

# State of Misconsin 2011 - 2012 LEGISLATURE



# **2011 SENATE BILL 377**

January 12, 2012 – Introduced by Senators Galloway, Harsdorf, Erpenbach, Hansen, Holperin, King, C. Larson, Lassa, Moulton, Olsen, Risser, Taylor and Vinehout, cosponsored by Representatives Severson, Bernier, Berceau, Bies, E. Coggs, Endsley, Hintz, Jacque, Kaufert, Kerkman, Knodl, Kooyenga, Litjens, Mason, Nygren, Pasch, Petryk, Radcliffe, Rivard, Sinicki, Spanbauer, Strachota, C. Taylor, Thiesfeldt, Tranel, Zepnick and Toles. Referred to Committee on Public Health, Human Services, and Revenue.

AN ACT to amend 46.22 (1) (c) 8. (intro.), 46.275 (5) (b) 4., 46.278 (1), 46.278 (1m) 1 2 (am), 46.278 (2) (a), 46.278 (4) (a), 46.278 (5) (a), 46.278 (6) (e) 1. a., 46.278 (6) (e) 1. b., 46.278 (6) (e) 1. c., 46.284 (2) (c), 49.43 (7) (b) 1., 49.45 (6m) (ar) 1. c., 3 49.45 (6m) (bg), 49.45 (30m) (a) 2., 50.04 (2r), 50.04 (4) (dm), 50.14 (1) (a), 50.14 4 (1) (b), 50.14 (2) (bm), 50.14 (2m), 51.01 (5) (a), 51.06 (8) (a) 1., 51.06 (8) (b) 5 6 (intro.), 51.06 (8) (b) 4., 51.06 (8) (b) 7., 51.42 (6m) (intro.), 51.437 (4g) (c), 51.62 (4), 54.01 (8), 55.01 (2), 58.05 (title), 58.05 (1), 146.40 (1) (bt), 146.40 (2) (intro.), 7 8 146.40 (2) (c) (intro.), 146.40 (2) (c) 2., 146.40 (2) (d), 146.40 (2) (e), 146.40 (2) 9 (g), 146.40 (2m), subchapter VIII (title) of chapter 150 [precedes 150.96], 150.96 10 (2), 150.96 (4), 150.963 (title), 150.963 (2) (a), 150.963 (2) (b), 150.965, 150.97,

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150.975, 150.983, 155.20 (2) (a) 2., 155.30 (3) and 632.88 (1) (a) of the statutes; **relating to:** changing terminology for those with an intellectual disability.

#### Analysis by the Legislative Reference Bureau

This bill substitutes the phrase "intellectual disability" for "mental retardation" and "mentally retarded" in the statutes.

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

**SECTION 1.** 46.22 (1) (c) 8. (intro.) of the statutes is amended to read:

46.22 **(1)** (c) 8. (intro.) To administer child welfare services including services to juveniles who are delinquent and to children who are mentally retarded, have an intellectual disability or are dependent, neglected or nonmarital, and to other children who are in need of such services. In administering child welfare services the county department of social services shall be governed by the following:

**Section 2.** 46.275 (5) (b) 4. of the statutes is amended to read:

46.275 **(5)** (b) 4. Provide services, except respite care that is approved by the department, within a skilled nursing facility, intermediate care facility or intermediate care facility for persons with mental retardation an intellectual disability, as defined in s. 46.278 (1m) (am), including a state center for the developmentally disabled.

**SECTION 3.** 46.278 (1) of the statutes is amended to read:

46.278 (1) LEGISLATIVE INTENT. The intent of the programs under this section is to provide home or community-based care to serve in a noninstitutional community setting a person who meets eligibility requirements under 42 USC 1396n (c) and who is diagnosed as developmentally disabled under the definition specified in s. 51.01 (5) and relocated from an institution other than a state center for the

developmentally disabled or who meets the intermediate care facility for persons with mental retardation an intellectual disability or brain injury rehabilitation facility level of care requirements for medical assistance reimbursement in an intermediate care facility for persons with mental retardation an intellectual disability or a brain injury rehabilitation facility and is ineligible for services under s. 46.275 or 46.277. The intent of the program is also that counties use all existing services for providing care under this section, including those services currently provided by counties.

**SECTION 4.** 46.278 (1m) (am) of the statutes is amended to read:

46.278 **(1m)** (am) "Intermediate care facility for persons with mental retardation an intellectual disability" has the meaning given for "intermediate care facility for the mentally retarded" under 42 USC 1396d (d).

**Section 5.** 46.278 (2) (a) of the statutes is amended to read:

46.278 **(2)** (a) The department may request one or more waivers from the secretary of the federal department of health and human services, under 42 USC 1396n (c), authorizing the department to serve medical assistance recipients, who meet the level of care requirements for medical assistance reimbursement in an intermediate care facility for persons with mental retardation an intellectual disability or in a brain injury rehabilitation facility, in their communities by providing home or community–based services as part of medical assistance. If the department requests a waiver, it shall include all assurances required under 42 USC 1396n (c) (2) in its request.

**SECTION 6.** 46.278 (4) (a) of the statutes is amended to read:

46.278 **(4)** (a) Sections 46.27 (3) (b) and 46.275 (3) (a) and (c) to (e) apply to county participation in a program, except that services provided in the program shall

substitute for care provided a person in an intermediate care facility for persons with mental retardation an intellectual disability or in a brain injury rehabilitation facility who meets the intermediate care facility for persons with mental retardation an intellectual disability or brain injury rehabilitation facility level of care requirements for medical assistance reimbursement to that facility rather than for care provided at a state center for the developmentally disabled.

**SECTION 7.** 46.278 (5) (a) of the statutes is amended to read:

46.278 **(5)** (a) Any medical assistance recipient who meets the level of care requirements for medical assistance reimbursement in an intermediate care facility for persons with mental retardation an intellectual disability or in a brain injury rehabilitation facility and is ineligible for service under s. 46.275 or 46.277 is eligible to participate in a program, except that persons eligible for the brain injury waiver program must meet the definition of brain injury under s. 51.01 (2g), and except that the number of participants may not exceed the number approved under the waiver received under sub. (3). Such a recipient may apply, or any person may apply on behalf of such a recipient, for participation in a program. Section 46.275 (4) (b) applies to participation in a program.

**SECTION 8.** 46.278 (6) (e) 1. a. of the statutes is amended to read:

46.278 **(6)** (e) 1. a. An intermediate care facility for persons with mental retardation an intellectual disability that closes under s. 50.03 (14).

**Section 9.** 46.278 (6) (e) 1. b. of the statutes is amended to read:

46.278 **(6)** (e) 1. b. An intermediate care facility for persons with mental retardation an intellectual disability or a distinct part thereof that has a plan of closure approved by the department and that intends to close within 12 months.

**Section 10.** 46.278 (6) (e) 1. c. of the statutes is amended to read:

46.278 **(6)** (e) 1. c. An intermediate care facility for persons with mental retardation an intellectual disability that has a plan of closure or significant reduction in capacity approved by the department and that intends to close or significantly reduce its capacity within 60 months.

**SECTION 11.** 46.284 (2) (c) of the statutes is amended to read:

46.284 (2) (c) The department shall require, as a term of any contract with a care management organization under this section, that the care management organization contract for the provision of services that are covered under the family care benefit with any community-based residential facility under s. 50.01 (1g), residential care apartment complex under s. 50.01 (1d), nursing home under s. 50.01 (3), intermediate care facility for the mentally retarded persons with an intellectual disability under s. 50.14 (1) (b), community rehabilitation program, home health agency under s. 50.49 (1) (a), provider of day services, or provider of personal care, as defined in s. 50.01 (4o), that agrees to accept the reimbursement rate that the care management organization pays under contract to similar providers for the same service and that satisfies any applicable quality of care, utilization, or other criteria that the care management organization requires of other providers with which it contracts to provide the same service.

**SECTION 12.** 49.43 (7) (b) 1. of the statutes is amended to read:

49.43 (7) (b) 1. Licensed or approved under state law for the mentally retarded individuals with an intellectual disability or persons with related conditions, the primary purpose of which is to provide health or rehabilitative services for mentally retarded individuals with an intellectual disability according to rules promulgated by the department; and

**SECTION 13.** 49.45 (6m) (ar) 1. c. of the statutes is amended to read:

49.45 **(6m)** (ar) 1. c. If a facility has an approved program for provision of service to mentally retarded residents who have an intellectual disability, residents dependent upon ventilators, or residents requiring supplemental skilled care due to complex medical conditions, a supplement to the direct care component of the facility rate under subd. 1. b. may be made to that facility according to a method developed by the department.

**SECTION 14.** 49.45 (6m) (bg) of the statutes is amended to read:

49.45 **(6m)** (bg) The department shall determine payment levels for the provision of skilled, intermediate, limited, personal or residential care or care for the mentally retarded individuals with an intellectual disability in the state centers for the developmentally disabled and in a Wisconsin veterans home operated by the department of veterans affairs under s. 45.50 separately from the payment principles, applicable costs and methods established under this subsection.

**SECTION 15.** 49.45 (30m) (a) 2. of the statutes is amended to read:

49.45 **(30m)** (a) 2. Services in an intermediate care facility for persons with mental retardation an intellectual disability, as defined in s. 46.278 (1m) (am), other than a state center for the developmentally disabled.

**SECTION 16.** 50.04 (2r) of the statutes is amended to read:

50.04 (2r) Admissions requiring approval. Except in an emergency, a nursing home that is not certified as a provider of medical assistance or that is an intermediate care facility for persons with mental retardation an intellectual disability, as defined in s. 46.278 (1m) (am), or an institution for mental diseases, as defined under 42 CFR 435.1009, may not admit as a resident an individual who has a developmental disability, as defined in s. 51.01 (5), or who is both under age 65 and has mental illness, as defined in s. 51.01 (13), unless the county department under

s. 46.23, 51.42 or 51.437 of the individual's county of residence has recommended the admission.

**SECTION 17.** 50.04 (4) (dm) of the statutes is amended to read:

50.04 **(4)** (dm) *Inspection fee.* If the department takes enforcement action against a nursing home, including an intermediate care facility for the mentally retarded persons with an intellectual disability, as defined in 42 USC 1396d (d) s. 50.14 (1) (b), for a violation of this subchapter or rules promulgated under it or for a violation of a requirement under 42 USC 1396r, and the department subsequently conducts an on–site inspection of the nursing home to review the nursing home's action to correct the violation, the department may, unless the nursing home is operated by the state, impose a \$200 inspection fee on the nursing home.

**SECTION 18.** 50.14 (1) (a) of the statutes is amended to read:

50.14 **(1)** (a) Notwithstanding s. 50.01 (1m), "facility" means a nursing home or an intermediate care facility for persons with mental retardation an intellectual disability that is not located outside the state.

**SECTION 19.** 50.14 (1) (b) of the statutes is amended to read:

50.14 **(1)** (b) "Intermediate care facility for persons with mental retardation <u>an</u> intellectual disability" has the meaning given for "intermediate care facility for the mentally retarded" under 42 USC 1396d (d).

**Section 20.** 50.14 (2) (bm) of the statutes is amended to read:

50.14 **(2)** (bm) For intermediate care facilities for persons with mental retardation an intellectual disability, an amount calculated by multiplying the projected annual gross revenues of all intermediate care facilities for persons with mental retardation an intellectual disability in this state by 0.055, dividing the product by the number of licensed beds of intermediate care facilities for persons

with mental retardation an intellectual disability in this state and dividing the quotient by 12.

**Section 21.** 50.14 (2m) of the statutes is amended to read:

50.14 **(2m)** Prior to each state fiscal year, the department shall calculate the amount of the assessment under sub. (2) (bm) that shall apply during the fiscal year. The department may reduce the assessment amount during a state fiscal year to avoid collecting for the fiscal year an amount in bed assessment receipts under sub. (2) (bm) that exceeds 5.5 percent of the aggregate gross revenues for intermediate care facilities for the mentally retarded persons with an intellectual disability for the fiscal year.

**Section 22.** 51.01 (5) (a) of the statutes is amended to read:

brain injury, cerebral palsy, epilepsy, autism, Prader–Willi syndrome, mental retardation intellectual disability, or another neurological condition closely related to mental retardation an intellectual disability or requiring treatment similar to that required for individuals with mental retardation an intellectual disability, which has continued or can be expected to continue indefinitely and constitutes a substantial handicap to the afflicted individual. "Developmental disability" does not include dementia that is primarily caused by degenerative brain disorder.

**SECTION 23.** 51.06 (8) (a) 1. of the statutes is amended to read:

51.06 **(8)** (a) 1. "Intermediate care facility for persons with mental retardation an intellectual disability" has the meaning given for "intermediate care facility for the mentally retarded" under 42 USC 1396d (d).

**SECTION 24.** 51.06 (8) (b) (intro.) of the statutes is amended to read:

51.06 **(8)** (b) (intro.) Annually by October 1, the department shall submit to the joint committee on finance and to the appropriate standing committees of the legislature under s. 13.172 (3) a report that includes information collected from the previous fiscal year on the relocation or diversion of individuals who are Medical Assistance eligibles or recipients from nursing homes, intermediate care facilities for persons with mental retardation an intellectual disability, and centers for the developmentally disabled. The report shall include all of the following information:

**Section 25.** 51.06 (8) (b) 4. of the statutes is amended to read:

51.06 **(8)** (b) 4. An accounting of the costs and savings under the Medical Assistance program of relocations and diversions and the resulting reduction in capacity for services of nursing homes, intermediate care facilities for persons with mental retardation an intellectual disability, and centers for the developmentally disabled. The accounting shall include the per individual savings as well as the collective savings of relocations and diversions.

**Section 26.** 51.06 (8) (b) 7. of the statutes is amended to read:

51.06 **(8)** (b) 7. Staff turnover rates for nursing homes, intermediate care facilities for persons with mental retardation an intellectual disability, and centers for the developmentally disabled in communities in which an individual relocated or diverted from a nursing home, intermediate care facility for persons with mental retardation an intellectual disability, or center for the developmentally disabled currently resides.

**SECTION 27.** 51.42 (6m) (intro.) of the statutes is amended to read:

51.42 **(6m)** County community programs director in certain counties with a county executive or county administrator. (intro.) In any county with a county executive or county administrator in which the county board of supervisors has

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established a single-county department of community programs, the county executive or county administrator shall appoint and supervise the county community programs director. In any county with a population of 500,000 or more, the county executive or county administrator shall appoint the director of the county department of human services under s. 46.21 as the county community programs director. The appointment of a county community programs director under this subsection shall be on the basis of recognized and demonstrated interest in and knowledge of the problems of mental health, mental retardation intellectual disability, alcoholism and drug addiction, with due regard to training, experience, executive and administrative ability, and general qualification and fitness for the performance of the duties of the director. The appointment of a county community programs director under this subsection is subject to confirmation by the county board of supervisors unless the county board of supervisors, by ordinance, elects to waive confirmation or unless the appointment is made under a civil service system competitive examination procedure established under s. 59.52 (8) or ch. 63. The county community programs director, subject only to the supervision of the county executive or county administrator, shall:

**SECTION 28.** 51.437 (4g) (c) of the statutes is amended to read:

51.437 **(4g)** (c) In a county with a population of 500,000 or more, the county board of supervisors shall integrate day care programs for mentally retarded persons with an intellectual disability and those programs for persons with other developmental disabilities into the county developmental disabilities program.

**SECTION 29.** 51.62 (4) of the statutes is amended to read:

51.62 **(4)** Departmental duties. The department shall provide the protection and advocacy agency with copies of annual surveys and plans of correction for

intermediate care facilities for persons with mental retardation an intellectual disability on or before the first day of the 2nd month commencing after completion of the survey or plan.

**SECTION 30.** 54.01 (8) of the statutes is amended to read:

54.01 (8) "Developmental disability" means a disability attributable to mental retardation intellectual disability, cerebral palsy, epilepsy, autism, or another neurological condition closely related to mental retardation an intellectual disability or requiring treatment similar to that required for individuals with mental retardation an intellectual disability, which has continued or can be expected to continue indefinitely, substantially impairs an individual from adequately providing for his or her own care or custody, and constitutes a substantial handicap to the afflicted individual. The term does not include dementia that is primarily caused by degenerative brain disorder.

**SECTION 31.** 55.01 (2) of the statutes is amended to read:

55.01 (2) "Developmental disability" means a disability attributable to mental retardation intellectual disability, cerebral palsy, epilepsy, autism or another neurological condition closely related to mental retardation an intellectual disability or requiring treatment similar to that required for individuals with mental retardation an intellectual disability, which has continued or can be expected to continue indefinitely, substantially impairs an individual from adequately providing for his or her own care or custody, and constitutes a substantial handicap to the afflicted individual. The term does not include dementia that is primarily caused by degenerative brain disorder.

**Section 32.** 58.05 (title) of the statutes is amended to read:

58.05	(title)	Private	institutions	for	persons	who	are	mentally	ill	or
retarded <u>l</u>	nave an	<u>intellec</u>	tual disabili	<u>ty</u> .						

**SECTION 33.** 58.05 (1) of the statutes is amended to read:

58.05 (1) The articles of organization of any corporation organized under the laws of this state for the establishment and maintenance of any hospital or other institution for the care, treatment or relief of persons who are mentally ill or retarded have an intellectual disability may contain provisions authorizing it to receive general, special, permanent or temporary endowments and to secure the repayment of the same in accordance with the terms and conditions upon which they may be made by a mortgage upon its real or personal property, or both, or otherwise, in the manner in such articles provided.

**SECTION 34.** 146.40 (1) (bt) of the statutes is amended to read:

146.40 **(1)** (bt) "Intermediate care facility for persons with mental retardation an intellectual disability" has the meaning given for "intermediate care facility for the mentally retarded" under 42 USC 1396d (d).

**SECTION 35.** 146.40 (2) (intro.) of the statutes is amended to read:

146.40 **(2)** (intro.) A hospital, nursing home, intermediate care facility for persons with mental retardation an intellectual disability, home health agency, or hospice may not employ or contract for the services of an individual as a nurse aide, regardless of the title under which the individual is employed or contracted for, unless one of the following is true:

**SECTION 36.** 146.40 (2) (c) (intro.) of the statutes is amended to read:

146.40 **(2)** (c) (intro.) For hospitals, nursing homes, home health agencies or hospices, whether or not certified providers of medical assistance, and intermediate care facilities persons with mental retardation an intellectual disability that are

certified providers of medical assistance, the individual is enrolled in an instructional program for nurse aides that is approved under sub. (3) and is employed or under contract as a nurse's assistant, home health aide or hospice aide fewer than 120 calendar days by the hospital, nursing home, home health agency, hospice or intermediate care facility for the mentally retarded persons with an intellectual disability. All of the following applies to an individual specified under this paragraph:

**SECTION 37.** 146.40 (2) (c) 2. of the statutes is amended to read:

146.40 **(2)** (c) 2. The hospital, nursing home, home health agency, hospice, or intermediate care facility for persons with mental retardation an intellectual disability may not include the individual in meeting or complying with a requirement for nursing care staff and functions, including a minimum nursing staff requirement.

**SECTION 38.** 146.40 (2) (d) of the statutes is amended to read:

146.40 (2) (d) For hospitals, nursing homes, home health agencies, or hospices, whether or not certified providers of medical assistance, and intermediate care facilities for persons with mental retardation an intellectual disability that are certified providers of medical assistance, the individual has successfully completed an instructional program and a competency evaluation program for nurse aides that is certified in another state that meets criteria for acceptance in this state as specified by the department by rule.

**SECTION 39.** 146.40 (2) (e) of the statutes is amended to read:

146.40 **(2)** (e) For hospitals, home health agencies, or hospices, whether or not certified providers of medical assistance, nursing homes that are not certified providers of medical assistance and intermediate care facilities for persons with

**SECTION 39** 

mental retardation an intellectual disability that are certified providers of medical assistance, the individual is a student nurse who has successfully completed a basic nursing course from a school that is on the accredited list of schools specified under s. 441.01 (4) or who successfully completes a competency evaluation program for nurse aides that is approved by the department under sub. (3m).

**SECTION 40.** 146.40 (2) (g) of the statutes is amended to read:

146.40 (2) (g) For hospitals, nursing homes, home health agencies, or hospices, whether or not certified providers of medical assistance, and intermediate care facilities for persons with mental retardation an intellectual disability that are certified providers of medical assistance, the individual, if he or she has performed no nursing–related service for monetary compensation for 24 consecutive months after having satisfied the requirement under par. (a), again successfully completes a competency evaluation program for nurse aides that is approved by the department under sub. (3m).

**SECTION 41.** 146.40 (2m) of the statutes is amended to read:

146.40 **(2m)** A nursing home or intermediate care facility for persons with mental retardation an intellectual disability, whether or not the nursing home or intermediate care facility is a certified provider of medical assistance, may not employ or contract for the services of an individual as a feeding assistant, regardless of the title under which the individual is employed or contracted for, unless the individual has successfully completed a state-approved training and testing program, as specified by the department by rule.

**SECTION 42.** Subchapter VIII (title) of chapter 150 [precedes 150.96] of the statutes is amended to read:

1	SUBCHAPTER VIII
2	MENTAL RETARDATION FACILITIES FOR THE INTELLECTUALLY
3	<b>DISABLED</b> AND COMMUNITY MENTAL HEALTH
4	CENTERS CONSTRUCTION
5	<b>SECTION 43.</b> 150.96 (2) of the statutes is amended to read:
6	150.96 (2) "Facility for the mentally retarded individuals with an intellectual
7	disability" means a facility specially designed for the diagnosis, treatment,
8	education, training or custodial care of the mentally retarded individuals with an
9	intellectual disability; including facilities for training specialists and sheltered
10	workshops for the mentally retarded individuals with an intellectual disability, but
11	only if such workshops are part of facilities which provide or will provide
12	comprehensive services for the mentally retarded individuals with an intellectual
13	disability.
14	<b>SECTION 44.</b> 150.96 (4) of the statutes is amended to read:
15	150.96 (4) "Nonprofit facility for the mentally retarded individuals with an
16	intellectual disability", and "nonprofit community mental health center" mean,
17	respectively, a facility for the mentally retarded individuals with an intellectual
18	disability, and a community mental health center which is owned and operated by
19	one or more nonprofit corporations or associations no part of the net earnings of
20	which inures, or may lawfully inure, to the benefit of any private shareholder or
21	individual.
22	<b>SECTION 45.</b> 150.963 (title) of the statutes is amended to read:
23	150.963 (title) Construction of mental retardation facilities for the
24	intellectually disabled and community mental health centers.
25	<b>SECTION 46.</b> 150.963 (2) (a) of the statutes is amended to read:

150.963 (2) (a) Making inventories of existing facilities, surveying the need for
construction for facilities for the mentally retarded individuals with an intellectual
disability and community mental health centers, and developing programs of
construction.

**SECTION 47.** 150.963 (2) (b) of the statutes is amended to read:

150.963 **(2)** (b) Developing and administering a state plan for the construction of public and other nonprofit facilities for the mentally retarded individuals with an intellectual disability, and a state plan for the construction of public and other nonprofit community mental health centers.

**SECTION 48.** 150.965 of the statutes is amended to read:

150.965 Construction programs. The department is directed to develop construction programs for facilities for the mentally retarded individuals with an intellectual disability and community mental health centers for the mentally ill, which shall be based respectively on statewide inventories of existing facilities for the mentally retarded individuals with an intellectual disability and the mentally ill and surveys of need, and which shall provide in accordance with regulations prescribed under the federal act, for facilities which will provide adequate services for the mentally retarded individuals with an intellectual disability and adequate community mental health services for the people residing in this state and for furnishing needed services to persons unable to pay therefor.

**Section 49.** 150.97 of the statutes is amended to read:

**150.97 Standards for maintenance and operation.** The department shall by regulation prescribe, and shall be authorized to enforce, standards for the maintenance and operation of facilities for the mentally retarded individuals with

an intellectual disability, and community mental health centers which receive federal aid for construction under the state plans.

**Section 50.** 150.975 of the statutes is amended to read:

150.975 Applications. Applications for mental retardation facility for individuals with an intellectual disability or community mental health center construction projects for which federal funds are requested shall be submitted to the department by the state, a political subdivision thereof or by a public or other nonprofit agency. Each application for a construction project shall conform to federal and state requirements.

**SECTION 51.** 150.983 of the statutes is amended to read:

**150.983 Mental retardation facilities Facilities for individuals with an intellectual disability and community mental health centers construction funds.** The department may receive federal funds in behalf of, and transmit them to, applicants. In the general fund there is hereby established, separate and apart from all public moneys of this state, -a mental retardation an intellectual disability facilities construction fund and a community mental health centers construction fund. Money received from the federal government for a construction project under this subchapter approved by the secretary shall be deposited to the credit of the appropriate fund and shall be used solely for payments to applicants for work performed, or purchases made, in carrying out the approved project.

**Section 52.** 155.20 (2) (a) 2. of the statutes is amended to read:

155.20 **(2)** (a) 2. An intermediate care facility for persons with mental retardation an intellectual disability, as defined in s. 46.278 (1m) (am).

**Section 53.** 155.30 (3) of the statutes is amended to read:

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SECTION 53

155.30 (3) The department shall prepare and provide copies of a power of
attorney for health care instrument and accompanying information for distribution
in quantities to health care professionals, hospitals, nursing homes, multipurpose
senior centers, county clerks, and local bar associations and individually to private
persons. The department shall include, in information accompanying the copy of the
instrument, at least the statutory definitions of terms used in the instrument,
statutory restrictions on who may be witnesses to a valid instrument, a statement
explaining that valid witnesses acting in good faith are statutorily immune from civil
or criminal liability and a statement explaining that an instrument may, but need
not, be filed with the register in probate of the principal's county of residence. The
department may charge a reasonable fee for the cost of preparation and distribution.
The power of attorney for health care instrument distributed by the department
shall include the notice specified in sub. (1) and shall be in the following form:

#### POWER OF ATTORNEY FOR HEALTH CARE

Document made this.... day of.... (month),.... (year).

#### CREATION OF POWER OF ATTORNEY

#### FOR HEALTH CARE

I,... (print name, address and date of birth), being of sound mind, intend by this document to create a power of attorney for health care. My executing this power of attorney for health care is voluntary. Despite the creation of this power of attorney for health care, I expect to be fully informed about and allowed to participate in any health care decision for me, to the extent that I am able. For the purposes of this document, "health care decision" means an informed decision to accept, maintain, discontinue or refuse any care, treatment, service or procedure to maintain, diagnose or treat my physical or mental condition.

In addition, I may, by this document, specify my wishes with respect to making an anatomical gift upon my death.

#### DESIGNATION OF HEALTH CARE AGENT

If I am no longer able to make health care decisions for myself, due to my incapacity, I hereby designate.... (print name, address and telephone number) to be my health care agent for the purpose of making health care decisions on my behalf. If he or she is ever unable or unwilling to do so, I hereby designate.... (print name, address and telephone number) to be my alternate health care agent for the purpose of making health care decisions on my behalf. Neither my health care agent nor my alternate health care agent whom I have designated is my health care provider, an employee of my health care provider, an employee of a health care facility in which I am a patient or a spouse of any of those persons, unless he or she is also my relative. For purposes of this document, "incapacity" exists if 2 physicians or a physician and a psychologist who have personally examined me sign a statement that specifically expresses their opinion that I have a condition that means that I am unable to receive and evaluate information effectively or to communicate decisions to such an extent that I lack the capacity to manage my health care decisions. A copy of that statement must be attached to this document.

#### GENERAL STATEMENT OF AUTHORITY GRANTED

Unless I have specified otherwise in this document, if I ever have incapacity I instruct my health care provider to obtain the health care decision of my health care agent, if I need treatment, for all of my health care and treatment. I have discussed my desires thoroughly with my health care agent and believe that he or she understands my philosophy regarding the health care decisions I would make if I

SECTION 53

were able. I desire that my wishes be carried out through the authority given to my health care agent under this document.

If I am unable, due to my incapacity, to make a health care decision, my health care agent is instructed to make the health care decision for me, but my health care agent should try to discuss with me any specific proposed health care if I am able to communicate in any manner, including by blinking my eyes. If this communication cannot be made, my health care agent shall base his or her decision on any health care choices that I have expressed prior to the time of the decision. If I have not expressed a health care choice about the health care in question and communication cannot be made, my health care agent shall base his or her health care decision on what he or she believes to be in my best interest.

#### LIMITATIONS ON MENTAL HEALTH TREATMENT

My health care agent may not admit or commit me on an inpatient basis to an institution for mental diseases, an intermediate care facility for persons with mental retardation an intellectual disability, a state treatment facility or a treatment facility. My health care agent may not consent to experimental mental health research or psychosurgery, electroconvulsive treatment or drastic mental health treatment procedures for me.

#### ADMISSION TO NURSING HOMES OR

#### COMMUNITY-BASED RESIDENTIAL FACILITIES

My health care agent may admit me to a nursing home or community-based residential facility for short-term stays for recuperative care or respite care.

If I have checked "Yes" to the following, my health care agent may admit me for a purpose other than recuperative care or respite care, but if I have checked "No" to the following, my health care agent may not so admit me:

1. A nursing home — Yes.... No....

# **SENATE BILL 377**

1

2	2. A community-based residential facility — Yes No
3	If I have not checked either "Yes" or "No" immediately above, my health care
4	agent may admit me only for short-term stays for recuperative care or respite care.
5	PROVISION OF A FEEDING TUBE
6	If I have checked "Yes" to the following, my health care agent may have a
7	feeding tube withheld or withdrawn from me, unless my physician has advised that,
8	in his or her professional judgment, this will cause me pain or will reduce my comfort.
9	If I have checked "No" to the following, my health care agent may not have a feeding
10	tube withheld or withdrawn from me.
11	My health care agent may not have orally ingested nutrition or hydration
12	withheld or withdrawn from me unless provision of the nutrition or hydration is
13	medically contraindicated.
14	Withhold or withdraw a feeding tube — Yes No
15	If I have not checked either "Yes" or "No" immediately above, my health care
16	agent may not have a feeding tube withdrawn from me.
17	HEALTH CARE DECISIONS FOR
18	PREGNANT WOMEN
19	If I have checked "Yes" to the following, my health care agent may make health
20	care decisions for me even if my agent knows I am pregnant. If I have checked "No"
21	to the following, my health care agent may not make health care decisions for me if
22	my health care agent knows I am pregnant.
23	Health care decision if I am pregnant — Yes No

SERVITE BILL OV.
If I have not checked either "Yes" or "No" immediately above, my health care
agent may not make health care decisions for me if my health care agent knows I am
pregnant.
STATEMENT OF DESIRES,
SPECIAL PROVISIONS OR LIMITATIONS
In exercising authority under this document, my health care agent shall act
consistently with my following stated desires, if any, and is subject to any special
provisions or limitations that I specify. The following are specific desires, provisions
or limitations that I wish to state (add more items if needed):
1) –
2) –
3) –
INSPECTION AND DISCLOSURE OF
INFORMATION RELATING TO MY PHYSICAL
OR MENTAL HEALTH
Subject to any limitations in this document, my health care agent has the
authority to do all of the following:
(a) Request, review and receive any information, oral or written, regarding my
physical or mental health, including medical and hospital records.
(b) Execute on my behalf any documents that may be required in order to obtain
this information.
(c) Consent to the disclosure of this information.

(The principal and the witnesses all must sign the document at the same time.)

SIGNATURE OF PRINCIPAL

(person creating the power of attorney for health care)

25

ALTERNATE HEALTH CARE AGENT

Date.... 1 Signature.... 2 (The signing of this document by the principal revokes all previous powers of 3 attorney for health care documents.) 4 STATEMENT OF WITNESSES 5 I know the principal personally and I believe him or her to be of sound mind and 6 at least 18 years of age. I believe that his or her execution of this power of attorney 7 for health care is voluntary. I am at least 18 years of age, am not related to the 8 principal by blood, marriage, or adoption, am not the domestic partner under ch. 770 9 of the principal, and am not directly financially responsible for the principal's health 10 care. I am not a health care provider who is serving the principal at this time, an 11 employee of the health care provider, other than a chaplain or a social worker, or an 12 employee, other than a chaplain or a social worker, of an inpatient health care facility 13 in which the declarant is a patient. I am not the principal's health care agent. To 14 the best of my knowledge, I am not entitled to and do not have a claim on the 15 principal's estate. 16 Witness No. 1: 17 (print) Name.... Date.... 18 Address.... 19 Signature.... 20 Witness No. 2: 21 (print) Name.... Date.... 22 Address.... 23 Signature.... 24 STATEMENT OF HEALTH CARE AGENT AND

Signature....

I understand that (name of principal) has designated me to be his or her
health care agent or alternate health care agent if he or she is ever found to have
incapacity and unable to make health care decisions himself or herself (name of
principal) has discussed his or her desires regarding health care decisions with me.
Agent's signature
Address
Alternate's signature
Address
Failure to execute a power of attorney for health care document under chapter
155 of the Wisconsin Statutes creates no presumption about the intent of any
individual with regard to his or her health care decisions.
This power of attorney for health care is executed as provided in chapter 155
of the Wisconsin Statutes.
ANATOMICAL GIFTS (optional)
Upon my death:
I wish to donate only the following organs or parts: (specify the organs or
parts).
I wish to donate any needed organ or part.
I wish to donate my body for anatomical study if needed.
I refuse to make an anatomical gift. (If this revokes a prior commitment that
I have made to make an anatomical gift to a designated donee, I will attempt to notify
the donee to which or to whom I agreed to donate.)
Failing to check any of the lines immediately above creates no presumption
about my desire to make or refuse to make an anatomical gift.

Date....

1	<b>SECTION 54.</b> 632.88 (1) (a) of the statutes is amended to read:
2	632.88 (1) (a) Incapable of self-sustaining employment because of mental
3	retardation intellectual disability or physical handicap; and
4	(END)