



State of Wisconsin  
2005 - 2006 LEGISLATURE

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PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

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1 AN ACT *to repeal* 20.435 (4) (u), 20.435 (4) (v), 149.10 (2m), 149.10 (10), 149.12  
2 (3) (c), 149.14 (3) (c) 2., 149.14 (3) (r), 149.14 (4c), 149.14 (5m), 149.14 (6) (a),  
3 149.14 (8), 149.142 (1) (b), 149.142 (2), 149.144, 149.145, 149.146 (2) (am),  
4 149.146 (2) (b), 149.15, 149.16, 149.165 (4), 149.17 (2), 149.17 (4), 149.175,  
5 149.20 and 149.25; *to renumber* 88.172 (2), 149.14 (3) (p), 149.14 (6) (b),  
6 181.0670 (3) (a), 181.0855 (2) and 185.367 (2); *to renumber and amend* 149.12  
7 (2) (f), 149.14 (3) (intro.), 149.14 (4m), 149.142 (1) (a), 149.146 (2) (a) and  
8 186.096 (2); *to consolidate, renumber and amend* 149.146 (1) (a) and (b); *to*  
9 *amend* 1.12 (1) (b), 13.172 (1), 13.62 (2), 13.94 (1) (g), 13.95 (intro.), 16.002 (2),  
10 16.004 (4), 16.004 (5), 16.004 (12) (a), 16.045 (1) (a), 16.15 (1) (ab), 16.41 (4),  
11 16.417 (1) (a), 16.52 (7), 16.528 (1) (a), 16.53 (2), 16.54 (9) (a) 1., 16.70 (2), 16.72  
12 (2) (e) (intro.), 16.72 (2) (f), 16.75 (1m), 16.75 (8) (a) 1., 16.75 (8) (a) 2., 16.75 (9),  
13 16.75 (10m), 16.765 (1), 16.765 (2), 16.765 (4), 16.765 (5), 16.765 (6), 16.765 (7)  
14 (intro.), 16.765 (7) (d), 16.765 (8), 16.865 (8), 19.42 (5), 25.55 (3), 71.21 (4), 71.26  
15 (1) (be), 71.26 (2) (a), 71.34 (1) (g), 71.45 (2) (a) 10., 76.67 (2), 77.54 (9a) (a), 77.92

1 (4), 88.172 (3), 101.055 (2) (a), 101.177 (1) (d), 103.10 (1) (c), 103.15 (1) (a),  
2 chapter 149 (title), 149.10 (intro.), 149.10 (2), 149.10 (2j) (a) 3., 149.10 (2t) (c),  
3 149.10 (3), 149.10 (3e), 149.10 (7), 149.10 (8), 149.10 (9), 149.115, 149.12 (1)  
4 (intro.), 149.12 (1) (a), 149.12 (1m), 149.12 (3) (a), 149.13 (1), 149.13 (3) (a),  
5 149.13 (3) (b), 149.13 (4), 149.14 (1) (a), 149.14 (2) (a), 149.14 (3) (c) 3., 149.14  
6 (3) (d), 149.14 (3) (e), 149.14 (3) (m), 149.14 (3) (o), 149.14 (7) (b), 149.14 (7) (c),  
7 149.165 (1), 149.165 (2) (a) (intro.), 149.165 (2) (a) 1., 149.165 (2) (a) 2., 149.165  
8 (2) (a) 3., 149.165 (2) (a) 4., 149.165 (2) (a) 5., 149.165 (2) (bc), 149.165 (3) (a),  
9 149.165 (3) (b) (intro.), 149.165 (3m), 149.17 (1), 149.18, 181.0670 (3) (b),  
10 181.0855 (3), 185.367 (3), 186.096 (3), 230.03 (3), 230.80 (4), 287.01 (5m), 287.22  
11 (2) (b), 287.22 (2m), 341.17 (9) (a) 4., 343.235 (1) (d), 343.24 (4) (a) 4., 601.41 (1),  
12 601.415 (12), 601.64 (1), 601.64 (3) (a), 601.64 (3) (c), 601.64 (4), 611.62 (1),  
13 613.03 (4), 632.785 (title), 644.18 (1) and 895.65 (1) (c); **to repeal and recreate**  
14 149.11, 149.14 (3) (b), 149.14 (3) (c), 149.14 (4), 149.14 (5) and 149.143; and **to**  
15 **create** 20.145 (5), 25.55 (1), 70.11 (41m), 71.07 (5g), 71.10 (4) (cp), 71.28 (5g),  
16 71.30 (3) (dm), 71.47 (5g), 71.49 (1) (dm), 76.655, 88.172 (2) (am), subchapter I  
17 (title) of chapter 149 [precedes 149.10], 149.10 (1), 149.105, subchapter II (title)  
18 of chapter 149 [precedes 149.11], 149.12 (2) (f) 2., 149.12 (2) (g), 149.12 (4) and  
19 (5), 149.14 (3) (f), 149.141, subchapter III of chapter 149 [precedes 149.40],  
20 subchapter III of chapter 149 [precedes 149.60], 181.0670 (3) (ac), 181.0855 (2)  
21 (am), 185.367 (2) (am), 186.096 (2) (am) and 631.20 (2) (f) of the statutes;  
22 **relating to:** the Health Insurance Risk-Sharing Plan; creating the Health

*an income and franchise tax credit for  
Health Insurance Risk-Sharing Plan assessments;*

1 Insurance Risk-Sharing Plan Authority; a health benefit program for persons  
2 eligible for tax credits for payment of premiums; and making an appropriation.

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***Analysis by the Legislative Reference Bureau***

This is a preliminary draft. An analysis will be provided in a later version.

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***The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:***

3 SECTION 1. 1.12 (1) (b) of the statutes is amended to read:

4 1.12 (1) (b) "State agency" means an office, department, agency, institution of  
5 higher education, the legislature, a legislative service agency, the courts, a judicial  
6 branch agency, an association, society, or other body in state government which that  
7 is created or authorized to be created by the constitution or by law, for which  
8 appropriations are made by law, excluding the Health Insurance Risk-Sharing Plan  
9 Authority.

\*\*\*NOTE: Are you sure you want to exclude the HIRSP Authority from conserving energy? It would be the only exclusion.

10 SECTION 2. 13.172 (1) of the statutes is amended to read:

11 13.172 (1) In this section, "agency" means an office, department, agency,  
12 institution of higher education, association, society, or other body in state  
13 government created or authorized to be created by the constitution or any law, which  
14 that is entitled to expend moneys appropriated by law, including the legislature and  
15 the courts, and any authority created in subch. III of ch. 149 or in ch. 231, 233, or 234.

16 SECTION 3. 13.62 (2) of the statutes is amended to read:

17 13.62 (2) "Agency" means any board, commission, department, office, society,  
18 institution of higher education, council, or committee in the state government, or any

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1 authority created in subch. III of ch. 149 or in ch. 231, 232, 233, 234, or 237, except  
2 that the term does not include a council or committee of the legislature.

3 **SECTION 4.** 13.94 (1) (g) of the statutes is amended to read:

4 13.94 (1) (g) Require each state department, board, commission, independent  
5 agency, or authority, excluding the Health Insurance Risk-Sharing Plan Authority,  
6 to file with the bureau on or before September 1 of each year a report on all  
7 receivables due the state as of the preceding June 30 which were occasioned by  
8 activities of the reporting unit. The report may also be required of other  
9 departments, except counties, cities, villages, towns, and school districts. The report  
10 shall show the aggregate amount of such receivables according to fiscal year of origin  
11 and collections thereon during the fiscal year preceding the report. The state auditor  
12 may require any department to file with the bureau a detailed list of the receivables  
13 comprising the aggregate amounts shown on the reports prescribed by this  
14 paragraph.

15 **SECTION 5.** 13.95 (intro.) of the statutes, as affected by 2005 Wisconsin Act 25,  
16 is amended to read:

17 **13.95 Legislative fiscal bureau.** (intro.) There is created a bureau to be  
18 known as the "Legislative Fiscal Bureau" headed by a director. The fiscal bureau  
19 shall be strictly nonpartisan and shall at all times observe the confidential nature  
20 of the research requests received by it; however, with the prior approval of the  
21 requester in each instance, the bureau may duplicate the results of its research for  
22 distribution. Subject to s. 230.35 (4) (a) and (f), the director or the director's  
23 designated employees shall at all times, with or without notice, have access to all  
24 state agencies, the University of Wisconsin Hospitals and Clinics Authority, the  
25 Health Insurance Risk-Sharing Plan Authority, and the Fox River Navigational

1 System Authority, and to any books, records, or other documents maintained by such  
2 agencies or authorities and relating to their expenditures, revenues, operations, and  
3 structure.

4 **SECTION 6.** 16.002 (2) of the statutes is amended to read:

5 16.002 (2) “Departments” means constitutional offices, departments, and  
6 independent agencies and includes all societies, associations, and other agencies of  
7 state government for which appropriations are made by law, but not including  
8 authorities created in subch. III of ch. 149 and in chs. 231, 232, 233, 234, 235, and  
9 237.

10 **SECTION 7.** 16.004 (4) of the statutes is amended to read:

11 16.004 (4) FREEDOM OF ACCESS. The secretary and such employees of the  
12 department as the secretary designates may enter into the offices of state agencies  
13 and authorities created under subch. III of ch. 149 and under chs. 231, 233, 234, and  
14 237, and may examine their books and accounts and any other matter which that in  
15 the secretary’s judgment should be examined and may interrogate the agency’s  
16 employees publicly or privately relative thereto.

17 **SECTION 8.** 16.004 (5) of the statutes is amended to read:

18 16.004 (5) AGENCIES AND EMPLOYEES TO COOPERATE. All state agencies and  
19 authorities created under subch. III of ch. 149 and under chs. 231, 233, 234, and 237,  
20 and their officers and employees, shall cooperate with the secretary and shall comply  
21 with every request of the secretary relating to his or her functions.

22 **SECTION 9.** 16.004 (12) (a) of the statutes is amended to read:

23 16.004 (12) (a) In this subsection, “state agency” means an association,  
24 authority, board, department, commission, independent agency, institution, office,  
25 society, or other body in state government created or authorized to be created by the

1 constitution or any law, including the legislature, the office of the governor, and the  
2 courts, but excluding the University of Wisconsin Hospitals and Clinics Authority,  
3 the Health Insurance Risk-Sharing Plan Authority, and the Fox River Navigational  
4 System Authority.

→ **NOTE:** I wasn't sure if by responding in the negative you meant that the HIRSP Authority should be excluded from this provision, as drafted, or not added to the provision.

5 **SECTION 10.** 16.045 (1) (a) of the statutes is amended to read:

6 16.045 (1) (a) "Agency" means an office, department, independent agency,  
7 institution of higher education, association, society, or other body in state  
8 government created or authorized to be created by the constitution or any law, ~~which~~  
9 that is entitled to expend moneys appropriated by law, including the legislature and  
10 the courts, but not including an authority created in subch. III of ch. 149 or in ch. 231,  
11 232, 233, 234, 235, or 237.

12 **SECTION 11.** 16.15 (1) (ab) of the statutes is amended to read:

13 16.15 (1) (ab) "Authority" has the meaning given under s. 16.70 (2), but  
14 excludes the University of Wisconsin Hospitals and Clinics Authority and the Health  
15 Insurance Risk-Sharing Plan Authority.

16 **SECTION 12.** 16.41 (4) of the statutes is amended to read:

17 16.41 (4) In this section, "authority" means a body created under subch. III of  
18 ch. 149 or under ch. 231, 233, 234, or 237.

19 **SECTION 13.** 16.417 (1) (a) of the statutes is amended to read:

20 16.417 (1) (a) "Agency" means an office, department, independent agency,  
21 institution of higher education, association, society, or other body in state  
22 government created or authorized to be created by the constitution or any law, ~~which~~  
23 that is entitled to expend moneys appropriated by law, including the legislature and

1 the courts, but not including an authority or the body created under subch. III of ch.  
2 149.

3 **SECTION 14.** 16.52 (7) of the statutes is amended to read:

4 16.52 (7) PETTY CASH ACCOUNT. With the approval of the secretary, each agency  
5 ~~which~~ that is authorized to maintain a contingent fund under s. 20.920 may establish  
6 a petty cash account from its contingent fund. The procedure for operation and  
7 maintenance of petty cash accounts and the character of expenditures therefrom  
8 shall be prescribed by the secretary. In this subsection, “agency” means an office,  
9 department, independent agency, institution of higher education, association,  
10 society, or other body in state government created or authorized to be created by the  
11 constitution or any law, ~~which~~ that is entitled to expend moneys appropriated by law,  
12 including the legislature and the courts, but not including an authority created in  
13 subch. III of ch. 149 or in ch. 231, 233, 234, or 237.

14 **SECTION 15.** 16.528 (1) (a) of the statutes is amended to read:

15 16.528 (1) (a) “Agency” means an office, department, independent agency,  
16 institution of higher education, association, society, or other body in state  
17 government created or authorized to be created by the constitution or any law, ~~which~~  
18 that is entitled to expend moneys appropriated by law, including the legislature and  
19 the courts, but not including an authority created in subch. III of ch. 149 or in ch. 231,  
20 233, 234, or 237.

21 **SECTION 16.** 16.53 (2) of the statutes is amended to read:

22 16.53 (2) IMPROPER INVOICES. If an agency receives an improperly completed  
23 invoice, the agency shall notify the sender of the invoice within 10 working days after  
24 it receives the invoice of the reason it is improperly completed. In this subsection,  
25 “agency” means an office, department, independent agency, institution of higher

1 education, association, society, or other body in state government created or  
2 authorized to be created by the constitution or any law, ~~which~~ that is entitled to  
3 expend moneys appropriated by law, including the legislature and the courts, but not  
4 including an authority created in subch. III of ch. 149 or in ch. 231, 233, 234, or 237.

5 **SECTION 17.** 16.54 (9) (a) 1. of the statutes is amended to read:

6 16.54 (9) (a) 1. “Agency” means an office, department, independent agency,  
7 institution of higher education, association, society or other body in state  
8 government created or authorized to be created by the constitution or any law, which  
9 is entitled to expend moneys appropriated by law, including the legislature and the  
10 courts, but not including an authority created in subch. III of ch. 149 or in ch. 231,  
11 233, 234, or 237.

12 **SECTION 18.** 16.70 (2) of the statutes is amended to read:

13 16.70 (2) “Authority” means a body created under subch. III of ch. 149 or under  
14 ch. 231, 232, 233, 234, 235, or 237.

15 **SECTION 19.** 16.72 (2) (e) (intro.) of the statutes is amended to read:

16 16.72 (2) (e) (intro.) In writing the specifications under this subsection, the  
17 department and any other designated purchasing agent under s. 16.71 (1) shall  
18 incorporate requirements for the purchase of products made from recycled materials  
19 and recovered materials if their use is technically and economically feasible. Each  
20 authority other than the University of Wisconsin Hospitals and Clinics Authority  
21 and the Health Insurance Risk-Sharing Plan Authority, in writing specifications for  
22 purchasing by the authority, shall incorporate requirements for the purchase of  
23 products made from recycled materials and recovered materials if their use is  
24 technically and economically feasible. The specifications shall include requirements  
25 for the purchase of the following materials:



1           **SECTION 20.** 16.72 (2) (f) of the statutes is amended to read:

2           16.72 (2) (f) In writing specifications under this subsection, the department,  
3 any other designated purchasing agent under s. 16.71 (1), and each authority other  
4 than the University of Wisconsin Hospitals and Clinics Authority and the Health  
5 Insurance Risk-Sharing Plan Authority shall incorporate requirements relating to  
6 the recyclability and ultimate disposition of products and, wherever possible, shall  
7 write the specifications so as to minimize the amount of solid waste generated by the  
8 state, consistent with the priorities established under s. 287.05 (12). All  
9 specifications under this subsection shall discourage the purchase of single-use,  
10 disposable products and require, whenever practical, the purchase of multiple-use,  
11 durable products.

12           **SECTION 21.** 16.75 (1m) of the statutes is amended to read:

13           16.75 (1m) The department shall award each order or contract for materials,  
14 supplies or equipment on the basis of life cycle cost estimates, whenever such action  
15 is appropriate. Each authority other than the University of Wisconsin Hospitals and  
16 Clinics Authority and the Health Insurance Risk-Sharing Plan Authority shall  
17 award each order or contract for materials, supplies or equipment on the basis of life  
18 cycle cost estimates, whenever such action is appropriate. The terms, conditions and  
19 evaluation criteria to be applied shall be incorporated in the solicitation of bids or  
20 proposals. The life cycle cost formula may include, but is not limited to, the  
21 applicable costs of energy efficiency, acquisition and conversion, money,  
22 transportation, warehousing and distribution, training, operation and maintenance  
23 and disposition or resale. The department shall prepare documents containing  
24 technical guidance for the development and use of life cycle cost estimates, and shall  
25 make the documents available to local governmental units.

\*\*\*NOTE: Should the HIRSP Authority be excluded, as drafted?

1           **SECTION 22.** 16.75 (8) (a) 1. of the statutes is amended to read:

2           16.75 (8) (a) 1. The department, any other designated purchasing agent under  
3 s. 16.71 (1), any agency making purchases under s. 16.74, and each authority other  
4 than the University of Wisconsin Hospitals and Clinics Authority and the Health  
5 Insurance Risk-Sharing Plan Authority shall, to the extent practicable, make  
6 purchasing selections using specifications developed under s. 16.72 (2) (e) to  
7 maximize the purchase of materials utilizing recycled materials and recovered  
8 materials.

9           **SECTION 23.** 16.75 (8) (a) 2. of the statutes is amended to read:

10           16.75 (8) (a) 2. Each agency and authority other than the University of  
11 Wisconsin Hospitals and Clinics Authority and the Health Insurance Risk-Sharing  
12 Plan Authority shall ensure that the average recycled or recovered content of all  
13 paper purchased by the agency or authority measured as a proportion, by weight, of  
14 the fiber content of paper products purchased in a fiscal year, is not less than 40%  
15 of all purchased paper.

16           **SECTION 24.** 16.75 (9) of the statutes is amended to read:

17           16.75 (9) The department, any other designated purchasing agent under s.  
18 16.71 (1), any agency making purchases under s. 16.74, and any authority other than  
19 the University of Wisconsin Hospitals and Clinics Authority and the Health  
20 Insurance Risk-Sharing Plan Authority shall, to the extent practicable, make  
21 purchasing selections using specifications prepared under s. 16.72 (2) (f).

22           **SECTION 25.** 16.75 (10m) of the statutes is amended to read:

23           16.75 (10m) The department, any other designated purchasing agent under s.  
24 16.71 (1), any agency making purchases under s. 16.74, and any authority other than

1 the Health Insurance Risk-Sharing Plan Authority shall not enter into any contract  
2 or order for the purchase of materials, supplies, equipment, or contractual services  
3 with a person if the name of the person, or the name of an affiliate of that person, is  
4 certified to the department by the secretary of revenue under s. 77.66.

5 **SECTION 26.** 16.765 (1) of the statutes is amended to read:

6 16.765 (1) Contracting agencies, the University of Wisconsin Hospitals and  
7 Clinics Authority, the Fox River Navigational System Authority, the Health  
8 Insurance Risk-Sharing Plan Authority, and the Bradley Center Sports and  
9 Entertainment Corporation shall include in all contracts executed by them a  
10 provision obligating the contractor not to discriminate against any employee or  
11 applicant for employment because of age, race, religion, color, handicap, sex, physical  
12 condition, developmental disability as defined in s. 51.01 (5), sexual orientation as  
13 defined in s. 111.32 (13m), or national origin and, except with respect to sexual  
14 orientation, obligating the contractor to take affirmative action to ensure equal  
15 employment opportunities.

16 **SECTION 27.** 16.765 (2) of the statutes is amended to read:

17 16.765 (2) Contracting agencies, the University of Wisconsin Hospitals and  
18 Clinics Authority, the Fox River Navigational System Authority, the Health  
19 Insurance Risk-Sharing Plan Authority, and the Bradley Center Sports and  
20 Entertainment Corporation shall include the following provision in every contract  
21 executed by them: "In connection with the performance of work under this contract,  
22 the contractor agrees not to discriminate against any employee or applicant for  
23 employment because of age, race, religion, color, handicap, sex, physical condition,  
24 developmental disability as defined in s. 51.01 (5), sexual orientation or national  
25 origin. This provision shall include, but not be limited to, the following: employment,

1 upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or  
2 termination; rates of pay or other forms of compensation; and selection for training,  
3 including apprenticeship. Except with respect to sexual orientation, the contractor  
4 further agrees to take affirmative action to ensure equal employment opportunities.  
5 The contractor agrees to post in conspicuous places, available for employees and  
6 applicants for employment, notices to be provided by the contracting officer setting  
7 forth the provisions of the nondiscrimination clause”.

8 **SECTION 28.** 16.765 (4) of the statutes is amended to read:

9 16.765 (4) Contracting agencies, the University of Wisconsin Hospitals and  
10 Clinics Authority, the Fox River Navigational System Authority, the Health  
11 Insurance Risk-Sharing Plan Authority, and the Bradley Center Sports and  
12 Entertainment Corporation shall take appropriate action to revise the standard  
13 government contract forms under this section.

14 **SECTION 29.** 16.765 (5) of the statutes is amended to read:

15 16.765 (5) The head of each contracting agency and the boards of directors of  
16 the University of Wisconsin Hospitals and Clinics Authority, the Fox River  
17 Navigational System Authority, the Health Insurance Risk-Sharing Plan Authority,  
18 and the Bradley Center Sports and Entertainment Corporation shall be primarily  
19 responsible for obtaining compliance by any contractor with the nondiscrimination  
20 and affirmative action provisions prescribed by this section, according to procedures  
21 recommended by the department. The department shall make recommendations to  
22 the contracting agencies and the boards of directors of the University of Wisconsin  
23 Hospitals and Clinics Authority, the Fox River Navigational System Authority, the  
24 Health Insurance Risk-Sharing Plan Authority, and the Bradley Center Sports and  
25 Entertainment Corporation for improving and making more effective the

1 nondiscrimination and affirmative action provisions of contracts. The department  
2 shall promulgate such rules as may be necessary for the performance of its functions  
3 under this section.

4 **SECTION 30.** 16.765 (6) of the statutes is amended to read:

5 16.765 (6) The department may receive complaints of alleged violations of the  
6 nondiscrimination provisions of such contracts. The department shall investigate  
7 and determine whether a violation of this section has occurred. The department may  
8 delegate this authority to the contracting agency, the University of Wisconsin  
9 Hospitals and Clinics Authority, the Fox River Navigational System Authority, the  
10 Health Insurance Risk-Sharing Plan Authority, or the Bradley Center Sports and  
11 Entertainment Corporation for processing in accordance with the department's  
12 procedures.

13 **SECTION 31.** 16.765 (7) (intro.) of the statutes is amended to read:

14 16.765 (7) (intro.) When a violation of this section has been determined by the  
15 department, the contracting agency, the University of Wisconsin Hospitals and  
16 Clinics Authority, the Fox River Navigational System Authority, the Health  
17 Insurance Risk-Sharing Plan Authority, or the Bradley Center Sports and  
18 Entertainment Corporation, the contracting agency, the University of Wisconsin  
19 Hospitals and Clinics Authority, the Fox River Navigational System Authority, the  
20 Health Insurance Risk-Sharing Plan Authority, or the Bradley Center Sports and  
21 Entertainment Corporation shall:

22 **SECTION 32.** 16.765 (7) (d) of the statutes is amended to read:

23 16.765 (7) (d) Direct the violating party to take immediate steps to prevent  
24 further violations of this section and to report its corrective action to the contracting  
25 agency, the University of Wisconsin Hospitals and Clinics Authority, the Fox River

1 Navigational System Authority, the Health Insurance Risk-Sharing Plan Authority,  
2 or the Bradley center ~~sports and entertainment corporation~~ Center Sports and  
3 Entertainment Corporation.

4 SECTION 33. 16.765 (8) of the statutes is amended to read:

5 16.765 (8) If further violations of this section are committed during the term  
6 of the contract, the contracting agency, the Fox River Navigational System Authority,  
7 the Health Insurance Risk-Sharing Plan Authority, or the Bradley Center Sports  
8 and Entertainment Corporation may permit the violating party to complete the  
9 contract, after complying with this section, but thereafter the contracting agency, the  
10 Fox River Navigational System Authority, the Health Insurance Risk-Sharing Plan  
11 Authority, or the Bradley Center Sports and Entertainment Corporation shall  
12 request the department to place the name of the party on the ineligible list for state  
13 contracts, or the contracting agency, the Fox River Navigational System Authority,  
14 the Health Insurance Risk-Sharing Plan Authority, or the Bradley Center Sports  
15 and Entertainment Corporation may terminate the contract without liability for the  
16 uncompleted portion or any materials or services purchased or paid for by the  
17 contracting party for use in completing the contract.

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18 SECTION 34. 16.865 (8) of the statutes is amended to read:

19 16.865 (8) Annually in each fiscal year, allocate as a charge to each agency a  
20 proportionate share of the estimated costs attributable to programs administered by  
21 the agency to be paid from the appropriation under s. 20.505 (2) (k). The department  
22 may charge premiums to agencies to finance costs under this subsection and pay the  
23 costs from the appropriation on an actual basis. The department shall deposit all  
24 collections under this subsection in the appropriation account under s. 20.505 (2) (k).  
25 Costs assessed under this subsection may include judgments, investigative and

1 adjustment fees, data processing and staff support costs, program administration  
2 costs, litigation costs, and the cost of insurance contracts under sub. (5). In this  
3 subsection, “agency” means an office, department, independent agency, institution  
4 of higher education, association, society, or other body in state government created  
5 or authorized to be created by the constitution or any law, ~~which~~ that is entitled to  
6 expend moneys appropriated by law, including the legislature and the courts, but not  
7 including an authority created in subch. III of ch. 149 or in ch. 231, 232, 233, 234, 235,  
8 or 237.

9 **SECTION 35.** 19.42 (5) of the statutes is amended to read:

10 19.42 (5) “Department” means the legislature, the University of Wisconsin  
11 System, any authority or public corporation created and regulated by an act of the  
12 legislature, except the Health Insurance Risk-Sharing Plan Authority, and any  
13 office, department, independent agency, or legislative service agency created under  
14 ch. 13, 14, or 15, any technical college district, or any constitutional office other than  
15 a judicial office. In the case of a district attorney, “department” means the  
16 department of administration unless the context otherwise requires.

17 **SECTION 36.** 20.145 (5) of the statutes is created to read:

18 20.145 (5) HEALTH INSURANCE RISK-SHARING PLAN. (g) *Insurer assessments.* All  
19 moneys received in insurer assessments under s. 149.13, to be transferred to the  
20 Health Insurance Risk-Sharing Plan fund.

21 (m) *Federal grants for high risk pool.* All moneys received from the federal  
22 government in high risk pool grants, to be transferred to the Health Insurance  
23 Risk-Sharing Plan fund.

24 **SECTION 37.** 20.435 (4) (u) of the statutes is repealed.

25 **SECTION 38.** 20.435 (4) (v) of the statutes is repealed.

Insert 16-3

1 SECTION 39. 25.55 (1) of the statutes is created to read:  
2 25.55 (1) All federal moneys transferred from the appropriation account under  
3 s. 20.145 (5) (m).

4 SECTION 40. 25.55 (3) of the statutes is amended to read:  
5 25.55 (3) Insurer assessments under ~~ch. 149 s. 149.13~~, transferred from the  
6 appropriation account under s. 20.145 (5) (g).

7 SECTION 41. 70.11 (41m) of the statutes is created to read:  
8 70.11 (41m) HEALTH INSURANCE RISK-SHARING PLAN AUTHORITY. All property  
9 owned by the Health Insurance Risk-Sharing Plan Authority, provided that use of  
10 the property is primarily related to the purposes of the authority.

11 SECTION 42. 71.07 (5g) of the statutes is created to read:  
12 71.07 (5g) HEALTH INSURANCE RISK-SHARING PLAN ASSESSMENTS CREDIT. (a)  
13 *Definitions.* In this subsection, "claimant" means a partner, limited liability  
14 company member, or tax-option corporation shareholder who files a claim under this  
15 subsection and who is a partner, member, or shareholder of an entity that is an  
16 insurer, as defined in s. 149.10 (5).

17 (b) *Filing claims.* Subject to the limitations provided under this subsection, for  
18 taxable years beginning after December 31, 2005, a claimant may claim as a credit  
19 against the taxes imposed under s. 71.02 an amount that is equal to a percentage of  
20 the amount of the assessment under s. 149.13 that the claimant paid in the taxable  
21 year, as determined under par. (c).

22 (c) *Limitations.* 1. The department of revenue, in consultation with the office  
23 of the commissioner of insurance, shall determine the percentage under par. (b) for  
24 each claimant for each taxable year so that the ~~cost~~ of the credit under this subsection

amount awarded to all claimants



1 and ss. 71.28 (5g), 71.47 (5g), and 76.655 is as close as practicable to \$5,000,000 in  
2 each fiscal year.

3 2. Partnerships, limited liability companies, and tax-option corporations may  
4 not claim the credit under this subsection, but the eligibility for, and the amount of,  
5 the credit are based on their payment of amounts described under par. (b). A  
6 partnership, limited liability company, or tax-option corporation shall compute the  
7 amount of credit that each of its partners, members, or shareholders may claim and  
8 shall provide that information to each of them. Partners, members of limited liability  
9 companies, and shareholders of tax-option corporations may claim the credit in  
10 proportion to their ownership interests.

11 (d) *Administration.* Section 71.28 (4) (e) to (h), as it applies to the credit under  
12 s. 71.28 (4), applies to the credit under this subsection.

13 **SECTION 43.** 71.10 (4) (cp) of the statutes is created to read:

14 71.10 (4) (cp) Health Insurance Risk-Sharing Plan assessments credit under  
15 s. 71.07 (5g).

16 **SECTION 44.** 71.21 (4) of the statutes is amended to read:

17 71.21 (4) Credits computed by a partnership under s. 71.07 (2dd), (2de), (2di),  
18 (2dj), (2dL), (2dm), (2ds), (2dx), (3g), (3n), (3s), (3t), ~~and (5b), and (5g)~~ and passed  
19 through to partners shall be added to the partnership's income.

20 **SECTION 45.** 71.26 (1) (be) of the statutes is amended to read:

21 71.26 (1) (be) *Certain authorities.* Income of the University of Wisconsin  
22 Hospitals and Clinics Authority, of the Health Insurance Risk-Sharing Plan  
23 Authority, and of the Fox River Navigational System Authority.

24 **SECTION 46.** 71.26 (2) (a) of the statutes is amended to read:

1           71.26 (2) (a) *Corporations in general.* The “net income” of a corporation means  
2 the gross income as computed under the Internal Revenue Code as modified under  
3 sub. (3) minus the amount of recapture under s. 71.28 (1di) plus the amount of credit  
4 computed under s. 71.28 (1), (3), (4), and (5) minus, as provided under s. 71.28 (3) (c)  
5 7., the amount of the credit under s. 71.28 (3) that the taxpayer added to income  
6 under this paragraph at the time that the taxpayer first claimed the credit plus the  
7 amount of the credit computed under s. 71.28 (1dd), (1de), (1di), (1dj), (1dL), (1dm),  
8 (1ds), (1dx), (3g), (3n), (3t), ~~and (5b)~~, (5g) and not passed through by a partnership,  
9 limited liability company, or tax-option corporation that has added that amount to  
10 the partnership’s, limited liability company’s, or tax-option corporation’s income  
11 under s. 71.21 (4) or 71.34 (1) (g) plus the amount of losses from the sale or other  
12 disposition of assets the gain from which would be wholly exempt income, as defined  
13 in sub. (3) (L), if the assets were sold or otherwise disposed of at a gain and minus  
14 deductions, as computed under the Internal Revenue Code as modified under sub.  
15 (3), plus or minus, as appropriate, an amount equal to the difference between the  
16 federal basis and Wisconsin basis of any asset sold, exchanged, abandoned, or  
17 otherwise disposed of in a taxable transaction during the taxable year, except as  
18 provided in par. (b) and s. 71.45 (2) and (5).

19           **SECTION 47.** 71.28 (5g) of the statutes is created to read:

20           71.28 (5g) **HEALTH INSURANCE RISK-SHARING PLAN ASSESSMENTS CREDIT.** (a)  
21 *Definitions.* In this subsection, “claimant” means an insurer, as defined in s. 149.10  
22 (5), who files a claim under this subsection.

23           (b) *Filing claims.* Subject to the limitations provided under this subsection, for  
24 taxable years beginning after December 31, 2005, a claimant may claim as a credit  
25 against the taxes imposed under s. 71.23 an amount that is equal to a percentage of

1 the amount of assessment under s. 149.13 that the claimant paid in the taxable year,  
2 as determined under par. (c) 1.

3 (c) *Limitations.* 1. The department of revenue, in consultation with the office  
4 of the commissioner of insurance, shall determine the percentage under par. (b) for  
5 each claimant for each taxable year so that the <sup>amount</sup> cost of the credit under this subsection,  
6 and ss. 71.07 (5g), 71.47 (5g), and 76.655 is as close as practicable to \$5,000,000 in  
7 each fiscal year. *awarded to all claimants*

8 2. Partnerships, limited liability companies, and tax-option corporations may  
9 not claim the credit under this subsection, but the eligibility for, and the amount of,  
10 the credit are based on their payment of amounts described under par. (b). A  
11 partnership, limited liability company, or tax-option corporation shall compute the  
12 amount of credit that each of its partners, members, or shareholders may claim and  
13 shall provide that information to each of them. Partners, members of limited liability  
14 companies, and shareholders of tax-option corporations may claim the credit in  
15 proportion to their ownership interests.

16 (d) *Administration.* Subsection (4) (e) to (h), as it applies to the credit under  
17 sub. (4), applies to the credit under this subsection.

18 **SECTION 48.** 71.30 (3) (dm) of the statutes is created to read:

19 71.30 (3) (dm) Health Insurance Risk-Sharing Plan assessments credit under  
20 s. 71.28 (5g).

21 **SECTION 49.** 71.34 (1) (g) of the statutes is amended to read:

22 71.34 (1) (g) An addition shall be made for credits computed by a tax-option  
23 corporation under s. 71.28 (1dd), (1de), (1di), (1dj), (1dL), (1dm), (1ds), (1dx), (3), (3g),  
24 (3n), (3t), ~~and (5b)~~, and (5g) and passed through to shareholders.

25 **SECTION 50.** 71.45 (2) (a) 10. of the statutes is amended to read:

1           71.45 (2) (a) 10. By adding to federal taxable income the amount of credit  
2           computed under s. 71.47 (1dd) to (1dx), (3n), and (5b), and (5g) and not passed  
3           through by a partnership, limited liability company, or tax-option corporation that  
4           has added that amount to the partnership's, limited liability company's, or  
5           tax-option corporation's income under s. 71.21 (4) or 71.34 (1) (g) and the amount of  
6           credit computed under s. 71.47 (1), (3), (3t), (4), and (5).

7           **SECTION 51.** 71.47 (5g) of the statutes is created to read:

8           **71.47 (5g) HEALTH INSURANCE RISK-SHARING PLAN ASSESSMENTS CREDIT.** (a)  
9           *Definitions.* In this subsection, "claimant" means an insurer, as defined in s. 149.10  
10          (5), who files a claim under this subsection.

11          (b) *Filing claims.* Subject to the limitations provided under this subsection, for  
12          taxable years beginning after December 31, 2005, a claimant may claim as a credit  
13          against the taxes imposed under s. 71.43 an amount that is equal to a percentage of  
14          the amount of assessment under s. 149.13 that the claimant paid in the taxable year,  
15          as determined under par. (c) 1.

16          (c) *Limitations.* 1. The department of revenue, in consultation with the office  
17          of the commissioner of insurance, shall determine the percentage under par. (b) for  
18          each claimant for each taxable year so that the ~~cost~~<sup>amount</sup> of the credit under this subsection  
19          and ss. 71.07 (5g), 71.28 (5g), and 76.655 is as close as practicable to \$5,000,000 in  
20          each fiscal year.

21          2. Partnerships, limited liability companies, and tax-option corporations may  
22          not claim the credit under this subsection, but the eligibility for, and the amount of,  
23          the credit are based on their payment of amounts described under par. (b). A  
24          partnership, limited liability company, or tax-option corporation shall compute the  
25          amount of credit that each of its partners, members, or shareholders may claim and

*awarded  
awarded to all claimants*

1 shall provide that information to each of them. Partners, members of limited liability  
2 companies, and shareholders of tax-option corporations may claim the credit in  
3 proportion to their ownership interests.

4 (d) *Administration*. Section 71.28 (4) (e) to (h), as it applies to the credit under  
5 s. 71.28 (4), applies to the credit under this subsection.

6 **SECTION 52.** 71.49 (1) (dm) of the statutes is created to read:

7 71.49 (1) (dm) Health Insurance Risk-Sharing Plan assessments credit under  
8 s. 71.47 (5g).

9 **SECTION 53.** 76.655 of the statutes is created to read:

10 **76.655 Health Insurance Risk-Sharing Plan assessments credit. (1)**

11 **DEFINITIONS.** In this section, “claimant” means an insurer, as defined in s. 149.10 (5),  
12 who files a claim under this section.

13 **(2) FILING CLAIMS.** Subject to the limitations provided under this section, for  
14 taxable years beginning after December 31, 2005, a claimant may claim as a credit  
15 against the fees imposed under ss. 76.60, 76.63, 76.65, 76.66 or 76.67 an amount that  
16 is equal to a percentage of the amount of assessment under s. 149.13 that the  
17 claimant paid in the taxable year, as determined under sub. (3).

18 **(3) LIMITATIONS.** The department of revenue, in consultation with the office of  
19 the commissioner of insurance, shall determine the percentage under sub. (2) for  
20 each claimant for each taxable year so that the ~~cost~~<sup>amount</sup> of the credit under this section  
21 and ss. 71.07 (5g), 71.28 (5g), and 71.47 (5g) is as close as practicable to \$5,000,000  
22 in each fiscal year.

23 **(4) CARRY-FORWARD.** If the credit under sub. (2) is not entirely offset against the  
24 fees imposed under ss. 76.60, 76.63, 76.65, 76.66, or 76.67 that are otherwise due, the  
25 unused balance may be carried forward and credited against those fees in the

awarded to all claimants<sup>5</sup>

1 following 15 years to the extent that it is not offset by those fees otherwise due in all  
2 the years between the year in which the assessment was paid and the year in which  
3 the carry-forward credit is claimed.

4 **SECTION 54.** 76.67 (2) of the statutes is amended to read:

5 76.67 (2) If any domestic insurer is licensed to transact insurance business in  
6 another state, this state may not require similar insurers domiciled in that other  
7 state to pay taxes greater in the aggregate than the aggregate amount of taxes that  
8 a domestic insurer is required to pay to that other state for the same year less the  
9 ~~credit~~ credits under s. ss. 76.635 and 76.655, except that the amount imposed shall  
10 not be less than the total of the amounts due under ss. 76.65 (2) and 601.93 and, if  
11 the insurer is subject to s. 76.60, 0.375% of its gross premiums, as calculated under  
12 s. 76.62, less offsets allowed under s. 646.51 (7) or under s. ss. 76.635 and 76.655  
13 against that total, and except that the amount imposed shall not be less than the  
14 amount due under s. 601.93.

15 **SECTION 55.** 77.54 (9a) (a) of the statutes is amended to read:

16 77.54 (9a) (a) This state or any agency thereof, the University of Wisconsin  
17 Hospitals and Clinics Authority, the Health Insurance Risk-Sharing Plan Authority,  
18 and the Fox River Navigational System Authority.

19 **SECTION 56.** 77.92 (4) of the statutes is amended to read:

20 77.92 (4) “Net business income,” with respect to a partnership, means taxable  
21 income as calculated under section 703 of the Internal Revenue Code; plus the items  
22 of income and gain under section 702 of the Internal Revenue Code, including taxable  
23 state and municipal bond interest and excluding nontaxable interest income or  
24 dividend income from federal government obligations; minus the items of loss and  
25 deduction under section 702 of the Internal Revenue Code, except items that are not

1 deductible under s. 71.21; plus guaranteed payments to partners under section 707  
2 (c) of the Internal Revenue Code; plus the credits claimed under s. 71.07 (2dd), (2de),  
3 (2di), (2dj), (2dL), (2dm), (2dr), (2ds), (2dx), (3g), (3s), (3n), (3t), and (5b), and (5g); and  
4 plus or minus, as appropriate, transitional adjustments, depreciation differences,  
5 and basis differences under s. 71.05 (13), (15), (16), (17), and (19); but excluding  
6 income, gain, loss, and deductions from farming. “Net business income,” with respect  
7 to a natural person, estate, or trust, means profit from a trade or business for federal  
8 income tax purposes and includes net income derived as an employee as defined in  
9 section 3121 (d) (3) of the Internal Revenue Code.

10 **SECTION 57.** 88.172 (2) of the statutes is renumbered 88.172 (2) (bm).

11 **SECTION 58.** 88.172 (2) (am) of the statutes is created to read:

12 88.172 (2) (am) In this subsection and sub. (3), “authority” does not include the  
13 Health Insurance Risk-Sharing Plan Authority.

14 **SECTION 59.** 88.172 (3) of the statutes is amended to read:

15 88.172 (3) Subsection (2) (bm) does not apply to a proceeding brought by a  
16 governmental unit, authority, or agency in its capacity as a private party or  
17 contractor.

18 **SECTION 60.** 101.055 (2) (a) of the statutes is amended to read:

19 101.055 (2) (a) “Agency” means an office, department, independent agency,  
20 authority, institution, association, society, or other body in state government created  
21 or authorized to be created by the constitution or any law, and includes the  
22 legislature and the courts, but excludes the Health Insurance Risk-Sharing Plan  
23 Authority.

24 **SECTION 61.** 101.177 (1) (d) of the statutes is amended to read:

1            101.177 (1) (d) “State agency” means any office, department, agency,  
2 institution of higher education, association, society, or other body in state  
3 government created or authorized to be created by the constitution or any law which  
4 , that is entitled to expend moneys appropriated by law, including the legislature and  
5 the courts, the Wisconsin Housing and Economic Development Authority, the  
6 Bradley Center Sports and Entertainment Corporation, the University of Wisconsin  
7 Hospitals and Clinics Authority, and the Wisconsin Health and Educational  
8 Facilities Authority, but excluding the Health Insurance Risk-Sharing Plan  
9 Authority.

10            **SECTION 62.** 103.10 (1) (c) of the statutes is amended to read:

11            103.10 (1) (c) Except as provided in sub. (14) (b), “employer” means a person  
12 engaging in any activity, enterprise, or business in this state employing at least 50  
13 individuals on a permanent basis. “Employer” includes the state and any office,  
14 department, independent agency, authority, institution, association, society, or other  
15 body in state government created or authorized to be created by the constitution or  
16 any law, including the legislature and the courts, but excluding the Health Insurance  
17 Risk-Sharing Plan Authority.

18            **SECTION 63.** 103.15 (1) (a) of the statutes is amended to read:

19            103.15 (1) (a) “Employer” includes the state, its political subdivisions, and any  
20 office, department, independent agency, authority, institution, association, society,  
21 or other body in state or local government created or authorized to be created by the  
22 constitution or any law, including the legislature and the courts, but excluding the  
23 Health Insurance Risk-Sharing Plan Authority.

24            **SECTION 64.** Chapter 149 (title) of the statutes is amended to read:

25            **CHAPTER 149**



1                                   **MANDATORY HEALTH INSURANCE**

2                                   **RISK-SHARING PLAN PLANS**

3           **SECTION 65.** Subchapter I (title) of chapter 149 [precedes 149.10] of the statutes  
4 is created to read:

5                                   **CHAPTER 149**

6                                   **SUBCHAPTER I**

7                                   **GENERAL PROVISIONS**

8           **SECTION 66.** 149.10 (intro.) of the statutes is amended to read:

9           **149.10 Definitions.** (intro.) In this chapter, unless the context requires  
10 otherwise:

11           **SECTION 67.** 149.10 (1) of the statutes is created to read:

12           149.10 (1) “Authority” means the Health Insurance Risk-Sharing Plan  
13 Authority.

14           **SECTION 68.** 149.10 (2) of the statutes is amended to read:

15           149.10 (2) “Board” means the board of ~~governors established under s. 149.15~~  
16 directors of the authority.

17           **SECTION 69.** 149.10 (2j) (a) 3. of the statutes is amended to read:

18           149.10 (2j) (a) 3. Part A ~~or~~, part B, or part D of title XVIII of the federal Social  
19 Security Act.

20           **SECTION 70.** 149.10 (2m) of the statutes is repealed.

21           **SECTION 71.** 149.10 (2t) (c) of the statutes is amended to read:

22           149.10 (2t) (c) The individual does not have creditable coverage and is not  
23 eligible for coverage under a group health plan, part A ~~or~~, part B, or part D of title  
24 XVIII of the federal Social Security Act or a state plan under title XIX of the federal  
25 Social Security Act or any successor program.

1           **SECTION 72.** 149.10 (3) of the statutes is amended to read:

2           149.10 (3) “Eligible person” means a resident of ~~this state~~ who qualifies under  
3 s. 149.12 whether or not the person is legally responsible for the payment of medical  
4 expenses incurred on the person’s behalf.

5           **SECTION 73.** 149.10 (3e) of the statutes is amended to read:

6           149.10 (3e) “Fund” means the ~~health insurance risk-sharing plan~~ Health  
7 Insurance Risk-Sharing Plan fund.

8           **SECTION 74.** 149.10 (7) of the statutes is amended to read:

9           149.10 (7) “Medicare” means coverage under ~~both part A and, part B, and part~~  
10 D of Title XVIII of the federal social security act, 42 USC 1395 et seq., as amended.

11           **SECTION 75.** 149.10 (8) of the statutes is amended to read:

12           149.10 (8) “Plan” means the health care insurance plan established and  
13 administered under subchapter II of this chapter.

14           **SECTION 76.** 149.10 (9) of the statutes is amended to read:

15           149.10 (9) “Resident” means a person who has been legally domiciled in this  
16 state for a period of at least ~~30 days~~ 3 months or, with respect to an eligible individual,  
17 an individual who resides in this state. For purposes of this chapter, legal domicile  
18 is established by living in this state and obtaining a Wisconsin motor vehicle  
19 operator’s license, registering to vote in Wisconsin, or filing a Wisconsin income tax  
20 return. A child is legally domiciled in this state if the child lives in this state and if  
21 at least one of the child’s parents or the child’s guardian is legally domiciled in this  
22 state. A person with a developmental disability or another disability ~~which~~ that  
23 prevents the person from obtaining a Wisconsin motor vehicle operator’s license,  
24 registering to vote in Wisconsin, or filing a Wisconsin income tax return, is legally  
25 domiciled in this state by living in this state.

1           **SECTION 77.** 149.10 (10) of the statutes is repealed.

2           **SECTION 78.** 149.105 of the statutes is created to read:

3           **149.105 Immunity.** No cause of action of any nature may arise against, and  
4 no liability may be imposed upon, the authority, plan, or board; or any agent,  
5 employee, or director of any of them; or participating insurers; or the commissioner;  
6 or any of the commissioner’s agents, employees, or representatives, for any act or  
7 omission by any of them in the performance of their powers and duties under this  
8 chapter, unless the person asserting liability proves that the act or omission  
9 constitutes willful misconduct.

10          **SECTION 79.** Subchapter II (title) of chapter 149 [precedes 149.11] of the  
11 statutes is created to read:

12                                   **CHAPTER 149**  
13                                   **SUBCHAPTER II**  
14                                   **HEALTH INSURANCE RISK-SHARING**  
15                                   **PLAN PROVISIONS**

*ss. 149.143(2)  
and 149.47*

16          **SECTION 80.** 149.11 of the statutes is repealed and recreated to read:

17          **149.11 Administration of plan.** (1) **AUTHORITY.** The authority shall be  
18 responsible for the operation of the plan and, subject to ~~§ 149.147~~, may enter into  
19 contracts for the plan’s administration.

20          (2) **FUND.** The authority shall pay the operating and administrative expenses  
21 of the plan from the fund. Moneys in the fund may be expended only for the purposes  
22 specified in this subsection.

23          **SECTION 81.** 149.115 of the statutes is amended to read:

24          **149.115 Rules relating to creditable coverage.** The commissioner, ~~in~~  
25 ~~consultation with the department,~~ shall promulgate rules that specify how

1       creditable coverage is to be aggregated for purposes of s. 149.10 (2t) (a) and that  
2       determine the creditable coverage to which s. 149.10 (2t) (b) and (d) applies. The  
3       rules shall comply with section 2701 (c) of P.L. 104–191.

4               **SECTION 82.** 149.12 (1) (intro.) of the statutes is amended to read:

5               149.12 (1) (intro.) Except as provided in subs. (1m) and, (2), and (3), the board  
6       ~~or plan administrator~~ authority shall certify as eligible a person who is covered by  
7       medicare Medicare because he or she is disabled under 42 USC 423, a person who  
8       submits evidence that he or she has tested positive for the presence of HIV, antigen  
9       or nonantigenic products of HIV, or an antibody to HIV, a person who is an eligible  
10       individual, and any person who receives and submits any of the following based  
11       wholly or partially on medical underwriting considerations within 9 months prior to  
12       making application for coverage by the plan:

13               **SECTION 83.** 149.12 (1) (a) of the statutes is amended to read:

14               149.12 (1) (a) A notice of rejection of coverage from ~~one~~ 2 or more insurers.

15               **SECTION 84.** 149.12 (1m) of the statutes is amended to read:

16               149.12 (1m) The ~~board or plan administrator~~ authority may not certify a  
17       person as eligible under circumstances requiring notice under sub. (1) (a) to (d) if the  
18       required notices were issued by an insurance intermediary who is not acting as an  
19       administrator, as defined in s. 633.01.

20               **SECTION 85.** 149.12 (2) (f) of the statutes is renumbered 149.12 (2) (f) 1. and  
21       amended to read:

22               149.12 (2) (f) 1. ~~No~~ Except as provided in subd. 2., no person who is eligible for  
23       medical assistance is eligible for coverage under the plan.

24               **SECTION 86.** 149.12 (2) (f) 2. of the statutes is created to read:

1           149.12 (2) (f) 2. Subdivision 1. does not apply to a person who is otherwise  
2 eligible for coverage under the plan and who is eligible for only any of the following  
3 types of medical assistance:

4           a. Family planning services under s. 49.45 (24r).

5           b. Care and services for the treatment of an emergency medical condition under  
6 42 USC 1396b (v), as provided in s. 49.45 (27).

7           c. Medical assistance under s. 49.46 (1) (a) 15.

8           d. Ambulatory prenatal care under s. 49.465.

9           e. Medicare premium, coinsurance, and deductible payments under s. 49.46 (2)  
10 (c) 2. or 3., 49.468 (1) (b) or (c), or 49.47 (6) (a) 6. b. or c.

11           f. Medicare premium payments under s. 49.46 (2) (cm), 49.468 (1m) or (2), or  
12 49.47 (6) (a) 6m.

13           **SECTION 87.** 149.12 (2) (g) of the statutes is created to read:

14           149.12 (2) (g) A person is not eligible for coverage under the plan if the person  
15 is eligible for any of the following:

16           1. Services under s. 46.27 (11), 46.275, 46.277, or 46.278.

17           2. Medical assistance provided as part of a family care benefit, as defined in s.  
18 46.2805 (4).

19           3. Services provided under a waiver requested under 2001 Wisconsin Act 16,  
20 section 9123 (16rs), or 2003 Wisconsin Act 33, section 9124 (8c).

21           4. Services provided under the program of all-inclusive care for persons aged  
22 55 or older authorized under 42 USC 1396u-4.

23           5. Services provided under the demonstration program under a federal waiver  
24 authorized under 42 USC 1315.

1           6. Health care coverage under the Badger Care health care program under s.  
2           49.665.

3           **SECTION 88.** 149.12 (3) (a) of the statutes is amended to read:

4           149.12 (3) (a) Except as provided in pars. (b) to ~~(e)~~ and (bm), no person is eligible  
5           for coverage under the plan for whom a premium, deductible, or coinsurance amount  
6           is paid or reimbursed by a federal, state, county, or municipal government or agency  
7           as of the first day of any term for which a premium amount is paid or reimbursed and  
8           as of the day after the last day of any term during which a deductible or coinsurance  
9           amount is paid or reimbursed.

10          **SECTION 89.** 149.12 (3) (c) of the statutes is repealed.

11          **SECTION 90.** 149.12 (4) and (5) of the statutes are created to read:

12          149.12 (4) Subject to subs. (1m), (2), and (3), the authority may establish  
13          criteria that would enable additional persons to be eligible for coverage under the  
14          plan. The authority shall ensure that any expansion of eligibility is consistent with  
15          the purpose of the plan to provide health care coverage for those who are unable to  
16          obtain health insurance in the private market and does not endanger the solvency  
17          of the plan.

18          (5) The authority shall establish policies for determining and verifying the  
19          continued eligibility of an eligible person.

20          **SECTION 91.** 149.13 (1) of the statutes is amended to read:

21          149.13 (1) Every insurer shall participate in the cost of administering the plan,  
22          except the commissioner may by rule exempt as a class those insurers whose share  
23          as determined under sub. (2) would be so minimal as to not exceed the estimated cost  
24          of levying the assessment. The commissioner shall advise the department authority  
25          of the insurers participating in the cost of administering the plan.

1 SECTION 92. 149.13 (3) (a) of the statutes is amended to read:

2 149.13 (3) (a) Each insurer's proportion of participation under sub. (2) shall be  
3 determined annually by the commissioner based on annual statements and other  
4 reports filed by the insurer with the commissioner. The commissioner shall assess  
5 an insurer for the insurer's proportion of participation based on the total  
6 assessments estimated by the department under s. 149.143 (2) (a) 3. authority.

7 SECTION 93. 149.13 (3) (b) of the statutes is amended to read:

8 149.13 (3) (b) If the ~~department~~ authority or the commissioner finds that the  
9 commissioner's authority to require insurers to report under chs. 600 to 646 and 655  
10 is not adequate to permit ~~the department,~~ the commissioner or the ~~board~~ authority  
11 to carry out the ~~department's,~~ commissioner's or ~~board's~~ authority's responsibilities  
12 under this ~~chapter~~ subchapter, the commissioner shall promulgate rules requiring  
13 insurers to report the information necessary for the ~~department,~~ commissioner and  
14 ~~board~~ authority to make the determinations required under this ~~chapter~~ subchapter.

15 SECTION 94. 149.13 (4) of the statutes is amended to read:

16 149.13 (4) Notwithstanding subs. (1) to (3), the ~~department~~ authority, with the  
17 agreement of the commissioner, may perform various administrative functions  
18 related to the assessment of insurers participating in the cost of administering the  
19 plan.

20 SECTION 95. 149.14 (1) (a) of the statutes is amended to read:

21 149.14 (1) (a) The plan shall offer coverage for each eligible person in an  
22 annually renewable policy ~~the coverage specified in this section for each eligible~~  
23 ~~person.~~ If an eligible person is also eligible for ~~medicare~~ Medicare coverage, the plan  
24 shall not pay or reimburse any person for expenses paid for by ~~medicare~~ Medicare.

25 SECTION 96. 149.14 (2) (a) of the statutes is amended to read:

Insert 31-24  
keep

1           149.14 (2) (a) The plan shall provide every eligible person who is not eligible  
 2 for ~~medicare~~ Medicare with major medical expense coverage. Major medical expense  
 3 coverage offered under the plan under this section shall pay an eligible person's  
 4 covered expenses, subject to ~~sub. (3)~~ and deductible, copayment, and coinsurance  
 5 payments ~~authorized under sub. (5)~~, up to a lifetime limit of \$1,000,000 per covered  
 6 individual. ~~The maximum limit under this paragraph shall not be altered by the~~  
 7 ~~board, and no actuarially equivalent benefit may be substituted by the board.~~

8           **SECTION 97.** 149.14 (3) (intro.) of the statutes is renumbered 149.14 (3) and  
 9 amended to read:

10           149.14 (3) COVERED EXPENSES. <sup>(intro.)</sup> ~~Except as provided in sub. (4), except as~~  
 11 ~~restricted by cost containment provisions under s. 149.17 (4) and except as reduced~~  
 12 ~~by the department under ss. 149.143 and 149.144, covered Covered expenses for the~~  
 13 ~~coverage under this section the plan shall be the payment rates established by the~~  
 14 ~~department under s. 149.142 authority for the services provided by persons licensed~~  
 15 ~~under ch. 446 and certified under s. 49.45 (2) (a) 11. ~~Except as provided in sub. (4),~~~~  
 16 ~~except as restricted by cost containment provisions under s. 149.17 (4) and except as~~  
 17 ~~reduced by the department under ss. 149.143 and 149.144, covered Covered expenses~~  
 18 ~~for the coverage under this section the plan shall also be the payment rates~~  
 19 ~~established by the department under s. 149.142 authority for, at a minimum, the~~  
 20 following services and articles if the service or article is prescribed by a physician  
 21 who is licensed under ch. 448 or in another state and who is certified under s. 49.45  
 22 (2) (a) 11. and if the service or article is provided by a provider certified under s. 49.45  
 23 (2) (a) 11.:

24           **SECTION 98.** 149.14 (3) (b) of the statutes is repealed and recreated to read:

change component



1 149.14 (3) (b) Professional services for the diagnosis or treatment of injuries,  
2 illnesses, or conditions, other than mental or dental.

3 SECTION 99. 149.14 (3) (c) <sup>1.</sup> of the statutes is repealed and recreated to read:

4 149.14 (3) (c) 1. Inpatient hospital services, as defined in s. 632.89 (1) (d),  
5 outpatient services, as defined in s. 632.89 (1) (e), and transitional treatment  
6 arrangements, as defined in s. 632.89 (1) (f), only to the extent required under s.  
7 632.89.

8 *create* SECTION 100. 149.14 (3) (c) 2. of the statutes is repealed.

9 *from ins 58-23 844* SECTION 101. 149.14 (3) (c) 3. of the statutes is amended to read: *keep*

10 149.14 (3) (c) 3. Subject to the limits under subd. 2. ~~and to rules promulgated~~  
11 ~~by the department 1.,~~ services for the chronically mentally ill in community support  
12 programs operated under s. 51.421.

13 SECTION 102. 149.14 (3) (d) of the statutes is amended to read:

14 149.14 (3) (d) Drugs requiring a physician's prescription, ~~subject to sub. (4e).~~

15 SECTION 103. 149.14 (3) (e) of the statutes is amended to read:

16 149.14 (3) (e) Services For persons eligible for Medicare, services of a licensed  
17 skilled nursing facility ~~for eligible persons eligible for medicare~~, to the extent  
18 required by s. 632.895 (3) and for not more than an aggregate 120 days during a  
19 calendar year, if the services are of the type ~~which~~ that would qualify as reimbursable  
20 services under ~~medicare~~ Medicare. Coverage under this paragraph ~~which~~ that is not  
21 required by s. 632.895 (3) is subject to ~~the~~ any deductible and coinsurance  
22 requirements ~~under sub. (5) provided by the authority.~~

23 SECTION 104. 149.14 (3) (f) of the statutes is created to read:

24 149.14 (3) (f) Services of a home health agency, as defined in s. 50.49 (1) (a), only  
25 to the extent required under s. 632.895 (2).

*Insert 33-12*

1           **SECTION 105.** 149.14 (3) (m) of the statutes is amended to read:

2           149.14 (3) (m) Oral surgery for excision of partially or completely unerupted,  
3 impacted teeth and oral surgery with respect to the gums and other tissues of the  
4 mouth when not performed in connection with the extraction or repair of teeth.

5           **SECTION 106.** 149.14 (3) (o) of the statutes is amended to read:

6           149.14 (3) (o) Transportation Emergency and other medically necessary  
7 transportation provided by a licensed ambulance service to the nearest facility  
8 qualified to treat the a covered condition.

9           **SECTION 107.** 149.14 (3) (p) of the statutes is renumbered 149.14 (3) (em).

10          **SECTION 108.** 149.14 (4) of the statutes is repealed and recreated to read:

11          149.14 (4) PLAN DESIGN. Subject to subs. (1) to (3), (5), and (6), the authority  
12 shall establish the plan design, after taking into consideration the levels of health  
13 insurance coverage provided in the state and medical economic factors, as  
14 appropriate. Subject to subs. (1) to (3), (5), and (6), the authority shall provide benefit  
15 levels, deductibles, copayment and coinsurance requirements, exclusions, and  
16 limitations under the plan that the authority determines generally reflect and are  
17 commensurate with comprehensive health insurance coverage offered in the private  
18 individual market in the state. The authority may develop additional benefit designs  
19 that are responsive to market conditions.

20          **SECTION 109.** 149.14 (4c) of the statutes is repealed.

21          **SECTION 110.** 149.14 (4m) of the statutes is renumbered 149.142 (2m) and  
22 amended to read:

23          149.142 (2m) PAYMENT IS PAYMENT IN FULL. Except for copayments, coinsurance,  
24 or deductibles required or authorized under the plan, a provider of a covered service  
25 or article shall accept as payment in full for the covered service or article the payment

*Not affected by 2005 Wisconsin Act 11 (this act)*

*Insert 34-19*

1 rate determined under ~~ss. 149.142, 149.143 and 149.144 sub. (1)~~ and may not bill an  
2 eligible person who receives the service or article for any amount by which the charge  
3 for the service or article is reduced under ~~s. 149.142, 149.143 or 149.144 sub. (1)~~.

4 **SECTION 111.** 149.14 (5) of the statutes is repealed and recreated to read:

5 149.14 (5) DEDUCTIBLE AND COPAYMENT SUBSIDIES. (a) The authority shall  
6 establish and provide subsidies for deductibles paid by eligible persons with coverage  
7 under s. 149.14 (2) (a) and household incomes specified in s. 149.165 (2) (a) 1. to 5.

8 (b) The authority may provide subsidies for prescription drug copayment  
9 amounts paid by eligible persons specified in par. (a).

10 **SECTION 112.** 149.14 (5m) of the statutes is repealed.

11 **SECTION 113.** 149.14 (6) (a) of the statutes is repealed.

12 **SECTION 114.** 149.14 (6) (b) of the statutes is renumbered 149.14 (6).

13 **SECTION 115.** 149.14 (7) (b) of the statutes is amended to read:

14 149.14 (7) (b) The ~~department~~ authority has a cause of action against an  
15 eligible participant for the recovery of the amount of benefits paid ~~which~~ that are not  
16 for covered expenses under the plan. Benefits under the plan may be reduced or  
17 refused as a setoff against any amount recoverable under this paragraph.

18 **SECTION 116.** 149.14 (7) (c) of the statutes is amended to read:

19 149.14 (7) (c) The ~~department~~ authority is subrogated to the rights of an  
20 eligible person to recover special damages for illness or injury to the person caused  
21 by the act of a 3rd person to the extent that benefits are provided under the plan.  
22 Section 814.03 (3) applies to the ~~department~~ under this paragraph.

23 **SECTION 117.** 149.14 (8) of the statutes is repealed.

24 **SECTION 118.** 149.141 of the statutes is created to read:

Insert 35-9

Not affected by 2005 Wisconsin Act 11 (this act)

1           **149.141 Premiums.** (1) PERCENTAGE OF COSTS. Except as provided in sub. (2),  
2 the authority shall set premium rates for coverage under the plan at a level that is  
3 sufficient to cover 60 percent of plan costs, as provided in s. 149.143 (1).

4           (2) LIMITATION. In no event may plan premium rates exceed 200 percent of rates  
5 applicable to individual standard risks.

6           **SECTION 119.** 149.142 (1) (a) of the statutes is renumbered 149.142 (1) and  
7 amended to read:

8           149.142 (1) ESTABLISHMENT OF RATES. ~~Except as provided in par. (b), the~~  
9 ~~department~~ The authority shall establish provider payment rates for covered  
10 expenses that consist of the allowable charges paid under s. 49.46 (2) for the services  
11 and articles provided plus an enhancement determined by the department authority.  
12 The rates shall be based on the allowable charges paid under s. 49.46 (2), projected  
13 plan costs, and trend factors. Using the same methodology that applies to medical  
14 assistance under subch. IV of ch. 49, the department authority shall establish  
15 hospital outpatient per visit reimbursement rates and hospital inpatient  
16 reimbursement rates that are specific to diagnostically related groups of eligible  
17 persons. The adjustments to the usual and customary rates shall be sufficient to  
18 cover 20 percent of plan costs, as provided in s. 149.143 (3).

19           **SECTION 120.** 149.142 (1) (b) of the statutes is repealed.

20           **SECTION 121.** 149.142 (2) of the statutes is repealed.

21           **SECTION 122.** 149.143 of the statutes is repealed and recreated to read:

22           **149.143 Payment of plan costs.** (1) COSTS EXCLUDING SUBSIDIES. The  
23 authority shall pay plan costs, excluding any premium, deductible, and copayment  
24 subsidies, first from federal funds, if any, that are transferred to the fund under s.  
25 20.145 (5) (m) and that exceed premium, deductible, and copayment subsidy costs in

1 a policy year. The remainder of the plan costs, excluding premium, deductible, and  
2 copayment subsidy costs, shall be paid as follows:

3 (a) Sixty percent from premiums paid by eligible persons.

4 (b) Twenty percent from insurer assessments under s. 149.13.

5 (c) Twenty percent from adjustments to provider payment rates under s.  
6 149.142.

7 (2) SUBSIDY COSTS. The authority shall pay for premium, deductible, and  
8 copayment subsidies in a policy year first from federal funds, if any, that are  
9 transferred to the fund under s. 20.145 (5) (m) in that year. The remainder of the  
10 subsidy costs shall be paid as follows:

11 (a) Fifty percent from insurer assessments under s. 149.13.

12 (b) Fifty percent from adjustments to provider payment rates under s. 149.142.

13 **SECTION 123.** 149.144 of the statutes is repealed.

14 **SECTION 124.** 149.145 of the statutes is repealed.

15 **SECTION 125.** 149.146 (1) (a) and (b) of the statutes are consolidated,  
16 renumbered 149.14 (2) (c) 1. and amended to read:

17 149.14 (2) (c) 1. ~~Beginning on January 1, 1998, in~~ In addition to the coverage  
18 ~~required under s. 149.14 pars. (a) and (b),~~ the plan shall offer to all eligible persons  
19 who are not eligible for ~~medicare~~ Medicare a choice of coverage, as described in  
20 section 2744 (a) (1) (C), P.L. 104–191. Any such choice of coverage shall be major  
21 medical expense coverage. ~~(b) An eligible person under par. (a) who is not eligible~~  
22 for Medicare may elect once each year, at the time and according to procedures  
23 established by the ~~department~~ authority, among the coverages offered under this  
24 ~~section and s. 149.14 paragraph and par. (a).~~ If an eligible person elects new  
25 coverage, any preexisting condition exclusion imposed under the new coverage is met

1 to the extent that the eligible person has been previously and continuously covered  
2 under ~~this chapter~~ the plan. No preexisting condition exclusion may be imposed on  
3 an eligible person who elects new coverage if the person was an eligible individual  
4 when first covered under ~~this chapter~~ the plan and the person remained  
5 continuously covered under ~~this chapter~~ the plan up to the time of electing the new  
6 coverage.

7 **SECTION 126.** 149.146 (2) (a) of the statutes is renumbered 149.14 (2) (c) 2. and  
8 amended to read:

9 149.14 (2) (c) 2. ~~Except as specified by the department, the terms of coverage~~  
10 ~~under s. 149.14, including deductible reductions under s. 149.14 (5) (a) and~~  
11 ~~prescription drug copayment reductions under s. 149.14 (5) (e), do not apply to the~~  
12 ~~coverage offered under this section.~~ Premium reductions under s. 149.165 and  
13 deductible subsidies and prescription drug copayment subsidies under s. 149.14 (5)  
14 do not apply to the coverage offered under this section paragraph.

15 **SECTION 127.** 149.146 (2) (am) of the statutes is repealed.

16 **SECTION 128.** 149.146 (2) (b) of the statutes is repealed.

\*\*\*\*NOTE: I have modified the treatment of s. 149.146 from the previous version of  
this draft.

17 **SECTION 129.** 149.15 of the statutes is repealed.

18 **SECTION 130.** 149.16 of the statutes is repealed.

19 **SECTION 131.** 149.165 (1) of the statutes is amended to read:

20 149.165 (1) ~~Except as provided in s. 149.146 (2) (a), the department~~ The  
21 authority shall reduce the premiums established under s. 149.11 in conformity with  
22 ~~ss. 149.14 (5m), 149.143 and 149.17~~ s. 149.141 for the eligible persons and in the  
23 manner set forth in subs. (2) and (3).

1           **SECTION 132.** 149.165 (2) (a) (intro.) of the statutes is amended to read:

2           149.165 (2) (a) (intro.) Subject to sub. (3m), if the household income, as defined  
3 in s. 71.52 (5) and as determined under sub. (3), of an eligible person with coverage  
4 under s. 149.14 (2) (a) is equal to or greater than the first amount and less than the  
5 2nd amount listed in any of the following, the ~~department~~ authority shall reduce the  
6 premium for the eligible person to the rate shown after the amounts:

7           **SECTION 133.** 149.165 (2) (a) 1. of the statutes is amended to read:

8           149.165 (2) (a) 1. If equal to or greater than \$0 and less than \$10,000, to 100%  
9 of the rate that a standard risk would be charged under an individual policy  
10 providing substantially the same coverage ~~and deductibles~~ as provided under s.

10

11 149.14 (2) (a) and (5) (a) ~~(4)~~.

→ insert 39-11

12           **SECTION 134.** 149.165 (2) (a) 2. of the statutes is amended to read:

13           149.165 (2) (a) 2. If equal to or greater than \$10,000 and less than \$14,000, to  
14 106.5% of the rate that a standard risk would be charged under an individual policy  
15 providing substantially the same coverage ~~and deductibles~~ as provided under s.

15

16 149.14 (2) (a) and (5) (a) ~~(4)~~.

→ insert 39-11

17           **SECTION 135.** 149.165 (2) (a) 3. of the statutes is amended to read:

18           149.165 (2) (a) 3. If equal to or greater than \$14,000 and less than \$17,000, to  
19 115.5% of the rate that a standard risk would be charged under an individual policy  
20 providing substantially the same coverage ~~and deductibles~~ as provided under s.

20

21 149.14 (2) (a) and (5) (a) ~~(4)~~.

→ insert 39-11

22           **SECTION 136.** 149.165 (2) (a) 4. of the statutes is amended to read:

23           149.165 (2) (a) 4. If equal to or greater than \$17,000 and less than \$20,000, to  
24 124.5% of the rate that a standard risk would be charged under an individual policy

1 providing substantially the same coverage ~~and deductibles~~ as provided under s.  
2 149.14 (2) (a) and (5) (a) ~~(4)~~. → insert 39-11

3 SECTION 137. 149.165 (2) (a) 5. of the statutes is amended to read:

4 149.165 (2) (a) 5. If equal to or greater than \$20,000 and less than \$25,000, to  
5 130% of the rate that a standard risk would be charged under an individual policy

6 providing substantially the same coverage ~~and deductibles~~ as provided under s.  
7 149.14 (2) (a) and (5) (a) ~~(4)~~. → insert 39-11

\*\*\*NOTE: Should all of the subdivisions above include subsidies for deductibles, so that the premium rate (100% to 130%) is based on the coverage provided under HIRSP and the *subsidy-reduced* deductible?

8 SECTION 138. 149.165 (2) (bc) of the statutes is amended to read:

9 149.165 (2) (bc) Subject to sub. (3m), if the household income, as defined in s.  
10 71.52 (5) and as determined under sub. (3), of an eligible person with coverage under  
11 s. 149.14 (2) (b) is equal to or greater than the first amount and less than the 2nd  
12 amount listed in par. (a) 1., 2., 3., 4., or 5., the ~~department~~ authority shall reduce the  
13 premium established for the eligible person by the same percentage as the  
14 ~~department~~ authority reduces, under par. (a), the premium established for an  
15 eligible person with coverage under s. 149.14 (2) (a) who has a household income  
16 specified in the same subdivision under par. (a) as the household income of the  
17 eligible person with coverage under s. 149.14 (2) (b).

18 SECTION 139. 149.165 (3) (a) of the statutes is amended to read:

19 149.165 (3) (a) Subject to par. (b), the ~~department~~ authority shall establish and  
20 implement the method for determining the household income of an eligible person  
21 under sub. (2).

22 SECTION 140. 149.165 (3) (b) (intro.) of the statutes is amended to read:



1 149.165 (3) (b) (intro.) In determining household income under sub. (2), the  
2 department authority shall consider information submitted by an eligible person on  
3 a completed federal profit or loss from farming form, schedule F, if all of the following  
4 apply:

5 SECTION 141. 149.165 (3m) of the statutes is amended to read:

6 149.165 (3m) The board authority may approve adjustment of the household  
7 income dollar amounts listed in sub. (2) (a) 1. to 5., except for the first dollar amount  
8 listed in sub. (2) (a) 1., to reflect changes in the consumer price index for all urban  
9 consumers, U.S. city average, as determined by the U.S. department of labor.

10 SECTION 142. 149.165 (4) of the statutes is repealed.

11 SECTION 143. 149.17 (1) of the statutes is amended to read:

12 149.17 (1) Subject to ~~ss. 149.14 (5m), s. 149.143 and 149.146 (2) (b)~~, a rating  
13 plan calculated in accordance with generally accepted actuarial principles.

14 SECTION 144. 149.17 (2) of the statutes is repealed.

15 SECTION 145. 149.17 (4) of the statutes is repealed.

16 SECTION 146. 149.175 of the statutes is repealed.

17 SECTION 147. 149.18 of the statutes is amended to read:

18 149.18 Chapters 600 to 645 applicable. Except as otherwise provided in this  
19 chapter subchapter, the plan shall comply and be administered in compliance with  
20 chs. 600 to 645.

21 SECTION 148. 149.20 of the statutes is repealed.

22 SECTION 149. 149.25 of the statutes is repealed.

23 SECTION 150. Subchapter III of chapter 149 [precedes 149.40] of the statutes  
24 is created to read:

25 CHAPTER 149