2007 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-AB185)

Received: 04/12/2007 Wanted: As time permits For: John Townsend (608) 266-3156 This file may be shown to any legislator: NO				Received By: dkennedy Identical to LRB: By/Representing: Minette Lawrence						
								Drafter: dkennedy Addl. Drafters:		
							May Co			
				Subject	Subject: Health - public health				Extra Copies:	
Submit	via email: YES									
Request	er's email:	Rep.Town	send@legis	.wisconsin.go)V					
Carbon copy (CC:) to: robin.ryan@legis.v			@legis.wis	consin.gov						
Pre To	pic:				***************************************	***************************************				
No spec	rific pre topic gi	ven								
Topic:						***************************************				
No spec	ific topic given									
Instruc	tions:									
See Atta	ached									
Draftin	g History:									
Vers.	Drafted	Reviewed	Typed	Proofed	Submitted	Jacketed	Required			
/?	dkennedy 04/13/2007	jdyer 04/13/2007								
/1			sherritz 04/13/200	07	cduerst 04/13/2007	cduerst 04/13/2007				
/2	dkennedy 04/19/2007	jdyer 04/19/2007	jfrantze 04/19/200)7	lparisi 04/19/2007	lparisi 04/19/2007				

LRBs0060 04/19/2007 11:03:18 AM Page 2

FE Sent For:

<END>

2007 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-AB185)

Received: 04/12/2007	Received By: dkennedy		
Wanted: As time permits	Identical to LRB:		
For: John Townsend (608) 266-3156	By/Representing: Minette Lawrence		
This file may be shown to any legislator: NO	Drafter: dkennedy		
May Contact:	Addl. Drafters:		
Subject: Health - public health	Extra Copies:		
Submit via email: YES			
Requester's email: Rep.Townsend@legis.wisconsin.go	ov .		
Carbon copy (CC:) to: robin.ryan@legis.wisconsin.gov			
Pre Topic:			
No specific pre topic given			
Topic:	·		
No specific topic given			
Instructions:			
See Attached			
Drafting History:			
<u>Vers.</u> <u>Drafted</u> <u>Reviewed</u> <u>Typed</u> <u>Proofed</u>	Submitted Jacketed Required		
/? dkennedy jdyer			
19 d sherritz 04/13/2007	cduerst cduerst 04/13/2007 04/13/2007		
FE Sent For:			

2007 DRAFTING REQUEST

Assembly Substitute Amendment (ASA-AB185)

Received: 04/12/2007	Received By: dkennedy

Wanted: As time permits Identical to LRB:

For: John Townsend (608) 266-3156 By/Representing: Minette Lawrence

This file may be shown to any legislator: **NO**Drafter: **dkennedy**

May Contact: Addl. Drafters:

Subject: Health - public health Extra Copies:

Submit via email: YES

Requester's email: Rep.Townsend@legis.wisconsin.gov

Carbon copy (CC:) to: robin.ryan@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Birth defect prevention and surveillance system

Instructions:

See Attached

Drafting History:

<u>Vers.</u> <u>Drafted</u> <u>Reviewed</u> <u>Typed</u> <u>Proofed</u> <u>Submitted</u> <u>Jacketed</u> <u>Required</u>

1? dkennedy / 1 /3/Ld sh shippen

FE Sent For:

<END>

Kennedy, Debora

From:

Lawrence, Minette

Sent:

Thursday, April 12, 2007 11:59 AM

To:

Kennedy, Debora

Subject:

FW: AB 185 - amendment language

Attachments: 07a02301 - stillbirth language.pdf; AB 185 - amendment language.doc

Hi Debora - Could you draft this sub for me? Rep Hines wants to exec on it April 24. Thankyou.

If you have any questions please give Mike Welsh or myself a call.

How's your cat doing?

Minette

From: Michael Welsh [mailto:mike.hovenconsulting@tds.net]

Sent: Thursday, April 12, 2007 11:54 AM

To: Lawrence, Minette

Subject: AB 185 - amendment language

Attached is the proposed language for the sub-amendment. If Debra has any questions, please have her give me a call.

Thanks again,

Michael Welsh

Government Affairs Specialist Hoven Consulting, Inc. 44 E. Mifflin St, Suite 600 Madison, WI 53703

Office: (608) 310-8833 Fax: (608) 310-8834

mike.hovenconsulting@tds.net

ASSEMBLY AMENDMENT, **TO 2007 ASSEMBLY BILL 185**

· 1	At the locations indicated, amend the bill as follows:
2	1. Page 5, line 3: delete " <u>stillborn human</u> " and substitute " <u>stillbirth</u> ".
3	2. Page 5, line 19: delete lines 19 to 24.
4	3. Page 6, line 3: delete "stillborn human" and substitute "stillbirth".
5	Page 6, line 12: delete "stillborn" and substitute "stillbirth".
6	5. Page 6, line 13: delete " <u>human</u> ".
7	• Page 6, line 19: delete "stillborn human" and substitute "stillbirth".
8	7. Page 6, line 21: delete "stillborn human" and substitute "stillbirth".
9	8. Page 6, line 24: delete "stillborn human" and substitute "stillbirth".
10	9. Page 7, line 2: delete "stillborn human" and substitute "stillbirth".
11	10. Page 7, line 5: delete "stillborn human" and substitute "stillbirth".
12	11. Page 7, line 9: delete "stillborn human" and substitute "stillbirth".

12

- Page 7, line 11: delete "stillborn human" and substitute "stillbirth".
- 2 Page 7, line 20: delete "stillborn human" and substitute "stillbirth".
- Page 7, line 23: delete "stillborn" and substitute "stillbirth".
- 4 **15.** Page 7, line 24: delete "<u>human</u>".
- 5 Page 8, line 7: delete "stillborn human" and substitute "stillbirth".
- 6 Page 8, line 25: delete "stillborn human" and substitute "stillbirth".
- 7 Page 9, line 2: delete "stillborn human" and substitute "stillbirth".
- 8 **19.** Page 9, line 10: delete "stillborn" and substitute "stillbirth".
- 9 **20.** Page 9, line 11: delete "human".
- Page 9, line 14: on lines 14 and 16, delete "stillborn human" and substitute stillbirth".
- 12 **22.** Page 9, line 20: delete "stillborn human" and substitute "stillbirth".
- 13 **23.** Page 9, line 22: delete "stillborn human" and substitute "stillbirth".
- Page 9, line 23: on lines 23 and 25, delete "stillborn human's" and substitute "stillbirth's".
- **25.** Page 10, line 5: delete "stillborn human" and substitute "stillbirth".

17 (END)

In addition to the language included in LRBa0230/1 (Wasserman's stillbirth language), please include the following language in a substitute amendment to AB 185:

- Page 7, line 16: after "c." insert "Any material released by the department to the entity under the contract may be used only for the performance of this development and may not be used by an insurer, as defined in s. 600.03 (27), or by a health care provider, as defined in s. 146.81 (1). The entity under contract may not under this subd. 1.c. reveal information that may specifically identify the subject of a report made under sub. (2)."
- Page 7, line 16: after "with" delete "an" and substitute with "a qualified".
- Page 6, line 9 after "253.12 (2) (a) 4." and before "The" insert "The division of the department that receives information from".

1/3/07 From Michael Welsh:

(3) Can use that the dept determines

(3) Can drop third : Tem, buc is

where that the private Associated to 15 otherwise required to 15 otherwise required to 15 otherwise required to 15 otherwise (See 153.44 (1)(6), (2), (5))

By Two a.w.

2007 - 2008 LEGISLATURE

D-NOTE

S O O G O | 1 LRB 40947/1, DAK Jidysh

stays

2007 ASSEMBLY BILL 185

March 19, 2007 – Introduced by Representatives Townsend, Wasserman, Hines, Van Roy, Sheridan, Mason, Montgomery, Kerkman, Gunderson, Ballweg, Hahn, A. Ott, Nygren and Musser, cosponsored by Senators Lassa, Schultz, Olsen and Plale. Referred to Committee on Public Health.

Regen

1

2

3

4

5

6

7

8

AN ACT to renumber and amend 253.12 (1) (b); to amend 69.03 (12), 69.20 (2)

(a) (intro.), 69.20 (3) (b) 3., 69.20 (3) (c), 69.20 (3) (d), 253.12 (1) (a) (intro.),

253.12 (1) (a) 1., 253.12 (2) (a) (intro.), 253.12 (2) (am), 253.12 (2) (b), 253.12 (2)

(e), 253.12 (3) (a) 1. (intro.), 253.12 (3) (a) 1. c., 253.12 (3) (c), 253.12 (4) (a),

253.12 (5) (a) 1., 253.12 (5) (a) 2. and 253.12 (5) (a) 4.; to repeal and recreate

253.12 (2) (d); and to create 69.20 (2) (a) 3., 253.12 (1) (e), 253.12 (1) (f), 253.12

(1) (g), 253.12 (2) (a) 3., 253.12 (2) (a) 4., 253.12 (5) (c) and 253.12 (5m) of the

statutes; relating to: the birth defect prevention and surveillance system.

Analysis by the Legislative Reference Bureau

Under the birth defect prevention and surveillance system (system) in current law, pediatric specialty clinics and physicians are required to report to the Department of Health and Family Services (DHFS) any birth defects of infants or children who are diagnosed or treated in the clinics or by the physicians. A "birth defect" is defined as a structural deformation, disruption, or dysplasia or a genetic, inherited, or biochemical disease that occurs prior to or at birth and that requires medical or surgical intervention or interferes with normal growth and development. An "infant or child" is defined as a human being from birth to the age of two years. DHFS may not require a pediatric specialty clinic or physician to report the name

Substitute

of a reported infant or child if the parent or guardian of the infant or child refuses in writing to consent to the release of the name or address of the infant or child.

Also under current law, information that is contained in a vital record and is designated as being collected for statistical and medical use or statistical use only or that involves the birth of a child to an unmarried mother may be disclosed only in certain instances. One instance is disclosure of this information, under an interstate cooperation agreement, from the vital record of the resident of another state or a resident of this state born in another state, for use by the state registrar in compiling statistics. Another instance is disclosure of statistical or medical information for use in the conduct of official duties of a federal agency, a Wisconsin governmental agency, or the agency of a county, city, town, or village. In addition, hospitals and funeral directors must provide and the state registrar must accept reports of certain fetal deaths. Before destroying these reports, the state registrar may record the reports' information for use in medical research and use the information to compile statistics.

Lastly, under current law, DHFS must establish and maintain an up-to-date registry that documents the diagnosis in this state of any infant or child who has a birth defect. Among the information that DHFS is required to include in the registry is information that will facilitate the development of primary preventive strategies to decrease the occurrence of birth defects without increasing abortions.

This bill changes the process by which the parent or guardian of a stillown human, infant, or child may decide not to consent to the release of the human's, infant's, or child's identifying information, to require that a physician or physician's designee first inform the parent or guardian of the intent of the system and to require signature of the parent or guardian on a DHFS form. Further, the ball specifies a process by which, using the DHFS form, the parent or guardian of a stillborn human, infant, or child may effect withdrawal of consent to the release of identifying information about the stillborn human, infant, or child, and requires that, if consent to the release is withdrawn, DHFS remove the information from the system. DHFS must prescribe and distribute to pediatric specialty clinics and local health departments the form for these purposes by July 1, 2009.

The bill requires the division of DHFS that deals with vital statistics to report to the system information that is contained in a vital record and is designated as being collected for statistical and medical use or statistical use only, including this type of information that is available under an interstate cooperation agreement, if this disclosure is agreed to by the other state. In addition, the bill requires the entity that contracts with the Department of Administration for collecting, analyzing, and disseminating health care information of hospitals and ambulatory surgery centers to report to the system concerning birth defects as recorded in public use data files of hospitals and ambulatory surgery centers.

of hospitals and ambulatory surgery centers.

The bill authorizes DHFS to contract with an entity to perform the development of primary preventive strategies to decrease the occurrence of birth defects as information to be included in the birth defect registry.

The bill also permits the state registrar to record information from reports of certain fetal deaths for use in research conducted under the system.

Stillbirth)

Stillbirth's

LRB-0947/1 DAK:jld:sh

ASSEMBLY BILL 185

1

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

stillbirths

Lastly, the (bil) includes stillborn humans, as defined in the bil, under the requirements of the system, expands the definition of "birth defect" to include structural malformations, and makes other minor changes.

For further information see the state and local fiscal estimate, which will be

as an appendix to this will.

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

SECTION 1. 69.03 (12) of the statutes is amended to read:

69.03 (12) Accept fetal death reports under s. 69.18 (1) (e). The state registrar may record the information on the reports for use in medical research, including research conducted under s. 253.12 (5) (b), and may use the information to compile statistics. After recording the information on a fetal death report, the state registrar shall destroy the report.

SECTION 2. 69.20 (2) (a) (intro.) of the statutes is amended to read:

69.20 (2) (a) (intro.) Except as provided under sub. (3), information Information in the part of a certificate of birth or divorce or annulment or a marriage document that is designated on the form as being collected for statistical or medical and statistical use only and information in the part of a death certificate that is designated on the form as being collected as statistical-use-only information under s. 69.18 (1m) (c) may not be disclosed to any person except the following:

SECTION 3. 69.20 (2) (a) 3. of the statutes is created to read:

69.20 (2) (a) 3. As provided under sub. (3).

SECTION 4. 69.20 (3) (b) 3. of the statutes is amended to read:

69.20 (3) (b) 3. The information is from the vital record of a registrant who is a resident of another state or who was born in another state and is transmitted to the office responsible for keeping the vital statistics in such state under an interstate

cooperation agreement which requires that the information be used for statistical and administrative purposes only and which provides for the retention and disposition of such copies. If under such an agreement the state registrar receives information from an office responsible for keeping the vital statistics in another state, the state registrar may not use the information for any purpose except <u>for</u> the compilation of statistics <u>and</u>, if agreed to by the other state, in meeting requirements <u>for reporting under s. 253.12 (2) (a) 3</u>.

SECTION 5. 69.20 (3) (c) of the statutes is amended to read:

69.20 (3) (c) Notwithstanding sub. (2), a— A local registrar may disclose information on a birth certificate or issue a copy of the certificate to a local health department, as defined in s. 250.01 (4), for health or demographic research or a public health program if the local health department pays the copying costs and if the birth of the registrant occurred within the boundaries of the political subdivision served by the local health department or the registrant is a resident of the political subdivision. The local health department may not disclose any information from any copy which it receives under this paragraph to any person and shall destroy the copy no later than one year after receipt.

SECTION 6. 69.20 (3) (d) of the statutes is amended to read:

69.20 (3) (d) Subject to par. (f), the state or a local registrar may disclose information from the vital record of a specified registrant, except information under sub. (2) (a), to a federal agency, to any agency of the government of this state, or to any agency of a county, city, town, or village if the agency requests the information for use in the conduct of its official duties, except that the state registrar may disclose information under sub. (2) (a) only in order to meet requirements for reporting under s. 253.12 (2) (a) 3.

25

(stiebirth)

SECTION 7. 253.12 (1) (a) (intro.) of the statutes is amended to read: 1 253.12 (1) (a) (intro.) "Birth defect" means any of the following conditions 2 affecting a stillborn human or an infant or child that occurs prior to or at birth and 3 that requires medical or surgical intervention or interferes with normal growth and 4 5 development: **SECTION 8.** 253.12 (1) (a) 1. of the statutes is amended to read: 6 253.12 (1) (a) 1. A structural malformation, deformation, disruption, or 7 dysplasia. 8 9 **SECTION 9.** 253.12 (1) (b) of the statutes is renumbered 253.12 (1) (cm) and amended to read: 10 253.12 (1) (cm) "Pediatric specialty clinic" means a clinic that is located in a 11 hospital or is a freestanding clinic, the primary purpose of which is to provide 12 pediatric specialty diagnostic, counseling and medical management services to 13 persons with birth defects by a physician subspecialist. 14 **SECTION 10.** 253.12 (1) (e) of the statutes is created to read: 15 16 253.12 (1) (e) "Research" means a systematic study through scientific inquiry for the purpose of expanding a field of knowledge, including environmental or 17 epidemiological research or special studies. 18 **SECTION 11.** 253.12 (1) (f) of the statutes is created to read: 19 253.12(1)(f) "Stillbirth" means a birth for which a fetal death report is required 20 under s. 69.18 (1) (e) 1. 21 SECTION 12. 253.12 (1) (g) of the statutes is created to read: 22 253.12 (1) (g) "Stillborn human" means a human whose birth resulted in 23 24 stillbirth.

SECTION 13. 253.12 (2) (a) (intro.) of the statutes is amended to read:

1

2

3

4

5

6

7

8

9

10

11

 $\widehat{12}$

13)

14

15

16

17

18

19)

20

21

22

23

24

25

Stillbirth)

253.12 (2) (a) (intro.) Except as provided in par. (b), all of the following shall report in the manner prescribed by the department under sub. (3) (a) 3. a birth defect in a stillborn human or an infant or child:

SECTION 14. 253.12 (2) (a) 3. of the statutes is created to read:

253.12 (2) (a) 3. The division of the department that deals with vital statistics, with respect to the information received under s. 69.20 (3) (b) 3. or available under s. 69.20 (3) (d).

SECTION 15. 253.12 (2) (a) 4. of the statutes is created to read:

253.12 (2) (a) 4. The entity under contract under s. 153.05 (2m) (a), with respect to public use data files under s. 153.46 (1) (b).

SECTION 16. 253.12 (2) (am) of the statutes is amended to read:

253.12 (2) (am) Any hospital in which a birth defect is diagnosed in a stillborn human or an infant or child or treatment is provided to the infant or child may report the birth defect in the manner prescribed by the department under sub. (3) (a) 3.

SECTION 17. 253.12 (2) (b) of the statutes is amended to read:

253.12 (2) (b) No person specified under par. (a) need report under par. (a) if that person knows that another person specified under par. (a) or (am) has already reported to the department the required information with respect to the same birth defect of the same stillborn human or infant or child.

SECTION 18. 253.12 (2) (d) of the statutes is repealed and recreated to read:

253.12 (2) (d) If the parent or guardian of a stillborn human or an infant or child for whom a report is made under par. (a) decides, after having been informed by a physician or a physician's designee of the intent of the system under this section, not to consent to the release of identifying information concerning the still born human or infant or child and signs the form specified in sub. (5) (c), the department may not

require a person specified under par. (a) 1., 2., or 3. to report information identifying 1 stillbirth the stillborn human or infant or child. 2 Stillbirth **SECTION 19.** 253.12 (2) (e) of the statutes is amended to read: 3 253.12 (2) (e) If the address of an infant or child or the place of delivery of a 4 stillborn human for whom a report is made under par, (a) is included in the report, 5 the department shall encode the address to refer to the same geographical location. 6 SECTION 20. 253.12 (3) (a) 1. (intro.) of the statutes is amended to read: 7 253.12 (3) (a) 1. (intro.) Establish and maintain an up-to-date registry that 8 documents the diagnosis in this state of any stillborn humar or infant or child who 9 has a birth defect, regardless of the residence of the infant or child or place of delivery 10 of the stillborn human. The department shall include in the registry information (11) that will facilitate all of the following: 12 SECTION 21. 253.12 (3) (a) 1. c. of the statutes is amended to read: 13 253.12 (3) (a) 1. c. Development of primary preventive strategies to decrease 14 the occurrence of birth defects without increasing abortions. The department may 15 contract with an entity to perform the development required under this subd. 1. c. 16 17 **SECTION 22.** 253.12 (3) (c) of the statutes is amended to read: 253.12 (3) (c) The department shall, not more than 10 years from the date of 18 receipt of a report under sub. (2), delete from any file of the department the name of 19 a stillborn human or an infant or child that is contained in the report. (20)**SECTION 23.** 253.12 (4) (a) of the statutes is amended to read: 21 253.12 (4) (a) Make recommendations to the department regarding the 22 establishment of a registry that documents the diagnosis in the state of a stillborn 23 handor an infant or child who has a birth defect, as required under sub. (3) (a) 1. 24and regarding the rules that the department is required to promulgate under sub. 25

Stillbirth

(3) (a) 2. and 3. on the birth defects to be reported under sub. (2) and on the general content and format of the report under sub. (2) and procedures for submitting the report. The council shall also make recommendations regarding the content of a report that, because of the application of sub. (2) (d), does not contain the name of the subject of the report.

SECTION 24. 253.12 (5) (a) 1. of the statutes is amended to read:

253.12 (5) (a) 1. The parent or guardian of a stillborn human or an infant or child for whom a report is made under sub. (2).

SECTION 25. 253.12 (5) (a) 2. of the statutes is amended to read:

253.12 (5) (a) 2. A local health officer, a local birth-to-3 coordinator or an agency under contract with the department to administer the children with special health care needs program, upon receipt of a written request and informed written consent from the parent or guardian of the infant or child under the requirements of subs. (2) (d) and (5m). The local health officer may disclose information received under this subdivision only to the extent necessary to render and coordinate services and follow-up care for the infant or child or to conduct a health, demographic or epidemiological investigation. The local health officer shall destroy all information received under this subdivision within one year after receiving it.

Section 26. 253.12 (5) (a) 4. of the statutes is amended to read:

253.12 (5) (a) 4. A representative of a federal or state agency upon written request and to the extent that the information is necessary to perform a legally authorized function of that agency, including investigation of causes, mortality, methods of prevention and early intervention, treatment or care of birth defects, associated diseases or disabilities. The information may not include the name or address of an infant or child or the place of delivery of a stillborn human with a

Stillbirth

condition reported under sub. (2). The department shall notify the parent or guardian of a stillborn/human or an infant or child about whom information is released under this subdivision, of the release. The representative of the federal or state agency may disclose information received under this paragraph only as necessary to perform the legally authorized function of that agency for which the information was requested.

SECTION 27. 253.12 (5) (c) of the statutes is created to read:

253.12 (5) (c) By July 1, 2009, the department shall prescribe and distribute, and periodically distribute thereafter, to pediatric speciality clinics and local health departments copies of a form to be used by the parent or guardian of a stillborn burnan or an infant or child for whom a report is made under sub. (2) (a) in indicating any of the following:

- 1. Refusal under sub. (2) (d) by the parent or guardian to consent to the release of identifying information concerning the stillborn human or infant or child.
- 2. The decision under sub. (5m) by the parent or guardian to remove from the system any identifying information entered for the stillborn human or infant or child.

SECTION 28. 253.12 (5m) of the statutes is created to read:

253.12 (5m) Removal of identifying information. If the parent or guardian of a stillborn human or an infant or child for whom a report is made under sub. (2) (a) decides to withdraw consent to the release of identifying information concerning the stillborn human or infant or child, the parent or guardian may request from the local health department or the stillborn human's or infant's or child's physician the form specified in sub. (5) (c). If the parent or guardian decides, after having been informed by the stillborn human's or infant's or child's physician or physician's

Still birth?s

1

2

3

4

5

6

designee of the information contained in the system under this section, and signs the form, the local health department, physician, or physician's designee shall forward the form to the division of the department that deals with public health. On receipt of the signed form, the department shall remove from the system under this section any information identifying the stillborn human or infant or child.

Stillbirth

(END

LD-NOVE

2007-2008 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

	INSERT 7-16
1	INSERT 7-16 Any material released by the department to the entity under the contract may
2	be used only for the performance of this development and may not be used by an
3	insurer, as defined in s. 600.03 (27), or by a health care provider, as defined in s.
4	146.81 (1). The entity under contract may not under this subd. 1. c. reveal
5	information that may identify the subject of a report made under sub. (2).

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBs0060A

date

To Representative Townsend:

After speaking with Michael Welsh, who concurred, I have in this substitute amendment eliminated a proposed change to s. 253.12 (2) (a) 4. and made minor changes in the amending language proposed for s. 253.12 (3) (a) 1. c.

Please let me know if I may provide you with further assistance concerning this draft.

Debora A. Kennedy Managing Attorney Phone: (608) 266-0137

E-mail: debora.kennedy@legis.wisconsin.gov

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBs0060/1dn DAK:jld:sh

April 13, 2007

To Representative Townsend:

After speaking with Michael Welsh, who concurred, I have in this substitute amendment eliminated a proposed change to s. 253.12 (2) (a) 4. and made minor changes in the amending language proposed for s. 253.12 (3) (a) 1. c.

Please let me know if I may provide you with further assistance concerning this draft.

Debora A. Kennedy Managing Attorney Phone: (608) 266-0137

E-mail: debora.kennedy@legis.wisconsin.gov

Kennedy, Debora

From:

Lawrence, Minette

Sent:

Thursday, April 19, 2007 9:33 AM

To:

Kennedy, Debora

Subject: FW: Sub-Amendment to AB 185

Debora - Could you insert this verbage to AB 185 Sub-amendment, please? I would like to submit this as soon as

possible. Thanks

Minette

From: Michael Welsh [mailto:mike.hovenconsulting@tds.net]

Sent: Wednesday, April 18, 2007 4:07 PM

To: Lawrence, Minette

Subject: Sub-Amendment to AB 185

Change to Sub-Amendment:

Page 7, Line 17 after "146.81 (1)" insert "to limit or deny health care insurance to any individual."

Michael Welsh

Government Affairs Specialist Hoven Consulting, Inc. 44 E. Mifflin St, Suite 600 Madison, WI 53703

Office: (608) 310-8833 Fax: (608) 310-8834

mike.hovenconsulting@tds.net

Halor After speaking with mike Welsh,
einited proposed phrase to hearth
mouriers and removed reference to
hearth care growinders.



2

3

4

5

6

7

8

LRBs0060/1/2 DAK:jld:sta



AN ACT to renumber and amend 253.12 (1) (b); to amend 69.03 (12), 69.20 (2) (a) (intro.), 69.20 (3) (b) 3., 69.20 (3) (c), 69.20 (3) (d), 253.12 (1) (a) (intro.), 253.12 (1) (a) 1., 253.12 (2) (a) (intro.), 253.12 (2) (am), 253.12 (2) (b), 253.12 (2) (e), 253.12 (3) (a) 1. (intro.), 253.12 (3) (a) 1. c., 253.12 (3) (c), 253.12 (4) (a), 253.12 (5) (a) 1., 253.12 (5) (a) 2. and 253.12 (5) (a) 4.; to repeal and recreate 253.12 (2) (d); and to create 69.20 (2) (a) 3., 253.12 (1) (e), 253.12 (2) (a) 3., 253.12 (2) (a) 4., 253.12 (5) (c) and 253.12 (5m) of the statutes; relating to: the birth defect prevention and surveillance system.

Analysis by the Legislative Reference Bureau

Under the birth defect prevention and surveillance system (system) in current law, pediatric specialty clinics and physicians are required to report to the Department of Health and Family Services (DHFS) any birth defects of infants or children who are diagnosed or treated in the clinics or by the physicians. A "birth defect" is defined as a structural deformation, disruption, or dysplasia or a genetic, inherited, or biochemical disease that occurs prior to or at birth and that requires medical or surgical intervention or interferes with normal growth and development.

An "infant or child" is defined as a human being from birth to the age of two years. DHFS may not require a pediatric specialty clinic or physician to report the name of a reported infant or child if the parent or guardian of the infant or child refuses in writing to consent to the release of the name or address of the infant or child.

Also under current law, information that is contained in a vital record and is designated as being collected for statistical and medical use or statistical use only or that involves the birth of a child to an unmarried mother may be disclosed only in certain instances. One instance is disclosure of this information, under an interstate cooperation agreement, from the vital record of the resident of another state or a resident of this state born in another state, for use by the state registrar in compiling statistics. Another instance is disclosure of statistical or medical information for use in the conduct of official duties of a federal agency, a Wisconsin governmental agency, or the agency of a county, city, town, or village. In addition, hospitals and funeral directors must provide and the state registrar must accept reports of certain fetal deaths. Before destroying these reports, the state registrar may record the reports' information for use in medical research and use the information to compile statistics.

Lastly, under current law, DHFS must establish and maintain an up-to-date registry that documents the diagnosis in this state of any infant or child who has a birth defect. Among the information that DHFS is required to include in the registry is information that will facilitate the development of primary preventive strategies to decrease the occurrence of birth defects without increasing abortions.

This substitute amendment changes the process by which the parent or guardian of a stillbirth, infant, or child may decide not to consent to the release of the stillbirth's, infant's, or child's identifying information, to require that a physician or physician's designee first inform the parent or guardian of the intent of the system and to require signature of the parent or guardian on a DHFS form. Further, the substitute amendment specifies a process by which, using the DHFS form, the parent or guardian of a stillbirth, infant, or child may effect withdrawal of consent to the release of identifying information about the stillbirth, infant, or child, and requires that, if consent to the release is withdrawn, DHFS remove the information from the system. DHFS must prescribe and distribute to pediatric specialty clinics and local health departments the form for these purposes by July 1, 2009.

The substitute amendment requires the division of DHFS that deals with vital statistics to report to the system information that is contained in a vital record and is designated as being collected for statistical and medical use or statistical use only, including this type of information that is available under an interstate cooperation agreement, if this disclosure is agreed to by the other state. In addition, the substitute amendment requires the entity that contracts with the Department of Administration for collecting, analyzing, and disseminating health care information of hospitals and ambulatory surgery centers to report to the system concerning birth defects as recorded in public use data files of hospitals and ambulatory surgery centers.

The substitute amendment authorizes DHFS to contract with an entity to perform the development of primary preventive strategies to decrease the occurrence

2

3

4

5

6

7

8

9

10

11

12

13

14

15

16

of birth defects as information to be included in the birth defect registry and limits use by the entity of material released by DHFS.

The substitute amendment also permits the state registrar to record information from reports of certain fetal deaths for use in research conducted under the system.

Lastly, the substitute amendment includes stillbirths, as defined in the substitute amendment, under the requirements of the system, expands the definition of "birth defect" to include structural malformations, and makes other minor changes.

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

Section 1. 69.03 (12) of the statutes is amended to read:

69.03 (12) Accept fetal death reports under s. 69.18 (1) (e). The state registrar may record the information on the reports for use in medical research, including research conducted under s. 253.12 (5) (b), and may use the information to compile statistics. After recording the information on a fetal death report, the state registrar shall destroy the report.

SECTION 2. 69.20 (2) (a) (intro.) of the statutes is amended to read:

69.20 (2) (a) (intro.) Except as provided under sub. (3), information Information in the part of a certificate of birth or divorce or annulment or a marriage document that is designated on the form as being collected for statistical or medical and statistical use only and information in the part of a death certificate that is designated on the form as being collected as statistical-use-only information under s. 69.18 (1m) (c) may not be disclosed to any person except the following:

Section 3. 69.20 (2) (a) 3. of the statutes is created to read:

69.20 **(2)** (a) 3. As provided under sub. (3).

SECTION 4. 69.20 (3) (b) 3. of the statutes is amended to read:

69.20 (3) (b) 3. The information is from the vital record of a registrant who is a resident of another state or who was born in another state and is transmitted to the office responsible for keeping the vital statistics in such state under an interstate cooperation agreement which requires that the information be used for statistical and administrative purposes only and which provides for the retention and disposition of such copies. If under such an agreement the state registrar receives information from an office responsible for keeping the vital statistics in another state, the state registrar may not use the information for any purpose except for the compilation of statistics and, if agreed to by the other state, in meeting requirements for reporting under s. 253.12 (2) (a) 3.

SECTION 5. 69.20 (3) (c) of the statutes is amended to read:

69.20 (3) (c) Notwithstanding sub. (2), a A local registrar may disclose information on a birth certificate or issue a copy of the certificate to a local health department, as defined in s. 250.01 (4), for health or demographic research or a public health program if the local health department pays the copying costs and if the birth of the registrant occurred within the boundaries of the political subdivision served by the local health department or the registrant is a resident of the political subdivision. The local health department may not disclose any information from any copy which it receives under this paragraph to any person and shall destroy the copy no later than one year after receipt.

Section 6. 69.20 (3) (d) of the statutes is amended to read:

69.20 (3) (d) Subject to par. (f), the state or a local registrar may disclose information from the vital record of a specified registrant, except information under sub. (2) (a), to a federal agency, to any agency of the government of this state, or to any agency of a county, city, town, or village if the agency requests the information

1	for use in the conduct of its official duties, except that the state registrar may disclose
2	information under sub. (2) (a) only in order to meet requirements for reporting under
3	<u>s. 253.12 (2) (a) 3</u> .
4	SECTION 7. 253.12 (1) (a) (intro.) of the statutes is amended to read:
5	253.12 (1) (a) (intro.) "Birth defect" means any of the following conditions
6	affecting a stillbirth or an infant or child that occurs prior to or at birth and that
7	requires medical or surgical intervention or interferes with normal growth and
8	development:
9	SECTION 8. 253.12 (1) (a) 1. of the statutes is amended to read:
10	253.12 (1) (a) 1. A structural malformation, deformation, disruption, or
11	dysplasia.
12	Section 9. 253.12 (1) (b) of the statutes is renumbered 253.12 (1) (cm) and
13	amended to read:
14	253.12 (1) (cm) "Pediatric specialty clinic" means a clinic that is located in a
15	hospital or is a freestanding clinic, the primary purpose of which is to provide
16	pediatric specialty diagnostic, counseling and medical management services to
17	persons with birth defects by a physician subspecialist.
18	Section 10. 253.12 (1) (e) of the statutes is created to read:
19	253.12 (1) (e) "Research" means a systematic study through scientific inquiry
20	for the purpose of expanding a field of knowledge, including environmental or
21	epidemiological research or special studies.
22	SECTION 11. 253.12 (2) (a) (intro.) of the statutes is amended to read:
23	253.12 (2) (a) (intro.) Except as provided in par. (b), all of the following shall
24	report in the manner prescribed by the department under sub. (3) (a) 3 . a birth defect
25	in a stillbirth or an infant or child:

1 **Section 12.** 253.12 (2) (a) 3. of the statutes is created to read: 2 253.12 (2) (a) 3. The division of the department that deals with vital statistics, 3 with respect to the information received under s. 69.20 (3) (b) 3. or available under s. 69.20 (3) (d). 4 5 **Section 13.** 253.12 (2) (a) 4. of the statutes is created to read: 6 253.12 (2) (a) 4. The entity under contract under s. 153.05 (2m) (a), with respect 7 to public use data files under s. 153.46 (1) (b). 8 **SECTION 14.** 253.12 (2) (am) of the statutes is amended to read: 253.12 (2) (am) Any hospital in which a birth defect is diagnosed in a stillbirth 9 10 or an infant or child or treatment is provided to the infant or child may report the 11 birth defect in the manner prescribed by the department under sub. (3) (a) 3. 12 **Section 15.** 253.12 (2) (b) of the statutes is amended to read: 13 253.12 (2) (b) No person specified under par. (a) need report under par. (a) if 14 that person knows that another person specified under par. (a) or (am) has already reported to the department the required information with respect to the same birth 15 16 defect of the same stillbirth or infant or child. 17 **Section 16.** 253.12 (2) (d) of the statutes is repealed and recreated to read: 18 253.12 (2) (d) If the parent or guardian of a stillbirth or an infant or child for 19 whom a report is made under par. (a) decides, after having been informed by a 20 physician or a physician's designee of the intent of the system under this section, not 21 to consent to the release of identifying information concerning the stillbirth or infant 22 or child and signs the form specified in sub. (5) (c), the department may not require 23 a person specified under par. (a) 1., 2., or 3. to report information identifying the 24 stillbirth or infant or child.

Section 17. 253.12 (2) (e) of the statutes is amended to read:

25

1	253.12 (2) (e) If the address of an infant or child or the place of delivery of a
2	stillbirth for whom a report is made under par. (a) is included in the report, the
3	department shall encode the address to refer to the same geographical location.
4	SECTION 18. 253.12 (3) (a) 1. (intro.) of the statutes is amended to read:
5	253.12 (3) (a) 1. (intro.) Establish and maintain an up-to-date registry that
6	documents the diagnosis in this state of any stillbirth or infant or child who has a
7	birth defect, regardless of the residence of the infant or child or place of delivery of
8 9	the stillbirth. The department shall include in the registry information that will
9	facilitate all of the following: (to limit or deny hearth care coverage to an individual
10	SECTION 19. 253.12 (3) (a) 1. c of the statutes is amended to read:
11	253.12 (3) (a) 1. c. Development of primary preventive strategies to decrease
12	the occurrence of birth defects without increasing abortions. The department may
13	contract with an entity that the department determines is qualified to perform the
14	development required under this subd. \(\) c. Any material released by the
15	department to the entity under the contract may be used only for the performance
16	of this development and may not be used by an insurer, as defined in s. 600.03 (27),
(17)	or by a health care provider as defined in s. 146.81/41. The entity under contract
18	may not under this subd. 1. c. reveal information that may identify the subject of a
19	report made under sub. (2).
20	SECTION 20. 253.12 (3) (c) of the statutes is amended to read:
21	253.12 (3) (c) The department shall, not more than 10 years from the date of
22	receipt of a report under sub. (2), delete from any file of the department the name of
23	a stillbirth or an infant or child that is contained in the report.

SECTION 21. 253.12 (4) (a) of the statutes is amended to read:

253.12 (4) (a) Make recommendations to the department regarding the establishment of a registry that documents the diagnosis in the state of a stillbirth or an infant or child who has a birth defect, as required under sub. (3) (a) 1. and regarding the rules that the department is required to promulgate under sub. (3) (a) 2. and 3. on the birth defects to be reported under sub. (2) and on the general content and format of the report under sub. (2) and procedures for submitting the report. The council shall also make recommendations regarding the content of a report that, because of the application of sub. (2) (d), does not contain the name of the subject of the report.

Section 22. 253.12 (5) (a) 1. of the statutes is amended to read:

253.12 (5) (a) 1. The parent or guardian of <u>a stillbirth or</u> an infant or child for whom a report is made under sub. (2).

Section 23. 253.12 (5) (a) 2. of the statutes is amended to read:

253.12 (5) (a) 2. A local health officer, a local birth-to-3 coordinator or an agency under contract with the department to administer the children with special health care needs program, upon receipt of a written request and informed written consent from the parent or guardian of the infant or child under the requirements of subs. (2) (d) and (5m). The local health officer may disclose information received under this subdivision only to the extent necessary to render and coordinate services and follow-up care for the infant or child or to conduct a health, demographic or epidemiological investigation. The local health officer shall destroy all information received under this subdivision within one year after receiving it.

Section 24. 253.12 (5) (a) 4. of the statutes is amended to read:

253.12 (5) (a) 4. A representative of a federal or state agency upon written request and to the extent that the information is necessary to perform a legally

authorized function of that agency, including investigation of causes, mortality, methods of prevention and early intervention, treatment or care of birth defects, associated diseases or disabilities. The information may not include the name or address of an infant or child or the place of delivery of a stillbirth with a condition reported under sub. (2). The department shall notify the parent or guardian of a stillbirth or an infant or child about whom information is released under this subdivision, of the release. The representative of the federal or state agency may disclose information received under this paragraph only as necessary to perform the legally authorized function of that agency for which the information was requested.

Section 25. 253.12 (5) (c) of the statutes is created to read:

253.12 (5) (c) By July 1, 2009, the department shall prescribe and distribute, and periodically distribute thereafter, to pediatric speciality clinics and local health departments copies of a form to be used by the parent or guardian of a stillbirth or an infant or child for whom a report is made under sub. (2) (a) in indicating any of the following:

- 1. Refusal under sub. (2) (d) by the parent or guardian to consent to the release of identifying information concerning the stillbirth or infant or child.
- 2. The decision under sub. (5m) by the parent or guardian to remove from the system any identifying information entered for the stillbirth or infant or child.

Section 26. 253.12 (5m) of the statutes is created to read:

253.12 (5m) Removal of identifying information. If the parent or guardian of a stillbirth or an infant or child for whom a report is made under sub. (2) (a) decides to withdraw consent to the release of identifying information concerning the stillbirth or infant or child, the parent or guardian may request from the local health department or the stillbirth's or infant's or child's physician the form specified in sub.

2

3

4

5

6

7

8

(5) (c). If the parent or guardian decides, after having been informed by the stillbirth's or infant's or child's physician or physician's designee of the information contained in the system under this section, and signs the form, the local health department, physician, or physician's designee shall forward the form to the division of the department that deals with public health. On receipt of the signed form, the department shall remove from the system under this section any information identifying the stillbirth or infant or child.

(END)

D-NOTE

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBs0060/2dn DAK:jld:sh

date

To Representative Townsend:

After speaking with Michael Welsh, who agreed, in s. 253.12 (3) (a) 1. c., I have changed the second amending sentence to prohibit an insurer from using the material released by DHFS to limit or deny health care coverage to an individual. In addition, I have removed mention of a health care provider, because, as the language was previously worded, a health care provider would be unable to use the material in any way, such as, for instance, to use strategies recommended by the entity under contract to decrease the occurrence of birth defects.

Please don't hesitate to call me if you have a question about or need further assistance with this substitute amendment.

Debora A. Kennedy Managing Attorney Phone: (608) 266-0137

E-mail: debora.kennedy@legis.wisconsin.gov

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRBs0060/2dn DAK:jld:jf

April 19, 2007

To Representative Townsend:

After speaking with Michael Welsh, who agreed, in s. 253.12 (3) (a) 1. c., I have changed the second amending sentence to prohibit an insurer from using the material released by DHFS to limit or deny health care coverage to an individual. In addition, I have removed mention of a health care provider, because, as the language was previously worded, a health care provider would be unable to use the material in any way, such as, for instance, to use strategies recommended by the entity under contract to decrease the occurrence of birth defects.

Please don't hesitate to call me if you have a question about or need further assistance with this substitute amendment.

Debora A. Kennedy Managing Attorney Phone: (608) 266-0137

E-mail: debora.kennedy@legis.wisconsin.gov

Care Mason

Son Hamilton want 6-8551

Care Mason

Son Hamilton

Care Mason

Ca

.