2019 DRAFTING REQUEST

Bill

For:

Devin LeMahieu (608) 266-2056

Drafter:

tdodge

By:

Erin

Secondary Drafters:

Date:

10/4/2019

May Contact:

Same as LRB:

Submit via email:

YES

Requester's email:

Sen.LeMahieu@legis.wisconsin.gov

Carbon copy (CC) to:

tamara.dodge@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Opioid and methamphetamine data portal

Instructions:

See attached

| Drafting | History: |
|----------|----------|
|----------|----------|

| <u>Vers.</u> | <u>Drafted</u> | Reviewed | Submitted | <u>Jacketed</u> | Required |
|--------------|----------------------|------------------------|-----------------------|-----------------|----------|
| /? | tdodge 10/21/2019 | ccarmich 10/21/2019 | | | |
| /P1 | tdodge 10/30/2019 | ccarmich 10/30/2019 | lparisi 10/21/2019 | | State |
| /P2 | tdodge 12/16/2019 | ccarmich 12/17/2019 | jmurphy 10/30/2019 | | State |
| /P3 | tdodge 1/2/2020 | csicilia 1/3/2020 | lparisi 12/17/2019 | | State |
| /P4 | | | mbarman | | State |

| Vers. | <u>Drafted</u> | Reviewed | Submitted 1/3/2020 | <u>Jacketed</u> | Required |
|-------|---------------------|-----------------------|----------------------|----------------------|----------|
| /1 | tdodge 1/27/2020 | csicilia 1/27/2020 | | jmurphy 1/14/2020 | State |
| /2 | | | lparisi 1/27/2020 | lparisi 1/27/2020 | State |

FE Sent For: At Intro

<**END>**

2019 DRAFTING REQUEST

Bill

For:

Scott Fitzgerald (608) 266-5660

Drafter:

tdodge

By:

Kimber

Secondary Drafters:

Date:

10/4/2019

May Contact:

Same as LRB:

Submit via email:

YES

Requester's email:

Sen. Fitzger ald @ leg is. wis consin. gov

Carbon copy (CC) to: tamara.dodge@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Opioid data portal

Instructions:

See attached

| Drafting | History: |
|----------|----------|
|----------|----------|

| Vers. | <u>Drafted</u> | Reviewed | Submitted | <u>Jacketed</u> | Required |
|-------|----------------------|------------------------|-----------------------|-----------------|----------|
| /? | tdodge 10/21/2019 | ccarmich 10/21/2019 | | | |
| /P1 | tdodge 10/30/2019 | ccarmich 10/30/2019 | lparisi 10/21/2019 | | State |
| /P2 | tdodge 12/16/2019 | ccarmich 12/17/2019 | jmurphy 10/30/2019 | | State |
| /P3 | tdodge 1/2/2020 | csicilia 1/3/2020 | lparisi 12/17/2019 | | State |
| /P4 | | | mbarman | | State |

| Vers. | <u>Drafted</u> | Reviewed | <u>Submitted</u> 1/3/2020 | <u>Jacketed</u> | Required |
|--------|----------------|--------------|---------------------------|----------------------|----------|
| /1 | | | | jmurphy 1/14/2020 | State |
| FE Sen | t For: | < <u>E</u>] | ND> | | |

<u>-4567</u>

IWK-ZWK

Dodge, Tamara

From:

Liedl, Kimber

Sent:

Wednesday, October 02, 2019 3:35 PM

To:

Dodge, Tamara

Subject:

RE: Opiate portal

Sorry to hear that you're not feeling well. We can chat tomorrow if you feel up to it.

Thinking of the last bullet in my previous email, perhaps it would be helpful to have additional details with it, such as:

o DOA, DHS, DCF, and DSPS may submit other data set recommendations needed to analyze behavioral health, reduce relapse, improve patient outcomes, assist children in out-of-home care, and monitor health costs related to substance abuse.

We'd also like to include this info as well:

- The DOA shall be the administrator of the portal. Those departments sharing data will have role-based access to the reporting in accordance with the security standards and laws set forth by the state and federal government.
- DOA shall work with the selected vendor to operationalize the opiate portal to provide real-time advanced analytics on an ongoing basis

Thanks for the help, Kimber

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Wednesday, October 02, 2019 3:06 PM

To: Liedl, Kimber < Kimberly. Liedl@legis.wisconsin.gov>

Subject: RE: Opiate portal

Kimber,

I received your voicemail. I'm working from home today as I didn't feel well this morning. But, I'll give you a call when I get back in the office tomorrow to chat about this.

Tami

Tamara J. Dodge

Senior Legislative Attorney Wisconsin Legislative Reference Bureau P.O. Box 2037 Madison, WI 53701-2037 (608) 504 - 5808 tamara.dodge@legis.wisconsin.gov

Please note my new direct phone number (as of June 13, 2018).

From: Liedl, Kimber < Kimberly.Liedl@legis.wisconsin.gov>

Sent: Wednesday, October 02, 2019 2:51 PM

To: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Subject: Opiate portal

Hi, Tami, here are our thoughts for the initial P1 draft. I'll call you to chat about it as well. We will have an additional draft related to death records; I'll send that info later tomorrow.

Drafting Instructions for an Opiate Portal:

- Create an RFP for an opiate portal that will be housed at DOA to collect and disseminate opiate information in the state.
- DOA will collaborate with DHS, DSPS, and DCF to gather information for the portal.
- DOA will send an annual report to JFC summarizing the opiate data that is collected and the trends that they see from prior years. The report will be sent by January 31 of each year.
- Collected opiate data points will include:
 - o hospital discharge data
 - o ambulance runs
 - o number of overdoses in the state and the number of people who overdose
 - o death records
 - o hospital diversions (i.e. which hospitals take opiate patients vs refer them elsewhere)
 - o opiate treatment centers in WI
 - locations of methadone clinics in the state
 - number of patients on methadone vs the number being stepped down on methadone
 - o naloxone distribution
 - adult opioid usage
 - o youth opioid usage
 - o child protective services data
 - number of children taken into care due to parent/guardian on opiates
 - the length of time they have been in out-of-home care
 - general breakdown of the people who first reported the child (school official, county CPS worker, family member, etc)
- DOA will submit the RFP for review to JFC before it goes out for bid
- DOA, DHS, DCF, and DSPS may submit other data point recommendations for the RFP when it is submitted to JFC for review

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Tuesday, October 01, 2019 10:58 AM

To: Liedl, Kimber < <u>Kimberly.Liedl@legis.wisconsin.gov</u>>

Subject: RE: Death records in Wisconsin

Kimber,

No problem. Feel free to contact me with any drafting instructions and I can distribute the instructions among the LRB drafters (if the drafts aren't in my area).

Tami

Tamara J. Dodge

Senior Legislative Attorney Wisconsin Legislative Reference Bureau P.O. Box 2037 Madison, WI 53701-2037 (608) 504 - 5808 tamara.dodge@legis.wisconsin.gov $\frac{\partial}{\partial x} (x_0, x_0) = \frac{\partial}{\partial x_0} (x_0, x_0$



State of Misconsin 2019 - 2020 LEGISLATURE

Dulad

LRB-4567(?)
TJD: 7. ()

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

SIAV x-ref/ sIC

AN ACT ...; relating to: opioid data system.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. The DOA must collaborate with and collect data from the Department of Health Services, the Department of Safety and Professional Services, and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill, DOA administers the contract with a vendor to operate the opioid data system, has access to the data contained in the opioid data system, and works with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible. The opioid data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill requires DOA to submit a report to JCF summarizing the information from the opioid data system and analyzing trends in that information across years of data collection.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

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

1

SECTION 1

| 1 | SECTION 1. Subchapter III of chapter 153 [precedes 153.85] of the statutes is |
|----|---|
| 2 | created to read: |
| 3 | CHAPTER 153 |
| 4 | SUBCHAPTER III |
| 5 | OPIOID DATA |
| 6 | 153.85 Definition; opioid data. In this subchapter, "vendor" means a person |
| 7 | awarded the contract following a request for proposals described under s. 153.87. |
| 8 | 153.87 Opioid data system. (1) Subject to sub. (2), the department of |
| 9 | administration shall issue a request for proposals to establish and maintain an |
| 10 | opioid data system to collect, format, analyze, and disseminate information on opioid |
| 11 | use, which shall include all of the following: |
| 12 | (a) Hospital discharge data from visits and stays related to opioid use or |
| 13 | overdose. |
| 14 | (b) Records of hospitals diverting patients to other facilities to address opioid |
| 15 | use or overdose. |
| 16 | Ambulance service run data related to opioid use or overdose. |
| 17 | The number of opioid-related overdoses in the state, the number of |
| 18 | individuals who overdose, and the opioids on which the individuals overdose. |
| 19 | Death records related to opioid use or overdose. |
| 20 | The number of methadone clinics in the state, the number of patients taking |
| 21 | methadone, and the number of patients whose methadone dosages are in the process |
| 22 | of being reduced. |
| 23 | The amount of naloxone dosages dispensed and administered. |
| 24 | Number of adults in the state who use opioids, the extent to which those |
| 25 | adults use opioids, and the type of opioids used. |

| 1 | (5 (b)) | Number of minors in the state who use opioids, the extent to which those |
|---|----------|--|
| 2 | adult us | e opioids, and the type of opioids used. |

Number of minors who enter the child protective services system due to opioid use by a parent or guardian, length of time those minors are in out-of-home care, and the type of reporter who notified child protective services of the needs of the minor.

(2) (a) The department of administration shall submit the proposed request for proposals described under sub. (1) to the joint committee on finance before issuing the request for proposal. If the cochairpersons of the joint committee on finance do not notify the department of administration within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the request for proposals. If, within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph, the cochairpersons of the committee notify the department of administration that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the proposed request for proposals only upon approval by the committee.

****Note: This draft applies the Joint Committee on Finance's passive review procedure. If you want to require the committee to meet and affirmatively approve or disapprove of the proposed request for proposals, please let me know and I can change this.

(b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing behavioral

| health status of the state's population, reducing relapse of opioid misuse, improving |
|---|
| patient outcomes after opioid use or overdose, assisting minors who are in |
| out-of-home care, and monitoring health costs related to substance use. |

- (3) The department of administration shall collaborate with and collect data from the departments of health services, safety and professional services, and children and families and any other applicable agencies for the opioid data system under sub. (1).
- (4) (a) The department of administration shall administer the contract with the vendor to operate the opioid data system and shall have access to the data contained in the opioid data system. The department of administration shall work with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible.
- (b) The opioid data system shall allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws.
- 153.89 Reports; opioid data system. By January 31, 2022, and annually thereafter, the department of administration shall submit a report to the joint committee on finance summarizing the information from the opioid data system under s. 153.87 (1) and analyzing trends in that information across years of data collection.

Dodge, Tamara

From:

Liedl, Kimber

Sent:

Friday, October 25, 2019 2:30 PM

To:

Dodge, Tamara

Subject:

RE: Draft review: LRB -4567/P1

Hi, Tami, we have a few changes to the draft.

On page 3 after line 3, please add some additional criteria. These could be more artfully worded:

- Number of patients whose methadone doses have been reduced more than once.
- Number of patients whose methadone doses have been stopped due to them moving to successful completion of the program.

The intent of these changes are to better capture those patients who are successfully stepping down their dosage and those who no longer need the methadone at all but have not relapsed.

On page 3 line 4, after that line add

Total doses of naloxone administered and total number of unique patients who receive doses.

The intent of this change is to find out if there are a number of people receiving multiple doses of naloxone and the extent to which that happens.

Please let me know if you have any questions.

Thanks,

Kimber

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Monday, October 21, 2019 4:11 PM

To: Liedl, Kimber < Kimberly.Liedl@legis.wisconsin.gov>

Subject: FW: Draft review: LRB -4567/P1

Kimber,

The portal draft is attached. I did a pared down version of this draft without adding too many additional details. I'm happy to make changes or add more detail in future versions.

Tami

Tamara J. Dodge

Senior Legislative Attorney Wisconsin Legislative Reference Bureau P.O. Box 2037 Madison, WI 53701-2037 (608) 504 - 5808 tamara.dodge@legis.wisconsin.gov

Please note my new direct phone number (as of June 13, 2018).

From: LRB.Legal < lrblegal@legis.wisconsin.gov Sent: Monday, October 21, 2019 4:04 PM

To: Dodge, Tamara < <u>Tamara.Dodge@legis.wisconsin.gov</u>>

Subject: Draft review: LRB -4567/P1

Draft Requester: Sen. Scott Fitzgerald

Following is the PDF version of draft LRB -4567/P1.



2

State of Misconsin 2019 - 2020 LEGISLATURE

LRB-4567/P1

In:10/30 (Due Today)
In:10/30

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

AN ACT to create subchapter III of chapter 153 [precedes 153.85] of the statutes;

relating to: opioid data system.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. DOA must collaborate with and collect data from the Department of Health Services, the Department of Safety and Professional Services, and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill, DOA administers the contract with a vendor to operate the opioid data system, has access to the data contained in the opioid data system, and works with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible. The opioid data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill requires DOA to submit a report to JCF summarizing the information from the opioid data system and analyzing trends in that information across years of data collection.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

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

1 Section 1. Subchapter III of chapter 153 [precedes 153.85] of the statutes is 2 created to read: 3 CHAPTER 153 4 SUBCHAPTER III 5 OPIOID DATA 6 153.85 Definition; opioid data. In this subchapter, "vendor" means a person awarded the contract following a request for proposals described under s. 153.87. 7 8 153.87 Opioid data system. (1) Subject to sub. (2), the department of 9 administration shall issue a request for proposals to establish and maintain an 10 opioid data system to collect, format, analyze, and disseminate information on opioid 11 use, which shall include all of the following: 12 (a) Hospital discharge data from visits and stays related to opioid use or 13 overdose. 14 (b) Records of hospitals diverting patients to other facilities to address opioid 15 use or overdose. 16 (c) Ambulance service run data related to opioid use or overdose. (d) The number of opioid-related overdoses in the state, the number of 17 individuals who overdose, and the opioids on which the individuals overdose. 18

(e) Death records related to opioid use or overdose.

19

(h) Number of adults in the state who use opioids, the extent to which those adults use opioids, and the type of opioids used.

- (i) Number of minors in the state who use opioids, the extent to which those minors use opioids, and the type of opioids used.
- (j) Number of minors who enter the child protective services system due to opioid use by a parent or guardian, length of time those minors are in out-of-home care, and the type of reporter who notified child protective services of the needs of the minor.
- (2) (a) The department of administration shall submit the proposed request for proposals described under sub. (1) to the joint committee on finance before issuing the request for proposal. If the cochairpersons of the joint committee on finance do not notify the department of administration within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the request for proposals. If, within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph, the cochairpersons of the committee notify the department of administration that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the proposed request for proposals only upon approval by the committee.

- keep2

****Note: This draft applies the Joint Committee on Finance's passive review procedure. If you want to require the committee to meet and affirmatively approve or disapprove of the proposed request for proposals, please let me know and I can change this.

- (b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing the behavioral health status of the state's population, reducing relapse of opioid misuse, improving patient outcomes after opioid use or overdose, assisting minors who are in out-of-home care, and monitoring health costs related to substance use.
- (3) The department of administration shall collaborate with and collect data from the departments of health services, safety and professional services, and children and families and any other applicable agencies for the opioid data system under sub. (1).
- (4) (a) The department of administration shall administer the contract with the vendor to operate the opioid data system and shall have access to the data contained in the opioid data system. The department of administration shall work with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible.
- (b) The opioid data system shall allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws.
- 153.89 Reports; opioid data system. By January 31, 2022, and annually thereafter, the department of administration shall submit a report to the joint

- committee on finance summarizing the information from the opioid data system under s. 153.87 (1) and analyzing trends in that information across years of data collection.
- 4 (END)

Dodge, Tamara

From:

Liedl. Kimber

Sent:

Thursday, December 12, 2019 11:12 AM

To:

Dodge, Tamara

Subject:

RE: Draft review: LRB -4567/P2

That would be great, thanks.

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Thursday, December 12, 2019 11:11 AM

To: Liedl, Kimber < Kimberly.Liedl@legis.wisconsin.gov>

Subject: RE: Draft review: LRB -4567/P2

Hi Kimber,

I'm at NCSL in Phoenix this week, but I'm in next week and can get you an updated version of the draft as soon as I get back in the office.

Tami

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: "Liedl, Kimber" < Kimberly.Liedl@legis.wisconsin.gov>

Date: 12/12/19 10:04 AM (GMT-07:00)

To: "Dodge, Tamara" < Tamara. Dodge@legis.wisconsin.gov>

Subject: RE: Draft review: LRB -4567/P2

Hi, Tami, we would like to add a few more things into the P2 opiate database draft:

- -Number of opiate treatment centers in the state
- -Number of providers that can prescribe suboxone and the provider capacity in WI
- -Vivitrol data from DOC (number of inmates receiving vivitrol, total number of vivitrol doses administered, length of time inmates have been receiving vivitrol)

In regards to your note regarding JFC passive review in the P2, please leave it as is. Passive review is fine.

Would it be possible to get a P3 early next week?

Thanks, Kimber

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Wednesday, October 30, 2019 3:18 PM

To: Liedl, Kimber < Kimberly.Liedl@legis.wisconsin.gov>

Subject: FW: Draft review: LRB -4567/P2

Kimber,

Attached is an electronic version of the opioid portal draft. I thought I'd just send you a copy directly.

Tami

Tamara J. Dodge

Senior Legislative Attorney
Wisconsin Legislative Reference Bureau
P.O. Box 2037
Madison, WI 53701-2037
(608) 504 - 5808
tamara.dodge@legis.wisconsin.gov

Please note my new direct phone number (as of June 13, 2018).

From: LRB.Legal < lrblegal@legis.wisconsin.gov Sent: Wednesday, October 30, 2019 3:16 PM

To: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov >

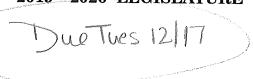
Subject: Draft review: LRB -4567/P2

Draft Requester: Sen. Scott Fitzgerald

Following is the PDF version of draft LRB -4567/P2.



State of Misconsin 2019 - 2020 LEGISLATURE



LRB-4567P2 TJD:cdc

In: 12/16

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

1 AN ACT to create subchapter III of chapter 153 [precedes 153.85] of the statutes;

2 relating to: opioid data system.

the Department of Corrections

Analysis by the Legislative Reference Bureau

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. DOA must collaborate with and collect data from the Department of Health Services, the Department of Safety and Professional Services, and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill, DOA administers the contract with a vendor to operate the opioid data system, has access to the data contained in the opioid data system, and works with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible. The opioid data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill requires DOA to submit a report to JCF summarizing the information from the opioid data system and analyzing trends in that information across years of data collection.

For further information see the ${\it state}$ fiscal estimate, which will be printed as an appendix to this bill.

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

| | enuci us jouous. |
|----|--|
| 1 | SECTION 1. Subchapter III of chapter 153 [precedes 153.85] of the statutes is |
| 2 | created to read: |
| 3 | CHAPTER 153 |
| 4 | SUBCHAPTER III |
| 5 | OPIOID DATA |
| 6 | 153.85 Definition; opioid data. In this subchapter, "vendor" means a person |
| 7 | awarded the contract following a request for proposals described under s. 153.87 . |
| 8 | 153.87 Opioid data system. (1) Subject to sub. (2), the department of |
| 9 | administration shall issue a request for proposals to establish and maintain an |
| 10 | opioid data system to collect, format, analyze, and disseminate information on opioid |
| 11 | use, which shall include all of the following: |
| 12 | (a) Hospital discharge data from visits and stays related to opioid use or |
| 13 | overdose. |
| 14 | (b) Records of hospitals diverting patients to other facilities to address opioid |
| 15 | use or overdose. |
| 16 | (c) Ambulance service run data related to opioid use or overdose. |
| 17 | (d) The number of opioid-related overdoses in the state, the number of |
| 18 | individuals who overdose, and the opioids on which the individuals overdose. |
| 19 | (e) Death records related to opioid use or overdose. |
| 20 | The number of methadone clinics in the state, the number of patients taking |
| 21 | methadone, the number of patients whose methadone dosages are in the process of (f) The number of opioid treatment centers in the StateA |
| | (9) The number of providers in this state that are allowed to prescribe a drug that is a combination of buprenorphine and naloxone and the patient capacity for those prescribers. |

- 1 being reduced, the number of patients who more than once have been on courses of
- 2 methadone for which the dosages were reduced, and the number of patients who
- 3 have discontinued methadone use due to successful completion of a treatment
- 4 program.
- 5 (i) (g) The amount of naloxone doses dispensed, the total number of naloxone doses
- 6 administered, and the number of unique patients who have received doses of
- naloxone. The
- 8 () Mumber of adults in the state who use opioids, the extent to which those
- 9 adults use opioids, and the type of opioids used.
- 10 (k) (ii) Number of minors in the state who use opioids, the extent to which those
- minors use opioids, and the type of opioids used.
- 12 (1) Number of minors who enter the child protective services system due to
- opioid use by a parent or guardian, length of time those minors are in out-of-home
- care, and the type of reporter who notified child protective services of the needs of
- 15 the minor.
- (2) (a) The department of administration shall submit the proposed request for
- proposals described under sub. (1) to the joint committee on finance before issuing
- the request for proposal. If the cochairpersons of the joint committee on finance do
- not notify the department of administration within 14 working days after the date
- 20 of the submittal of the proposed request for proposals under this paragraph that the
- 21 committee has scheduled a meeting for the purpose of reviewing the proposed
- 22 request for proposals, the department may issue the request for proposals. If, within
- 23 14 working days after the date of the submittal of the proposed request for proposals
- 24 under this paragraph, the cochairpersons of the committee notify the department of
- administration that the committee has scheduled a meeting for the purpose of

(m) The number of persons who are incarcerated who are receiving nattrexone for extended-release in an injectable suspension, the total number of closes of nattrexone for extended-release in an injectable suspension administed to persons who are incareerated in this state, and the length of time that persons who are incarcerated are receiving nattrexone for extended-release in an injectable suspension.

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reviewing the proposed request for proposals, the department may issue the proposed request for proposals only upon approval by the committee.

****Note: This draft applies the Joint Committee on Finance's passive review procedure. If you want to require the committee to meet and affirmatively approve or disapprove of the proposed request for proposals, please let me know and I can change this.

- (b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing the behavioral health status of the state's population, reducing relapse of opioid misuse, improving patient outcomes after opioid use or overdose, assisting minors who are in out-of-home care, and monitoring health costs related to substance use.
- (3) The department of administration shall collaborate with and collect data from the departments of health services, safety and professional services, and children and families and any other applicable agencies for the opioid data system under sub. (1).
- (4) (a) The department of administration shall administer the contract with the vendor to operate the opioid data system and shall have access to the data contained in the opioid data system. The department of administration shall work with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible.
- (b) The opioid data system shall allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws.

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| 153.89 Reports; opioid data system. By January 31, 2022, and annually |
|---|
| thereafter, the department of administration shall submit a report to the joint |
| committee on finance summarizing the information from the opioid data system |
| under s. 153.87 (1) and analyzing trends in that information across years of data |
| collection. |

(END)

Dodge, Tamara

From:

Liedl, Kimber

Sent:

Thursday, December 19, 2019 4:51 PM

To:

Dodge, Tamara

Subject:

Additional changes LRB -4567/P3

Follow Up Flag:

FollowUp Flagged

Flag Status:

Hi, Tami, I received feedback from others and have these additional changes to the opiate database bill draft:

Page 2 line 20: Add ownership of the treatment center so we can track trends – maybe one has a better success record

✓ Page 3 line 3: Add the number of patients successfully completing treatment (making it similar to the section on) methodone so we could compare them)

√Page 3 methodone section:

- The part about people whose doses are being decreased won't get at what we would want to know so I'd strike that. Instead, I think you could substitute the number of people who are receiving methodone treatment with those who have been receiving treatment more than 12 months, more than 36 months, more than 48 months, more than 60 months, more than 96 months and more than 120 months. I think about 10 to 20% stay on forever. But it's worth knowing that we could be keeping someone addicted to methodone when the other treatments may have long term success that doesn't require addiction for years. (I think we want to see how long people are on it - people can do it in a year or less even, but many take much longer.)
- Add the number of people who have started methodone more than once, more than 5 times. (or whatever time frame you like)
- Page 3 line13+: is this legal prescriptions, like PDMP data?

Page 3 line 21+: I don't know if DOC keeps prisoners on vivitrol or if they just put them on it at release. I thought it was just at release, such as a condition of parole? Either way, we want to track the after release use. Please add in language that tracks the vivitrol use after release

In regards to criminal records, we should also track the methodone, suboxone, etc arrests.

 \checkmark If possible, we should have them flag MA recipients at each level – such as hospitals, vital records (it comes back to MA for estate recovery), ambulances, treatment centers, etc - they all know who is on MA. I think it would let us track the cost to taxpayers better. Maybe we just say private pay, uninsured, public health care...

Please let me know if you have any questions. Thanks for all of your help with this draft, Kimber

From: LRB.Legal < lrblegal@legis.wisconsin.gov Sent: Tuesday, December 17, 2019 10:15 AM

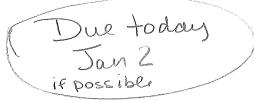
To: Sen.Fitzgerald <<u>Sen.Fitzgerald@legis.wisconsin.gov></u>

Subject: Draft review: LRB -4567/P3

Following is the PDF version of draft LRB -4567/P3.



State of Misconsin 2019 - 2020 LEGISLATURE



LRB-4567/P3 PH

In:12/30

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION



5ªV/

2



1 AN ACT to create subchapter III of chapter 153 [precedes 153.85] of the statutes;

relating to: opioid data system.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. DOA must collaborate with and collect data from the Department of Health Services, the Department of Corrections, the Department of Safety and Professional Services, and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill, DOA administers the contract with a vendor to operate the opioid data system, has access to the data contained in the opioid data system, and works with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible. The opioid data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill $requires\,DOA\,to\,submit\,a\,report\,to\,JCF\,summarizing\,the\,information\,from\,the\,opioid$ data system and analyzing trends in that information across years of data collection.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

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

| 1 | SECTION 1. Subchapter III of chapter 153 [precedes 153.85] of the statutes is |
|----|---|
| 2 | created to read: |
| 3 | CHAPTER 153 |
| 4 | SUBCHAPTER III |
| 5 | OPIOID DATA |
| 6 | 153.85 Definition; opioid data. In this subchapter, "vendor" means a person |
| 7 | awarded the contract following a request for proposals described under s. 153.87. |
| 8 | 153.87 Opioid data system. (1) Subject to sub. (2), the department of |
| 9 | administration shall issue a request for proposals to establish and maintain an |
| 10 | opioid data system to collect, format, analyze, and disseminate information on opioid |
| 11 | use, which shall include all of the following: |
| 12 | (a) Hospital discharge data from visits and stays related to opioid use or |
| 13 | overdose. |
| 14 | (b) Records of hospitals diverting patients to other facilities to address opioid |
| 15 | use or overdose. |
| 16 | (c) Ambulance service run data related to opioid use or overdose. |
| 17 | (d) The number of opioid-related overdoses in the state, the number of |
| 18 | individuals who overdose, and the opioids on which the individuals overdose. |
| 19 | (e) Death records related to opioid use or overdose. |
| 20 | (f) The number of opioid treatment centers in the state. |
| | owner or operator of each opioid treatment center 5 the |

LRB-4567/P3
TJD:cde
SECTION 1

2 (such a combination

that is a combination of buprenorphine and naloxone and the patient capacity for the number of patients taking to drug that is a formulation of buprenorphine and naloxone and the number of patients taking to drug that is a formulation of the number of patients taking to successful completion of a treatment (h) The number of methodone clinics in the state, the number of patients taking program, methodone, the number of patients whose methodone dosages are in the process of

methadone, the number of patients whose methadone dosages are in the process of being reduced, the number of patients who more than once have been on courses of methadone for which the dosages were reduced, and the number of patients who have discontinued methadone use due to successful completion of a treatment program.

- (i) The amount of naloxone doses dispensed, the total number of naloxone doses administered, and the number of unique patients who have received doses of naloxone.
- (j) The number of adults in the state who use opioids, the extent to which those adults use opioids, and the type of opioids used.
- (k) The number of minors in the state who use opioids, the extent to which those minors use opioids, and the type of opioids used.
- (L) The number of minors who enter the child protective services system due to opioid use by a parent or guardian, length of time those minors are in out-of-home care, and the type of reporter who notified child protective services of the needs of the minor.
- (m) The number of persons who are incarcerated who are receiving naltrexone for extended-release in an injectable suspension, the total number of doses of naltrexone for extended-release in an injectable suspension administered to persons who are incarcerated in this state, and the length of time that persons who are

Insert 4-3

incarcerated are receiving naltrexone for extended-release in an injectable suspension.

(2) (a) The department of administration shall submit the proposed request for proposals described under sub. (1) to the joint committee on finance before issuing the request for proposal. If the cochairpersons of the joint committee on finance do not notify the department of administration within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the request for proposals. If, within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph, the cochairpersons of the committee notify the department of administration that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the proposed request for proposals only upon approval by the committee.

(b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, corrections, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing the behavioral health status of the state's population, reducing relapse of opioid misuse, improving patient outcomes after opioid use or overdose, assisting minors who are in out-of-home care, and monitoring health costs related to substance use.

(3) The department of administration shall collaborate with and collect data from the departments of health services, corrections, safety and professional

| 1 | services, and children and families and any other applicable agencies for the opioid |
|----|--|
| 2 | data system under sub. (1). |
| 3 | (5) (a) The department of administration shall administer the contract with the |
| 4 | vendor to operate the opioid data system and shall have access to the data contained |
| 5 | in the opioid data system. The department of administration shall work with the |
| 6 | vendor to disseminate information and advanced analytics from the opioid data |
| 7 | system in as close to real time as possible. |
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| 9 | the opioid data system access to the data in the opioid data system as appropriate |
| 10 | for the agency to fulfill its functions and as allowed by state and federal |
| 11 | confidentiality laws. |
| 12 | 153.89 Reports; opioid data system. By January 31, 2022, and annually |
| 13 | thereafter, the department of administration shall submit a report to the joint |
| 14 | committee on finance summarizing the information from the opioid data system |

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collection.

under s. 153.87 (1) and analyzing trends in that information across years of data

2019-2020 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

| 1 | INSERT | 3-9 |
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| 1 | TIADELL | $u^{-}u$ |

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| 2 | , and the number of patients who are receiving methadone treatment for each |
|---|---|
| 3 | of the following durations: |

- 1. Longer than 12 months.
- 5 2. Longer than 3 years.
- 6 3. Longer than 4 years.
- 7 4. Longer than 5 years.
- 5. Longer than 8 years.
- 9 6. Longer than 10 years.
- 10 END INSERT 3-9

11 INSERT 4-3

- (m) The number of persons who are incarcerated and who are receiving naltrexone for extended-release in injectable suspension, the number of persons who are on extended supervision or probation or on parole and who are receiving extended-release naltrexone, the total number of doses of extended-release naltrexone administered to persons who are incarcerated, on extended supervision or probation, or on parole in this state, and the length of time that persons who are incarcerated, on extended supervision or probation, or on parole are receiving extended-release naltrexone.
- 20 (n) The number of arrests and convictions related to methadone and a drug that is a combination of buprenorphine and naloxone.



the homber

| 1 | (2) The opioid data system under sub. (1) shall identify, to the extent possible, |
|----|--|
| 2 | $for\ sub.\ (1)\ (a), (b), (c), (d), (e), (g), (h), (j), (k), and\ (m)\ the\ number\ of\ individuals\ who$ |
| 3 | have each of the following forms of health care coverage: |
| 4 | (a) Public health care coverage under the Medical Assistance program. |
| 5 | (b) Public health care coverage under Medicare, a veteran or military health |
| 6 | plan, or another public form of coverage other than Medical Assistance, including |
| 7 | any self-insured governmental health plan. |
| 8 | (c) Private insurance or a private heath plan. |
| 9 | (d) Self-coverage or uninsured. |
| 10 | END INSERT 4-3 |

Dodge, Tamara

From:

Liedl, Kimber

Sent:

Tuesday, January 14, 2020 3:37 PM

To:

Dodge, Tamara

Subject:

RE: Draft review: LRB -4567/P4

Hi, Tami, this is good to go. Could you please have the P4 turned into a /1?

Thanks, Kimber

From: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Sent: Friday, January 03, 2020 10:49 AM

To: Liedl, Kimber < Kimberly.Liedl@legis.wisconsin.gov>

Subject: FW: Draft review: LRB -4567/P4

Kimber,

Attached is the electronic copy of the latest version of the opioid data collection draft. As usual, let me know if you have any questions or need any changes.

Tami

Tamara J. Dodge

Senior Legislative Attorney Wisconsin Legislative Reference Bureau P.O. Box 2037 Madison, WI 53701-2037 (608) 504 - 5808 tamara.dodge@legis.wisconsin.gov

Please note my new direct phone number (as of June 13, 2018).

From: LRB.Legal < lrblegal@legis.wisconsin.gov>

Sent: Friday, January 03, 2020 10:47 AM

To: Dodge, Tamara < Tamara. Dodge@legis.wisconsin.gov>

Subject: Draft review: LRB -4567/P4

Draft Requester: Sen. Scott Fitzgerald

Following is the PDF version of draft LRB -4567/P4.



2

State of Misconsin 2019 - 2020 LEGISLATURE

LRB-4567/P4 TJD:cdc&cjs

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

 $\operatorname{AN}\operatorname{ACT}$ to create subchapter III of chapter 153 [precedes 153.85] of the statutes;

relating to: opioid data system.

Analysis by the Legislative Reference Bureau

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. DOA must collaborate with and collect data from the Department of Health Services, the Department of Corrections, the Department of Safety and Professional Services, and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill, DOA administers the contract with a vendor to operate the opioid data system, has access to the data contained in the opioid data system, and works with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible. The opioid data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill requires DOA to submit a report to JCF summarizing the information from the opioid data system and analyzing trends in that information across years of data collection.

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For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

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

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| 8 | 153.87 Opioid data system. (1) Subject to sub. (3), the department of |
| 9 | administration shall issue a request for proposals to establish and maintain an |
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| 11 | use, which shall include all of the following: |
| 12 | (a) Hospital discharge data from visits and stays related to opioid use or |
| 13 | overdose. |
| 14 | (b) Records of hospitals diverting patients to other facilities to address opioid |
| 15 | use or overdose. |
| 16 | (c) Ambulance service run data related to opioid use or overdose. |
| 17 | (d) The number of opioid-related overdoses in the state, the number of |
| 18 | individuals who overdose, and the opioids on which the individuals overdose. |
| 19 | (e) Death records related to opioid use or overdose. |
| 20 | (f) The number of opioid treatment centers in the state, by the owner or |

operator of each opioid treatment center.

| (g) The number of providers in this state that are allowed to prescribe a drug |
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| that is a combination of buprenorphine and naloxone, the patient capacity for those |
| prescribers, the number of patients taking such a combination drug, and the number |
| of patients who have discontinued such a combination drug due to successful |
| completion of a treatment program. |
| (h) The number of methadone clinics in the state, the number of patients taking |
| methadone, the number of patients who more than once have been on courses of |
| methadone, the number of patients who have discontinued methadone use due to |
| successful completion of a treatment program, and the number of patients who are |
| receiving methadone treatment for each of the following durations: |
| 1. Longer than 12 months. |
| 2. Longer than 3 years. |
| 3. Longer than 4 years. |
| 4. Longer than 5 years. |
| 5. Longer than 8 years. |
| 6. Longer than 10 years. |
| (i) The amount of naloxone doses dispensed, the total number of naloxone doses |
| administered, and the number of unique patients who have received doses of |
| naloxone. |
| (j) The number of adults in the state who use opioids, the extent to which those |
| adults use opioids, and the type of opioids used. |
| $(k) \ The \ number \ of \ minors \ in \ the \ state \ who \ use \ opioids, the \ extent \ to \ which \ those$ |
| minors use opioids, and the type of opioids used. |
| (L) The number of minors who enter the child protective services system due |

to opioid use by a parent or guardian, length of time those minors are in out-of-home

care, and the type of reporter who notified child protective services of the needs of the minor.

- (m) The number of persons who are incarcerated and who are receiving naltrexone for extended-release in injectable suspension, the number of persons who are on extended supervision or probation or on parole and who are receiving extended-release naltrexone, the total number of doses of extended-release naltrexone administered to persons who are incarcerated, on extended supervision or probation, or on parole in this state, and the length of time that persons who are incarcerated, on extended supervision or probation, or on parole are receiving extended-release naltrexone.
- (n) The number of arrests and convictions related to methadone and the number related to a drug that is a combination of buprenorphine and naloxone.
- (2) The opioid data system under sub. (1) shall identify, to the extent possible, for sub. (1) (a), (b), (c), (d), (e), (g), (h), (j), (k), and (m) the number of individuals who have each of the following forms of health care coverage:
 - (a) Public health care coverage under the Medical Assistance program.
- (b) Public health care coverage under Medicare, a veteran or military health plan, or another public form of coverage other than Medical Assistance, including any self-insured governmental health plan.
 - (c) Private insurance or a private heath plan.
 - (d) Self-coverage or uninsured.
- (3) (a) The department of administration shall submit the proposed request for proposals described under sub. (1) to the joint committee on finance before issuing the request for proposal. If the cochairpersons of the joint committee on finance do not notify the department of administration within 14 working days after the date

of the submittal of the proposed request for proposals under this paragraph that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the request for proposals. If, within 14 working days after the date of the submittal of the proposed request for proposals under this paragraph, the cochairpersons of the committee notify the department of administration that the committee has scheduled a meeting for the purpose of reviewing the proposed request for proposals, the department may issue the proposed request for proposals only upon approval by the committee.

- (b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, corrections, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing the behavioral health status of the state's population, reducing relapse of opioid misuse, improving patient outcomes after opioid use or overdose, assisting minors who are in out-of-home care, and monitoring health costs related to substance use.
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| the opioid data system access to the data in the opioid data system as appropriate | | | | | | |
| for the agency to fulfill its functions and as allowed by state and federa | | | | | | |
| confidentiality laws. | | | | | | |

153.89 Reports; opioid data system. By January 31, 2022, and annually thereafter, the department of administration shall submit a report to the joint committee on finance summarizing the information from the opioid data system under s. 153.87 (1) and analyzing trends in that information across years of data collection.

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For 1) hospital discharge odiversion 3) # overduses 4) cleaters, 5) treatment centers () adult users, 7) minor users, and (7) arrest & convictions Also and the relevant above to sub (2) DOJ to agencies



State of Misconsin 2019 - 2020 LEGISLATURE

LRB-4567(1), TJD:cdc&cjs

BILL 2019

AN ACT to create subchapter III of chapter 153 [precedes 153.85] of the statutes; 1

- and methomphetamine relating to: opioid data system. 2

In:1/27

and methamphetamine

and methamphotamine Analysis by the Legislative Reference Bureau

USP 2X

This bill requires the Department of Administration to issue a request for proposals, subject to approval by the Joint Committee on Finance under its passive review process, to establish and maintain an opioid data system to collect, format, analyze, and disseminate information on opioid use as specified in the bill. DOA must collaborate with and collect data from the Department of Health Services, the and the Department of Children and Families and any other applicable agencies for the opioid data system. Under the bill DOA administration of the contraction of the bill DOA administration of the contraction of the contra the Department of Children and Famules and opioid data system. Under the bill, DOA administers the contract with a venue operate the opioid data system, has access to the data contained in the opioid data may be and works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor to disseminate information and advanced operate the opioid data works with the vendor operate the opioid data works with the opioid data work data system must allow the state agencies that submit data to the opioid data system access to the data in the opioid data system as appropriate for the agency to fulfill its functions and as allowed by state and federal confidentiality laws. The bill requires DOA to submit a report to JCF summarizing the information from the opioid data system and analyzing trends in that information across years of data collection.

and methamphetamine

BILL

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

| 1 | SECTION 1. Subchapter III of chapter 153 [precedes 153.85] of the statutes is | | | |
|----------|--|--|--|--|
| 2 | created to read: | | | |
| 3 | CHAPTER 153 | | | |
| 4 | SUBCHAPTER III AND METHAMPHETAMINE | | | |
| 5 6 | OPIOID DATA and methamphetaming 153.85 Definition; opioid data. In this subchapter, "vendor" means a person | | | |
| 7 8 | awarded the contract following a request for proposals described under s. 153.87. and methamphetomine 153.87 Opioid data system. (1) Subject to sub. (3), the department of | | | |
| 9 | · · · · · · · · · · · · · · · · · · · | | | |
| 10 | cand methamphetamine - | | | |
| 11 | use, which shall include all of the following: | | | |
| 12 13 | (A) Hospital discharge data from visits and stays related to | | | |
| 14 15 | (c) Records of hospitals diverting patients to other facilities to address opioid use or overdose. (d) Records of hospitals diverting patients to other facilities to | | | |
| 16 | The construction of the co | | | |
| 17 | (1) -(d) The number of opioid-related overdoses in the state, the number of | | | |
| 18 | individuals who overdose, and the opioids on which the individuals overdose. | | | |
| 19 | Death records related to opioid use or overdose. | | | |
| 20 | The number of opioid treatment centers in the state, by the owner or | | | |
| 21 | operator of each opioid treatment center. (i) Death records related to methamphetamine of individuals who overdose on methamphetamines of overdose or methamphetamines on the forms of methamphetamines on overdose. | | | |

BILL (K) The number of methamphetamine treatment conters SEC in the state, by the owner or operator of each methamphetamine treatment center. (g) The number of providers in this state that are allowed to prescribe a drug 2 that is a combination of buprenorphine and naloxone, the patient capacity for those 3 prescribers, the number of patients taking such a combination drug, and the number 4 of patients who have discontinued such a combination drug due to successful 5 completion of a treatment program. (h) The number of methadone clinics in the state, the number of patients taking 7 methadone, the number of patients who more than once have been on courses of 8 methadone, the number of patients who have discontinued methadone use due to 9 successful completion of a treatment program, and the number of patients who are 10 receiving methodone treatment for each of the following durations: 11 1. Longer than 12 months. 12 2. Longer than 3 years. 13 3. Longer than 4 years. 14 4. Longer than 5 years. 15 5. Longer than 8 years. 16 6. Longer than 10 years. (i) The amount of naloxone doses dispensed, the total number of naloxone doses 17 18 administered, and the number of unique patients who have received doses of 19 naloxone. (p) (j)) The number of adults in the state who use opioids, the extent to which those 20 21 adults use opioids, and the type of opioids used. 22 (k) The number of minors in the state who use opioids, the extent to which those 23 minors use opioids, and the type of opioids used. The number of minors who enter the child protective services system due 25 to opioid use by a parent or guardian, length of time those minors are in out-of-home (9) The number of adults in the State (S) The number of minors in the state who who use methamphetamines, the extent to which those doubts use methamphetamines, use methamphetamines, the extent to which those minors use methamphetamines, and the forms of methamphetamines and the forms of methamphetamines USPd.

2019 - 2020 Legislature

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The number of persons who are incarcerated and who are receiving naltrexone for extended-release in injectable suspension, the number of persons who are on extended supervision or probation or on parole and who are receiving extended-release naltrexone, the total number of doses of extended-release naltrexone administered to persons who are incarcerated, on extended supervision or probation, or on parole in this state, and the length of time that persons who are incarcerated, on extended supervision or probation, or on parole are receiving extended-release naltrexone.

- 11 (v) (n) The number of arrests and convictions related to methadone and the number related to a drug that is a combination of buprenorphine and naloxone.
 - - (a) Public health care coverage under the Medical Assistance program.
 - (b) Public health care coverage under Medicare, a veteran or military health plan, or another public form of coverage other than Medical Assistance, including any self-insured governmental health plan.
 - (c) Private insurance or a private heath plan.
 - (d) Self-coverage or uninsured.
 - (3) (a) The department of administration shall submit the proposed request for proposals described under sub. (1) to the joint committee on finance before issuing the request for proposal. If the cochairpersons of the joint committee on finance do not notify the department of administration within 14 working days after the date

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| of the submittal of the proposed request for proposals under this paragraph that the |
|---|
| committee has scheduled a meeting for the purpose of reviewing the proposed |
| request for proposals, the department may issue the request for proposals. If, within |
| 14 working days after the date of the submittal of the proposed request for proposals |
| under this paragraph, the cochairpersons of the committee notify the department of |
| administration that the committee has scheduled a meeting for the purpose of |
| reviewing the proposed request for proposals, the department may issue the |
| proposed request for proposals only upon approval by the committee. $justile$ |

- (b) At the time the department of administration submits the proposal under par. (a), the departments of health services, children and families, corrections, and safety and professional services may submit to the joint committee on finance suggestions of opioid-related information to collect, analyze, and disseminate in addition to information specified under sub. (1) to assist the agencies in analyzing the behavioral health status of the state's population, reducing relapse of opioid misuse, improving patient outcomes after opioid use or overdose, assisting minors who are in out-of-home care, and monitoring health costs related to substance use.
- (4) The department of administration shall collaborate with and collect data from the departments of health services, corrections, safety and professional services, and children and families and any other applicable agencies for the opioid data system under sub. (1).
- (5) (a) The department of administration shall administer the contract with the vendor to operate the opioid data system and shall have access to the data contained in the opioid data system. The department of administration shall work with the vendor to disseminate information and advanced analytics from the opioid data system in as close to real time as possible.

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| and methamphe tamine | SECTION 1 | | | |
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| (b) The opioid data system shall allow the state agencies the opioid data system access to the data in the opioid data system. | hat submit data to nethamphetamine em as appropriate | | | |
| for the agency to fulfill its functions and as allowed by state and federal | | | | |
| confidentiality laws. 153.89 Reports; opioid data system. By January 31, 2 | 022, and annually | | | |
| thereafter, the department of administration shall submit a report to the joint committee on finance summarizing the information from the opioid data system | | | | |
| under s. 153.87 (1) and analyzing trends in that information across years of data | | | | |
| collection. | | | | |

(END)

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Section 1. Fiscal changes.

(1) Opioid and methamphetamine data. In the schedule under s. 20.005 (3) for the appropriation to the department of administration under s. 20.505 (1) (a), the dollar amount for fiscal year 2020–21 is increased by \$1,500,000 as one-time funding to implement the opioid and methamphetamine data system under subch. III of ch. 153. Notwithstanding s. 16.42 (1) (e), in submitting information under s. 16.42 for the 2021–23 biennial budget bill, the department of administration shall submit information concerning the appropriation under s. 20.505 (1) (a) as though the increase in the dollar amount of that appropriation under this subsection had not occurred.

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