATE INCREASE. (a) In the schedule
9 under section 20.005 (3) of the statutes for the appropriation to the department of
10 health and family services under section 20.435 (4) (b) of the statutes, as affected by
11 the acts of 2005, the dollar amount is increased by \$4,868,600 for fiscal year 2005–06
12 and the dollar amount is increased by \$9,737,100 for fiscal year 2006–07 to increase
13 the reimbursement rate for the Community Integration Program under section
14 46.278 of the statutes to \$74.67 per day beginning January 1, 2006.

15 (b) In the schedule under section 20.005 (3) of the statutes for the appropriation
16 to the department of health and family services under section 20.435 (4) (o) of the
17 statutes, as affected by the acts of 2005, the dollar amount is increased by \$6,723,200
18 for fiscal year 2005–06 and the dollar amount is increased by \$13,446,500 for fiscal
19 year 2006–07 to increase the reimbursement rate for the Community Integration
20 Program under section 46.278 of the statutes to \$74.67 per day beginning January
21 1, 2006.

22 (4rv) MENOMONIE RURAL HEALTH DENTAL CLINIC. In the schedule under section
23 20.005 (3) of the statutes for the appropriation to the department of health and family
24 services under section 20.435 (5) (dm) of the statutes, as affected by the acts of 2005,

1 the dollar amount is increased by \$144,400 for fiscal year 2005–06 and the dollar
2 amount is increased by \$144,400 for fiscal year 2006–07 to provide funding to the
3 rural health dental clinic specified under section 146.65 (1) (b) of the statutes, as
4 affected by this act.

5 (4w) START-UP FUNDING FOR PROGRAM TO PROVIDE HEALTH CARE TO UNINSURED IN
6 MILWAUKEE COUNTY. In the schedule under section 20.005 (3) of the statutes for the
7 appropriation to the department of health and family services under section 20.435
8 (5) (am) of the statutes, as affected by the acts of 2005, the dollar amount is increased
9 by \$150,000 for fiscal year 2005–06 to provide funding to the medical society of
10 Milwaukee and partnerships for healthy Milwaukee to develop a program for
11 volunteer health care providers to provide health care services to low-income
12 residents of Milwaukee County who do not have health insurance and are not eligible
13 for the Medical Assistance program or the Milwaukee County General Assistance
14 Medical Program.

15 (5f) GENERAL FUND TRANSFER. There is transferred from the general fund to the
16 health care quality improvement fund \$319,703,400 in fiscal year 2005–06 and
17 \$139,714,000 in fiscal year 2006–07.”.

18 **59.** Page 1032, line 21: delete lines 21 to 23.

19 **60.** Page 1042, line 14: after that line insert:

20 “(3w) CREATION OF HEALTH CARE QUALITY AND PATIENT SAFETY BOARD. The
21 treatment of sections 15.07 (2) (n), 15.105 (13), 153.07 (5) to (9), 153.076, 231.03, and
22 231.035 of the statutes and SECTION 9101 (13v), (13w), (13x), and (13y) of this act take
23 effect on October 1, 2005.”.

24 **61.** Page 1044, line 6: after that line insert:

