

1 under sub. (1) with respect to a particular coverage option may impose an affiliation
2 period for that coverage option, but only if all of the following apply:

3 SECTION 2031. 632.748 (2) of the statutes is amended to read:

4 632.748 (2) An insurer offering a group health benefit plan may not require any
5 individual, as a condition of enrollment or continued enrollment under the plan, to
6 pay, on the basis of any health status-related factor with respect to the individual
7 or a dependent of the individual, a premium or contribution or a deductible,
8 copayment, or coinsurance amount that is greater than the premium or contribution
9 or deductible, copayment, or coinsurance amount respectively for a similarly
10 situated individual enrolled under the plan.

11 SECTION 2032. 632.76 (2) (a) and (ac) 1. and 2. of the statutes are amended to
12 read:

13 632.76 (2) (a) No claim for loss incurred or disability commencing after 2 years
14 from the date of issue of the policy may be reduced or denied on the ground that a
15 disease or physical condition existed prior to the effective date of coverage, unless the
16 condition was excluded from coverage by name or specific description by a provision
17 effective on the date of loss. This paragraph does not apply to a group health benefit
18 plan, as defined in s. 632.745 (9), which is subject to s. 632.746, a disability insurance
19 policy, as defined in s. 632.895 (1) (a), or a self-insured health plan, as defined in s.
20 632.85 (1) (c).

21 (ac) 1. ~~Notwithstanding par. (a), no~~ No claim or loss incurred or disability
22 commencing ~~after 12 months from the date of issue of~~ under an individual disability
23 insurance policy, as defined in s. 632.895 (1) (a), may be reduced or denied on the
24 ground that a disease or physical condition existed prior to the effective date of

1 coverage, unless the condition was excluded from coverage by name or specific
2 description by a provision effective on the date of the loss.

3 2. ~~Except as provided in subd. 3., an~~ An individual disability insurance policy,
4 as defined in s. 632.895 (1) (a), ~~other than a short-term policy subject to s. 632.7495~~
5 ~~(4) and (5),~~ may not define a preexisting condition more restrictively than a condition
6 that was present before the date of enrollment for the coverage, whether physical or
7 mental, regardless of the cause of the condition, ~~for which and regardless of whether~~
8 medical advice, diagnosis, care, or treatment was recommended or received ~~within~~
9 ~~12 months before the effective date of coverage.~~

10 **SECTION 2033.** 632.76 (2) (ac) 3. of the statutes is repealed.

11 **SECTION 2034.** 632.795 (4) (a) of the statutes is amended to read:

12 632.795 (4) (a) An insurer subject to sub. (2) shall provide coverage under the
13 same policy form and for the same premium as it originally offered in the most recent
14 enrollment period, subject only to the medical underwriting used in that enrollment
15 period. Unless otherwise prescribed by rule, the insurer may apply deductibles,
16 ~~preexisting condition limitations,~~ waiting periods, or other limits only to the extent
17 that they would have been applicable had coverage been extended at the time of the
18 most recent enrollment period and with credit for the satisfaction or partial
19 satisfaction of similar provisions under the liquidated insurer's policy or plan. The
20 insurer may exclude coverage of claims that are payable by a solvent insurer under
21 insolvency coverage required by the commissioner or by the insurance regulator of
22 another jurisdiction. Coverage shall be effective on the date that the liquidated
23 insurer's coverage terminates.

24 **SECTION 2035.** 632.796 of the statutes is created to read:

1 **632.796 Drug cost report. (1) DEFINITION.** In this section, “disability
2 insurance policy” has the meaning given in s. 632.895 (1) (a).

3 **(2) REPORT REQUIRED.** Annually, at the time the insurer files its rate request
4 with the commissioner, each insurer that offers a disability insurance policy that
5 covers prescription drugs shall submit to the commissioner a report that identifies
6 the 25 prescription drugs that are the highest cost to the insurer and the 25
7 prescription drugs that have the highest cost increases over the 12 months before the
8 submission of the report.

9 **SECTION 2036.** 632.865 (3) of the statutes is created to read:

10 **632.865 (3) REGISTRATION REQUIRED.** (a) No person may perform any activities
11 of a pharmacy benefit manager in this state without first registering with the
12 commissioner under this subsection.

13 (b) The commissioner shall establish a registration procedure for pharmacy
14 benefit managers. The commissioner may promulgate any rules necessary to
15 implement the registration procedure under this paragraph.

16 **SECTION 2037.** 632.866 of the statutes is created to read:

17 **632.866 Prescription drug cost reporting. (1) DEFINITIONS.** In this section:

18 (a) “Brand-name drug” means a prescription drug approved under 21 USC 355

19 (b) or 42 USC 262.

20 (b) “Covered hospital” means an entity described in 42 USC 256b (a) (4) (L) to
21 (N) that participates in the federal drug-pricing program under 42 USC 256b.

22 (c) “Disability insurance policy” has the meaning given in s. 632.895 (1) (a).

23 (d) “Generic drug” means a prescription drug approved under 21 USC 355 (j).

1 (e) "Manufacturer" has the meaning given in s. 450.01 (12). "Manufacturer"
2 does not include an entity that is engaged only in the dispensing, as defined in s.
3 450.01 (7), of a brand-name drug or a generic drug.

4 (f) "Manufacturer-sponsored assistance program" means a program offered by
5 a manufacturer or an intermediary under contract with a manufacturer through
6 which a brand-name drug or a generic drug is provided to a patient at no charge or
7 at a discount.

8 (g) "Margin" means, for a covered hospital, the difference between the net cost
9 of a brand-name drug or generic drug covered under the federal drug-pricing
10 program under 42 USC 256b and the net payment by the covered hospital for that
11 brand-name drug or generic drug.

12 (h) "Net payment" means the amount paid for a brand-name drug or generic
13 drug after all discounts and rebates have been applied.

14 (i) "Pharmacy benefit manager" has the meaning given in s. 632.865 (1) (c).

15 (j) "Wholesale acquisition cost" means the most recently reported
16 manufacturer list or catalog price for a brand-name drug or a generic drug available
17 to wholesalers or direct purchasers in the United States, before application of
18 discounts, rebates, or reductions in price.

19 **(2) PRICE INCREASE OR INTRODUCTION NOTICE; JUSTIFICATION REPORT.** (a) A
20 manufacturer shall notify the commissioner if it is increasing the wholesale
21 acquisition cost of a brand-name drug on the market in this state by more than 10
22 percent or by more than \$10,000 during any 12-month period or if it intends to
23 introduce to market in this state a brand-name drug that has an annual wholesale
24 acquisition cost of \$30,000 or more.

1 (b) A manufacturer shall notify the commissioner if it is increasing the
2 wholesale acquisition cost of a generic drug by more than 25 percent or by more than
3 \$300 during any 12-month period or if it intends to introduce to market a generic
4 drug that has an annual wholesale acquisition cost of \$3,000 or more.

5 (c) The manufacturer shall provide the notice under par. (a) or (b) in writing
6 at least 30 days before the planned effective date of the cost increase or drug
7 introduction with a justification that includes all documents and research related to
8 the manufacturer's selection of the cost increase or introduction price and a
9 description of life cycle management, market competition and context, and
10 estimated value or cost-effectiveness of the product.

11 **(3) NET PRICES PAID BY PHARMACY BENEFIT MANAGERS.** By March 1 annually, the
12 manufacturer shall report to the commissioner the value of price concessions,
13 expressed as a percentage of the wholesale acquisition cost, provided to each
14 pharmacy benefit manager for each drug sold in this state.

15 **(4) REBATES AND PRICE CONCESSIONS.** By March 1 annually, each pharmacy
16 benefit manager shall report to the commissioner the amount received from
17 manufacturers as drug rebates and the value of price concessions, expressed as a
18 percentage of the wholesale acquisition cost, provided by manufacturers for each
19 drug.

20 **(5) HOSPITAL MARGIN SPENDING.** By March 1 annually, each covered hospital
21 operating in this state shall report to the commissioner the per unit margin for each
22 drug covered under the federal drug pricing program under 42 USC 256b dispensed
23 in the previous year multiplied by the number of units dispensed at that margin and
24 how the margin revenue was used.

1 **(6) MANUFACTURER-SPONSORED ASSISTANCE PROGRAMS.** By March 1 annually,
2 each manufacturer shall provide the commissioner with a description of each
3 manufacturer-sponsored patient assistance program in effect during the previous
4 year that includes all of the following:

5 (a) The terms of the programs.

6 (b) The number of prescriptions provided to state residents under the program.

7 (c) The total market value of assistance provided to residents of this state under
8 the program.

9 **(7) CERTIFICATION AND PENALTIES FOR NONCOMPLIANCE.** Each manufacturer and
10 covered hospital that is required to report under this section shall certify each report
11 as accurate under the penalty of perjury. A manufacturer or covered hospital that
12 fails to submit a report required under this section is subject to a forfeiture of no more
13 than \$10,000 each day the report is overdue.

14 **(8) HEARING AND PUBLIC REPORTING.** (a) The commissioner shall publicly post
15 manufacturer price justification documents and covered hospital documentation of
16 how each hospital spends the margin revenue. The commissioner shall keep any
17 trade secret or proprietary information confidential.

18 (b) The commissioner shall analyze data collected under this section and
19 publish annually a report on emerging trends in prescription prices and price
20 increases, and shall annually conduct a public hearing based on the analysis under
21 this paragraph. The report under this paragraph shall include analysis of
22 manufacturer prices and price increases, analysis of hospital-specific margins and
23 how that revenue is spent or allocated on a hospital-specific basis, and analysis of
24 how pharmacy benefit manager discounts and net costs compare to retail prices paid
25 by patients.

1 **(9) ALLOWING COST DISCLOSURE TO INSURED.** The commissioner shall ensure that
2 every disability insurance policy that covers prescription drugs or biological products
3 does not restrict a pharmacy or pharmacist that dispenses a prescription drug or
4 biological product from informing and does not penalize a pharmacy or pharmacist
5 for informing an insured under a policy of a difference between the negotiated price
6 of, or copayment or coinsurance for, the drug or biological product under the policy
7 and the price the insured would pay for the drug or biological product if the insured
8 obtained the drug or biological product without using any health insurance coverage.

9 **SECTION 2038.** 632.87 (4) of the statutes is amended to read:

10 632.87 (4) No policy, plan or contract may exclude coverage for diagnosis and
11 treatment of a condition or complaint by a licensed dentist or dental therapist within
12 the scope of the dentist's or dental therapist's license, if the policy, plan or contract
13 covers diagnosis and treatment of the condition or complaint by another health care
14 provider, as defined in s. 146.81 (1) (a) to (p).

15 **SECTION 2039.** 632.895 (8) (d) of the statutes is amended to read:

16 632.895 (8) (d) Coverage is required under this subsection despite whether the
17 woman shows any symptoms of breast cancer. Except as provided in pars. (b), (c), and
18 (e), coverage under this subsection may only be subject to exclusions and limitations,
19 including ~~deductibles, copayments and~~ restrictions on excessive charges, that are
20 applied to other radiological examinations covered under the disability insurance
21 policy. Coverage under this subsection may not be subject to any deductibles,
22 copayments, or coinsurance.

23 **SECTION 2040.** 632.895 (13m) of the statutes is created to read:

24 632.895 (13m) PREVENTIVE SERVICES. (a) In this section, "self-insured health
25 plan" has the meaning given in s. 632.85 (1) (c).

1 (b) Every disability insurance policy, except any disability insurance policy that
2 is described in s. 632.745 (11) (b) 1. to 12., and every self-insured health plan shall
3 provide coverage for all of the following preventive services:

4 1. Mammography in accordance with sub. (8).

5 2. Genetic breast cancer screening and counseling and preventive medication
6 for adult women at high risk for breast cancer.

7 3. Papanicolaou test for cancer screening for women 21 years of age or older
8 with an intact cervix.

9 4. Human papillomavirus testing for women who have attained the age of 30
10 years but have not attained the age of 66 years.

11 5. Colorectal cancer screening in accordance with sub. (16m).

12 6. Annual tomography for lung cancer screening for adults who have attained
13 the age of 55 years but have not attained the age of 80 years and who have health
14 histories demonstrating a risk for lung cancer.

15 7. Skin cancer screening for individuals who have attained the age of 10 years
16 but have not attained the age of 22 years.

17 8. Counseling for skin cancer prevention for adults who have attained the age
18 of 18 years but have not attained the age of 25 years.

19 9. Abdominal aortic aneurysm screening for men who have attained the age of
20 65 years but have not attained the age of 75 years and who have ever smoked.

21 10. Hypertension screening for adults and blood pressure testing for adults, for
22 children under the age of 3 years who are at high risk for hypertension, and for
23 children 3 years of age or older.

24 11. Lipid disorder screening for minors 2 years of age or older, adults 20 years
25 of age or older at high risk for lipid disorders, and all men 35 years of age or older.

1 12. Aspirin therapy for cardiovascular health for adults who have attained the
2 age of 55 years but have not attained the age of 80 years and for men who have
3 attained the age of 45 years but have not attained the age of 55 years.

4 13. Behavioral counseling for cardiovascular health for adults who are
5 overweight or obese and who have risk factors for cardiovascular disease.

6 14. Type II diabetes screening for adults with elevated blood pressure.

7 15. Depression screening for minors 11 years of age or older and for adults when
8 follow-up supports are available.

9 16. Hepatitis B screening for minors at high risk for infection and adults at high
10 risk for infection.

11 17. Hepatitis C screening for adults at high risk for infection and one-time
12 hepatitis C screening for adults born in any year from 1945 to 1965.

13 18. Obesity screening and management for all minors and adults with a body
14 mass index indicating obesity, counseling and behavioral interventions for obese
15 minors who are 6 years of age or older, and referral for intervention for obesity for
16 adults with a body mass index of 30 kilograms per square meter or higher.

17 19. Osteoporosis screening for all women 65 years of age or older and for women
18 at high risk for osteoporosis under the age of 65 years.

19 20. Immunizations in accordance with sub. (14).

20 21. Anemia screening for individuals 6 months of age or older and iron
21 supplements for individuals at high risk for anemia and who have attained the age
22 of 6 months but have not attained the age of 12 months.

23 22. Fluoride varnish for prevention of tooth decay for minors at the age of
24 eruption of their primary teeth.

1 23. Fluoride supplements for prevention of tooth decay for minors 6 months of
2 age or older who do not have fluoride in their water source.

3 24. Gonorrhea prophylaxis treatment for newborns.

4 25. Health history and physical exams for prenatal visits and for minors.

5 26. Length and weight measurements for newborns and height and weight
6 measurements for minors.

7 27. Head circumference and weight-for-length measurements for newborns
8 and minors who have not attained the age of 3 years.

9 28. Body mass index for minors 2 years of age or older.

10 29. Blood pressure measurements for minors 3 years of age or older and a blood
11 pressure risk assessment at birth.

12 30. Risk assessment and referral for oral health issues for minors who have
13 attained the age of 6 months but have not attained the age of 7 years.

14 31. Blood screening for newborns and minors who have not attained the age of
15 2 months.

16 32. Screening for critical congenital health defects for newborns.

17 33. Lead screenings in accordance with sub. (10).

18 34. Metabolic and hemoglobin screening and screening for phenylketonuria,
19 sickle cell anemia, and congenital hypothyroidism for minors including newborns.

20 35. Tuberculin skin test based on risk assessment for minors one month of age
21 or older.

22 36. Tobacco counseling and cessation interventions for individuals who are 5
23 years of age or older.

24 37. Vision and hearing screening and assessment for minors including
25 newborns.

1 38. Sexually transmitted infection and human immunodeficiency virus
2 counseling for sexually active minors.

3 39. Risk assessment for sexually transmitted infection for minors who are 10
4 years of age or older and screening for sexually transmitted infection for minors who
5 are 16 years of age or older.

6 40. Alcohol misuse screening and counseling for minors 11 years of age or older.

7 41. Autism screening for minors who have attained the age of 18 months but
8 have not attained the age of 25 months.

9 42. Developmental screening and surveillance for minors including newborns.

10 43. Psychosocial and behavioral assessment for minors including newborns.

11 44. Alcohol misuse screening and counseling for pregnant adults and a risk
12 assessment for all adults.

13 45. Fall prevention and counseling and preventive medication for fall
14 prevention for community-dwelling adults 65 years of age or older.

15 46. Screening and counseling for intimate partner violence for adult women.

16 47. Well-woman visits for women who have attained the age of 18 years but
17 have not attained the age of 65 years and well-woman visits for recommended
18 preventive services, preconception care, and prenatal care.

19 48. Counseling on, consultations with a trained provider on, and equipment
20 rental for breastfeeding for pregnant and lactating women.

21 49. Folic acid supplement for adult women with reproductive capacity.

22 50. Iron deficiency anemia screening for pregnant and lactating women.

23 51. Preeclampsia preventive medicine for pregnant adult women at high risk
24 for preeclampsia.

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SECTION 2040

1 52. Low-dose aspirin after 12 weeks of gestation for pregnant women at high
2 risk for miscarriage, preeclampsia, or clotting disorders.

3 53. Screenings for hepatitis B and bacteriuria for pregnant women.

4 54. Screening for gonorrhea for pregnant and sexually active females 24 years
5 of age or younger and females older than 24 years of age who are at risk for infection.

6 55. Screening for chlamydia for pregnant and sexually active females 24 years
7 of age and younger and females older than 24 years of age who are at risk for
8 infection.

9 56. Screening for syphilis for pregnant women and adults who are at high risk
10 for infection.

11 57. Human immunodeficiency virus screening for adults who have attained the
12 age of 15 years but have not attained the age of 66 years and individuals at high risk
13 of infection who are younger than 15 years of age or older than 65 years of age.

14 58. All contraceptives and services in accordance with sub. (17).

15 59. Any services not already specified under this paragraph having an A or B
16 rating in current recommendations from the U.S. preventive services task force.

17 60. Any preventive services not already specified under this paragraph that are
18 recommended by the federal health resources and services administration's Bright
19 Futures project.

20 61. Any immunizations, not already specified under sub. (14), that are
21 recommended and determined to be for routine use by the federal advisory
22 committee on immunization practices.

23 (c) Subject to par. (d), no disability insurance policy and no self-insured health
24 plan may subject the coverage of any of the preventive services under par. (b) to any
25 deductibles, copayments, or coinsurance under the policy or plan.

1 (d) 1. If an office visit and a preventive service specified under par. (b) are billed
2 separately by the health care provider, the disability insurance policy or self-insured
3 health plan may apply deductibles to and impose copayments or coinsurance on the
4 office visit but not on the preventive service.

5 2. If the primary reason for an office visit is not to obtain a preventive service,
6 the disability insurance policy or self-insured health plan may apply deductibles to
7 and impose copayments or coinsurance on the office visit.

8 3. Except as otherwise provided in this subdivision, if a preventive service
9 specified under par. (b) is provided by a health care provider that is outside the
10 disability insurance policy's or self-insured health plan's network of providers, the
11 policy or plan may apply deductibles to and impose copayments or coinsurance on the
12 office visit and the preventive service. If a preventive service specified under par. (b)
13 is provided by a health care provider that is outside the disability insurance policy's
14 or self-insured health plan's network of providers because there is no available
15 health care provider in the policy's or plan's network of providers that provides the
16 preventive service, the policy or plan may not apply deductibles to or impose
17 copayments or coinsurance on the preventive service.

18 4. If multiple well-woman visits described under par. (b) 47. are required to
19 fulfill all necessary preventive services and are in accordance with clinical
20 recommendations, the disability insurance policy or self-insured health plan may
21 not apply a deductible to or impose a copayment or coinsurance on any of those
22 well-woman visits.

23 **SECTION 2041.** 632.895 (14) (a) 1. i. and j. of the statutes are amended to read:

24 632.895 (14) (a) 1. i. Hepatitis A and B.

25 j. Varicella and herpes zoster.

1 **SECTION 2042.** 632.895 (14) (a) 1. k. to o. of the statutes are created to read:

2 632.895 (14) (a) 1. k. Human papillomavirus.

3 L. Meningococcal meningitis.

4 m. Pneumococcal pneumonia.

5 n. Influenza.

6 o. Rotavirus.

7 **SECTION 2043.** 632.895 (14) (b) of the statutes is amended to read:

8 632.895 (14) (b) Except as provided in par. (d), every disability insurance policy,
9 and every self-insured health plan of the state or a county, city, town, village, or
10 school district, ~~that provides coverage for a dependent of the insured shall provide~~
11 coverage of appropriate and necessary immunizations, ~~from birth to the age of 6~~
12 years, ~~for an insured or plan participant, including a dependent who is a child of the~~
13 insured or plan participant.

14 **SECTION 2044.** 632.895 (14) (c) of the statutes is amended to read:

15 632.895 (14) (c) The coverage required under par. (b) may not be subject to any
16 deductibles, copayments, or coinsurance under the policy or plan. ~~This paragraph~~
17 ~~applies to a defined network plan, as defined in s. 609.01 (1b), only with respect to~~
18 ~~appropriate and necessary immunizations provided by providers participating, as~~
19 ~~defined in s. 609.01 (3m), in the plan.~~

20 **SECTION 2045.** 632.895 (14) (d) 3. of the statutes is amended to read:

21 632.895 (14) (d) 3. A health care plan offered by a limited service health
22 organization, as defined in s. 609.01 (3), ~~or by a preferred provider plan, as defined~~
23 ~~in s. 609.01 (4), that is not a defined network plan, as defined in s. 609.01 (1b).~~

24 **SECTION 2046.** 632.895 (14m) of the statutes is created to read:

1 632.895 (14m) ESSENTIAL HEALTH BENEFITS. (a) In this subsection,
2 "self-insured health plan" has the meaning given in s. 632.85 (1) (c).

3 (b) On a date specified by the commissioner, by rule, every disability insurance
4 policy, except as provided in par. (g), and every self-insured health plan shall provide
5 coverage for essential health benefits as determined by the commissioner, by rule,
6 subject to par. (c).

7 (c) In determining the essential health benefits for which coverage is required
8 under par. (b), the commissioner shall do all of the following:

9 1. Include benefits, items, and services in, at least, all of the following
10 categories:

- 11 a. Ambulatory patient services.
12 b. Emergency services.
13 c. Hospitalization.
14 d. Maternity and newborn care.
15 e. Mental health and substance use disorder services, including behavioral
16 health treatment.
17 f. Prescription drugs.
18 g. Rehabilitative and habilitative services and devices.
19 h. Laboratory services.
20 i. Preventive and wellness services and chronic disease management.
21 j. Pediatric services, including oral and vision care.

22 2. Conduct a survey of employer-sponsored coverage to determine benefits
23 typically covered by employers and ensure that the scope of essential health benefits
24 for which coverage is required under this subsection is equal to the scope of benefits

1 covered under a typical disability insurance policy offered by an employer to its
2 employees.

3 3. Ensure that essential health benefits reflect a balance among the categories
4 described in subd. 1. such that benefits are not unduly weighted toward one category.

5 4. Ensure that essential health benefit coverage is provided with no or limited
6 cost-sharing requirements.

7 5. Require that disability insurance policies and self-insured health plans do
8 not make coverage decisions, determine reimbursement rates, establish incentive
9 programs, or design benefits in ways that discriminate against individuals because
10 of their age, disability, or expected length of life.

11 6. Establish essential health benefits in a way that takes into account the
12 health care needs of diverse segments of the population, including women, children,
13 persons with disabilities, and other groups.

14 7. Ensure that essential health benefits established under this subsection are
15 not subject to a coverage denial based on an insured's or plan participant's age,
16 expected length of life, present or predicted disability, degree of dependency on
17 medical care, or quality of life.

18 8. Require that disability insurance policies and self-insured health plans
19 cover emergency department services that are essential health benefits without
20 imposing any requirement to obtain prior authorization for those services and
21 without limiting coverage for services provided by an emergency services provider
22 that is not in the provider network of a policy or plan in a way that is more restrictive
23 than requirements or limitations that apply to emergency services provided by a
24 provider that is in the provider network of the policy or plan.

1 9. Require a disability insurance policy or self-insured health plan to apply to
2 emergency department services that are essential health benefits provided by an
3 emergency department provider that is not in the provider network of the policy or
4 plan the same copayment amount or coinsurance rate that applies if those services
5 are provided by a provider that is in the provider network of the policy or plan.

6 (d) The commissioner shall periodically update, by rule, the essential health
7 benefits under this subsection to address any gaps in access to coverage.

8 (e) If an essential health benefit is also subject to mandated coverage elsewhere
9 under this section and the coverage requirements are not identical, the disability
10 insurance policy or self-insured health plan shall provide coverage under whichever
11 subsection provides the insured or plan participant with more comprehensive
12 coverage of the medical condition, item, or service.

13 (f) Nothing in this subsection or rules promulgated under this subsection
14 prohibits a disability insurance policy or a self-insured health plan from providing
15 benefits in excess of the essential health benefit coverage required under this
16 subsection.

17 (g) This subsection does not apply to any disability insurance policy that is
18 described in s. 632.745 (11) (b) 1. to 12.

19 **SECTION 2047.** 632.895 (16m) (b) of the statutes is amended to read:

20 632.895 (16m) (b) The coverage required under this subsection may be subject
21 to any limitations, or exclusions, ~~or cost-sharing provisions~~ that apply generally
22 under the disability insurance policy or self-insured health plan. The coverage
23 required under this subsection may not be subject to any deductibles, copayments,
24 or coinsurance.

25 **SECTION 2048.** 632.895 (17) (b) 2. of the statutes is amended to read:

1 632.895 (17) (b) 2. Outpatient consultations, examinations, procedures, and
2 medical services that are necessary to prescribe, administer, maintain, or remove a
3 contraceptive, ~~if covered for any other drug benefits under the policy or plan~~
4 sterilization procedures, and patient education and counseling for all females with
5 reproductive capacity.

6 **SECTION 2049.** 632.895 (17) (c) of the statutes is amended to read:

7 632.895 (17) (c) Coverage under par. (b) may be subject only to the exclusions,
8 and limitations, or cost-sharing provisions that apply generally to the coverage of
9 outpatient health care services, preventive treatments and services, or prescription
10 drugs and devices that is provided under the policy or self-insured health plan. A
11 disability insurance policy or self-insured health plan may not apply a deductible or
12 impose a copayment or coinsurance to at least one of each type of contraceptive
13 method approved by the federal food and drug administration for which coverage is
14 required under this subsection. The disability insurance policy or self-insured
15 health plan may apply reasonable medical management to a method of contraception
16 to limit coverage under this subsection that is provided without being subject to a
17 deductible, copayment, or coinsurance to prescription drugs without a brand name.
18 The disability insurance policy or self-insured health plan may apply a deductible
19 or impose a copayment or coinsurance for coverage of a contraceptive that is
20 prescribed for a medical need if the services for the medical need would otherwise be
21 subject to a deductible, copayment, or coinsurance.

22 **SECTION 2050.** 632.897 (11) (a) of the statutes is amended to read:

23 632.897 (11) (a) Notwithstanding subs. (2) to (10), the commissioner may
24 promulgate rules establishing standards requiring insurers to provide continuation
25 of coverage for any individual covered at any time under a group policy who is a

1 terminated insured or an eligible individual under any federal program that
2 provides for a federal premium subsidy for individuals covered under continuation
3 of coverage under a group policy, including rules governing election or extension of
4 election periods, notice, rates, premiums, premium payment, ~~application of~~
5 ~~preexisting condition exclusions~~, election of alternative coverage, and status as an
6 eligible individual, as defined in s. 149.10 (2t), 2011 stats.

7 **SECTION 2051.** 701.0508 (1) (b) 1. of the statutes is amended to read:

8 701.0508 (1) (b) 1. The claim is a claim based on tort, on a marital property
9 agreement that is subject to the time limitations under s. 766.58 (13) (b) or (c), on
10 Wisconsin income, franchise, sales, withholding, gift, or death taxes, or on
11 unemployment compensation contributions due or benefits overpaid; a claim for
12 funeral or administrative expenses; a claim of this state under s. 46.27 (7g), 2017
13 stats., 49.496, 49.682, or 49.849; or a claim of the United States.

14 **SECTION 2052.** 705.04 (2g) of the statutes is amended to read:

15 705.04 (2g) Notwithstanding subs. (1) and (2), the department of health
16 services may collect, from funds of a decedent that are held by the decedent
17 immediately before death in a joint account or a P.O.D. account, an amount equal to
18 the medical assistance that is recoverable under s. 49.496 (3) (a), an amount equal
19 to aid under s. 49.68, 49.683, 49.685, or 49.785 that is recoverable under s. 49.682 (2)
20 (a) or (am), or an amount equal to long-term community support services under s.
21 46.27, 2017 stats., that is recoverable under s. 46.27 (7g) (c) 1., 2017 stats., and that
22 was paid on behalf of the decedent or the decedent's spouse.

23 **SECTION 2053.** 706.11 (4) of the statutes is amended to read:

SECTION 2053

1 706.11 (4) Subsection (1) does not apply to a 2nd mortgage assigned to or
2 executed to the department of veterans affairs under s. 45.80 (4) (a) 1., 1989 stats.,
3 or s. 45.37 (3), 2017 stats.

4 **SECTION 2054.** 766.55 (2) (bm) of the statutes is amended to read:

5 766.55 (2) (bm) An obligation incurred by a spouse that is recoverable under
6 s. 46.27 (7g), 2017 stats., 49.496, 49.682, or 49.849 may be satisfied from all property
7 that was the property of that spouse immediately before that spouse's death.

8 **SECTION 2055.** 767.41 (5) (am) (intro.) of the statutes is amended to read:

9 767.41 (5) (am) (intro.) Subject to pars. (bm) ~~and~~, (c), and (d), in determining
10 legal custody and periods of physical placement, the court shall consider all facts
11 relevant to the best interest of the child. The court may not prefer one parent or
12 potential custodian over the other on the basis of the sex or race of the parent or
13 potential custodian. Subject to pars. (bm) ~~and~~, (c), and (d), the court shall consider
14 the following factors in making its determination:

15 **SECTION 2056.** 767.41 (5) (d) of the statutes is created to read:

16 767.41 (5) (d) The court may not consider as a factor in determining the legal
17 custody of a child whether a parent or potential custodian holds, or has applied for,
18 a registry identification card, as defined in s. 146.44 (1) (g), is or has been the subject
19 of a written certification, as defined in s. 146.44 (1) (h), or is or has been a qualifying
20 patient, as defined in s. 146.44 (1) (e), or a primary caregiver, as defined in s. 146.44
21 (1) (d), unless the parent or potential custodian's behavior creates an unreasonable
22 danger to the child that can be clearly articulated and substantiated.

23 **SECTION 2057.** 767.451 (5m) (a) of the statutes is amended to read:

24 767.451 (5m) (a) Subject to pars. (b) ~~and~~, (c), and (d), in all actions to modify
25 legal custody or physical placement orders, the court shall consider the factors under

1 s. 767.41 (5) (am), subject to s. 767.41 (5) (bm), and shall make its determination in
2 a manner consistent with s. 767.41.

3 **SECTION 2058.** 767.451 (5m) (d) of the statutes is created to read:

4 767.451 (5m) (d) In an action to modify a legal custody order, the court may not
5 consider as a factor in making a determination whether a parent or potential
6 custodian holds, or has applied for, a registry identification card, as defined in s.
7 146.44 (1) (g), is or has been the subject of a written certification, as defined in s.
8 146.44 (1) (h), or is or has been a qualifying patient, as defined in s. 146.44 (1) (e), or
9 a primary caregiver, as defined in s. 146.44 (1) (d), unless the parent or potential
10 custodian's behavior creates an unreasonable danger to the child that can be clearly
11 articulated and substantiated.

12 **SECTION 2059.** 767.57 (1e) (c) of the statutes is amended to read:

13 767.57 (1e) (c) The department or its designee shall collect an annual fee of \$25
14 \$35 from every individual receiving child support or family support payments. In
15 applicable cases, the fee shall comply with all requirements under 42 USC 654 (6)
16 (B). The department or its designee may deduct the fee from maintenance, child or
17 family support, or arrearage payments. Fees collected under this paragraph shall
18 be deposited in the appropriation account under s. 20.437 (2) (ja).

19 **SECTION 2060.** 767.805 (4) (d) of the statutes is repealed.

20 **SECTION 2061.** 767.89 (3) (e) of the statutes is repealed.

21 **SECTION 2062.** 801.02 (1) of the statutes is amended to read:

22 801.02 (1) ~~A~~ Except as provided in s. 20.9315 (5) (b), a civil action in which a
23 personal judgment is sought is commenced as to any defendant when a summons and
24 a complaint naming the person as defendant are filed with the court, provided service

1 of an authenticated copy of the summons and of the complaint is made upon the
2 defendant under this chapter within 90 days after filing.

3 **SECTION 2063.** 801.50 (3) (b) of the statutes is amended to read:

4 801.50 (3) (b) All actions relating to the validity or invalidity of a rule or
5 guidance document shall be venued as provided in s. 227.40 (1).

6 **SECTION 2064.** 803.09 (1) of the statutes is amended to read:

7 803.09 (1) ~~Upon~~ Except as provided in s. 20.9315, upon timely motion anyone
8 shall be permitted to intervene in an action when the movant claims an interest
9 relating to the property or transaction which is the subject of the action and the
10 movant is so situated that the disposition of the action may as a practical matter
11 impair or impede the movant's ability to protect that interest, unless the movant's
12 interest is adequately represented by existing parties.

13 **SECTION 2065.** 803.09 (2) of the statutes is amended to read:

14 803.09 (2) ~~Upon~~ Except as provided in s. 20.9315, upon timely motion anyone
15 may be permitted to intervene in an action when a movant's claim or defense and the
16 main action have a question of law or fact in common. When a party to an action
17 relies for ground of claim or defense upon any statute or executive order or rule
18 administered by a federal or state governmental officer or agency or upon any
19 regulation, order, rule, requirement or agreement issued or made pursuant to the
20 statute or executive order, the officer or agency upon timely motion may be permitted
21 to intervene in the action. In exercising its discretion the court shall consider
22 whether the intervention will unduly delay or prejudice the adjudication of the rights
23 of the original parties.

24 **SECTION 2066.** 803.09 (2m) of the statutes is repealed.

25 **SECTION 2067.** 804.01 (2) (intro.) of the statutes is amended to read:

1 804.01 (2) SCOPE OF DISCOVERY. (intro.) ~~Unless~~ Except as provided in s. 20.9315
2 (9); and unless otherwise limited by order of the court in accordance with the
3 provisions of this chapter, the scope of discovery is as follows:

4 **SECTION 2068.** 805.04 (1) of the statutes is amended to read:

5 805.04 (1) BY PLAINTIFF; BY STIPULATION. ~~An~~ Except as provided in sub. (2p), an
6 action may be dismissed by the plaintiff without order of court by serving and filing
7 a notice of dismissal at any time before service by an adverse party of responsive
8 pleading or motion or by the filing of a stipulation of dismissal signed by all parties
9 who have appeared in the action. Unless otherwise stated in the notice of dismissal
10 or stipulation, the dismissal is not on the merits, except that a notice of dismissal
11 operates as an adjudication on the merits when filed by a plaintiff who has once
12 dismissed in any court an action based on or including the same claim.

13 **SECTION 2069.** 805.04 (2p) of the statutes is created to read:

14 805.04 (2p) FALSE CLAIMS. An action filed under s. 20.9315 may be dismissed
15 only by order of the court. In determining whether to dismiss the action filed under
16 s. 20.9315, the court shall take into account the best interests of the parties and the
17 purposes of s. 20.9315.

18 **SECTION 2070.** 806.04 (11) of the statutes is amended to read:

19 806.04 (11) PARTIES. When declaratory relief is sought, all persons shall be
20 made parties who have or claim any interest which would be affected by the
21 declaration, and no declaration may prejudice the right of persons not parties to the
22 proceeding. In any proceeding which involves the validity of a municipal ordinance
23 or franchise, the municipality shall be made a party, and shall be entitled to be heard.
24 If a statute, ordinance or franchise is alleged to be unconstitutional, ~~or to be in~~
25 ~~violation of or preempted by federal law, or if the construction or validity of a statute~~

1 ~~is otherwise challenged, the attorney general shall also be served with a copy of the~~
2 ~~proceeding and be entitled to be heard. If a statute is alleged to be unconstitutional,~~
3 ~~or to be in violation of or preempted by federal law, or if the construction or validity~~
4 ~~of a statute is otherwise challenged, the speaker of the assembly, the president of the~~
5 ~~senate, and the senate majority leader shall also be served with a copy of the~~
6 ~~proceeding, and the assembly, the senate, and the state legislature are entitled to be~~
7 ~~heard. If the assembly, the senate, or the joint committee on legislative organization~~
8 ~~intervenes as provided under s. 803.09 (2m), the assembly shall represent the~~
9 ~~assembly, the senate shall represent the senate, and the joint committee on~~
10 ~~legislative organization shall represent the legislature. In any proceeding under this~~
11 ~~section in which the constitutionality, construction or application of any provision of~~
12 ~~ch. 227, or of any statute allowing a legislative committee to suspend, or to delay or~~
13 ~~prevent the adoption of, a rule as defined in s. 227.01 (13) is placed in issue by the~~
14 ~~parties, the joint committee for review of administrative rules shall be served with~~
15 ~~a copy of the petition and, with the approval of the joint committee on legislative~~
16 ~~organization, shall be made a party and be entitled to be heard. In any proceeding~~
17 ~~under this section in which the constitutionality, construction or application of any~~
18 ~~provision of ch. 13, 20, 111, 227 or 230 or subch. I, III or IV of ch. 16 or s. 753.075, or~~
19 ~~of any statute allowing a legislative committee to suspend, or to delay or prevent the~~
20 ~~adoption of, a rule as defined in s. 227.01 (13) is placed in issue by the parties, the~~
21 ~~joint committee on legislative organization shall be served with a copy of the petition~~
22 ~~and the joint committee on legislative organization, the senate committee on~~
23 ~~organization or the assembly committee on organization may intervene as a party~~
24 ~~to the proceedings and be heard.~~

25 SECTION 2071. 806.11 (1) (intro.) of the statutes is amended to read:

1 806.11 (1) (intro.) At the time of filing the warrant provided by s. 71.74 (14),
2 71.91 (5), or 71.93 (8) ~~(b) 5.~~ (d), the clerk of circuit court shall enter the warrant in
3 the judgment and lien docket, including:

4 **SECTION 2072.** 806.11 (2) of the statutes is amended to read:

5 806.11 (2) If a warrant provided by s. 71.74 (14), 71.91 (5), or 71.93 (8) ~~(b) 5.~~ (d)
6 is against several persons, the warrant shall be entered, in accordance with the
7 procedure under sub. (1), in the judgment and lien docket under the name of each
8 person against whom the warrant was issued.

9 **SECTION 2073.** 806.115 of the statutes is amended to read:

10 **806.115 Filing of duplicate copy of warrant.** The department of revenue
11 may file in any county a duplicate copy of a warrant filed under s. 71.74 (14), 71.91
12 (5), or 71.93 (8) ~~(b) 5.~~ (d) and the clerk of circuit court shall enter the duplicate copy
13 on the judgment and lien docket as provided in s. 806.11. When so entered, the
14 duplicate copy shall have the same legal effect as the warrant filed under s. 71.91 (5).

15 **SECTION 2074.** 809.13 of the statutes is amended to read:

16 **809.13 Rule (Intervention).** A person who is not a party to an appeal may
17 file in the court of appeals a petition to intervene in the appeal. A party may file a
18 response to the petition within 11 days after service of the petition. The court may
19 grant the petition upon a showing that the petitioner's interest meets the
20 requirements of s. 803.09 (1), or (2), ~~or (2m)~~.

21 **SECTION 2075.** 859.02 (2) (a) of the statutes is amended to read:

22 859.02 (2) (a) It is a claim based on tort, on a marital property agreement that
23 is subject to the time limitations under s. 766.58 (13) (b) or (c), on Wisconsin income,
24 franchise, sales, withholding, gift, or death taxes, or on unemployment insurance
25 contributions due or benefits overpaid; a claim for funeral or administrative

1 expenses; a claim of this state under s. 46.27 (7g), 2017 stats., 49.496, 49.682, or
2 49.849; or a claim of the United States; or

3 **SECTION 2076.** 859.07 (2) (a) 3. of the statutes is amended to read:

4 859.07 (2) (a) 3. The decedent or the decedent's spouse received services
5 provided as a benefit under a long-term care program, as defined in s. 49.496 (1) (bk),
6 medical assistance under subch. IV of ch. 49, long-term community support services
7 funded under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685, or 49.785.

8 **SECTION 2077.** 867.01 (3) (am) 4. of the statutes is amended to read:

9 867.01 (3) (am) 4. Whether the decedent or the decedent's spouse received
10 services provided as a benefit under a long-term care program, as defined in s. 49.496
11 (1) (bk), medical assistance under subch. IV of ch. 49, long-term community support
12 services funded under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685,
13 or 49.785.

14 **SECTION 2078.** 867.01 (3) (d) of the statutes is amended to read:

15 867.01 (3) (d) *Notice.* The court may hear the matter without notice or order
16 notice to be given under s. 879.03. If the decedent or the decedent's spouse received
17 services provided as a benefit under a long-term care program, as defined in s. 49.496
18 (1) (bk), medical assistance under subch. IV of ch. 49, long-term community support
19 services funded under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685,
20 or 49.785, the petitioner shall give notice by certified mail to the department of
21 health services as soon as practicable after filing the petition with the court.

22 **SECTION 2079.** 867.02 (2) (am) 6. of the statutes is amended to read:

23 867.02 (2) (am) 6. Whether the decedent or the decedent's spouse received
24 services provided as a benefit under a long-term care program, as defined in s. 49.496
25 (1) (bk), medical assistance under subch. IV of ch. 49, long-term community support

1 services funded under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685,
2 or 49.785.

3 **SECTION 2080.** 867.03 (1g) (c) of the statutes is amended to read:

4 867.03 (1g) (c) Whether the decedent or the decedent's spouse ever received
5 services provided as a benefit under a long-term care program, as defined in s. 49.496
6 (1) (bk), medical assistance under subch. IV of ch. 49, long-term community support
7 services funded under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685,
8 or s. 49.785.

9 **SECTION 2081.** 867.03 (1m) (a) of the statutes is amended to read:

10 867.03 (1m) (a) Whenever an heir, trustee, person named in the will to act as
11 personal representative, or person who was guardian of the decedent at the time of
12 the decedent's death intends to transfer a decedent's property by affidavit under sub.
13 (1g) and the decedent or the decedent's spouse ever received services provided as a
14 benefit under a long-term care program, as defined in s. 49.496 (1) (bk), medical
15 assistance under subch. IV of ch. 49, long-term community support services funded
16 under s. 46.27 (7), 2017 stats., or aid under s. 49.68, 49.683, 49.685, or 49.785, the
17 heir, trustee, person named in the will to act as personal representative, or person
18 who was guardian of the decedent at the time of the decedent's death shall give notice
19 to the department of health services of his or her intent. The notice shall include the
20 information in the affidavit under sub. (1g) and the heir, trustee, person named in
21 the will to act as personal representative, or person who was guardian of the
22 decedent at the time of the decedent's death shall give the notice by certified mail,
23 return receipt requested.

24 **SECTION 2082.** 867.03 (1m) (b) of the statutes is amended to read:

1 867.03 (1m) (b) An heir, trustee, person named in the will to act as personal
2 representative, or person who was guardian of the decedent at the time of the
3 decedent's death who files an affidavit under sub. (1g) that states that the decedent
4 or the decedent's spouse received services provided as a benefit under a long-term
5 care program, as defined in s. 49.496 (1) (bk), medical assistance under subch. IV of
6 ch. 49, long-term community support services funded under s. 46.27 (7), 2017 stats.,
7 or aid under s. 49.68, 49.683, 49.685, or 49.785 shall attach to the affidavit the proof
8 of mail delivery of the notice required under par. (a) showing the delivery date.

9 **SECTION 2083.** 867.03 (2g) (b) of the statutes is amended to read:

10 867.03 (2g) (b) Property transferred under this section to or by an heir, trustee,
11 person named in the will to act as personal representative, or person who was
12 guardian of the decedent at the time of the decedent's death is subject to the right of
13 the department of health services to recover under s. 46.27 (7g), 2017 stats., 49.496,
14 49.682, or 49.849 an amount equal to the medical assistance that is recoverable
15 under s. 49.496 (3) (a), an amount equal to aid under s. 49.68, 49.683, 49.685, or
16 49.785 that is recoverable under s. 49.682 (2) (a) or (am), or an amount equal to
17 long-term community support services under s. 46.27, 2017 stats., that is
18 recoverable under s. 46.27 (7g) (c) 1., 2017 stats., and that was paid on behalf of the
19 decedent or the decedent's spouse. Upon request, the heir, trustee, person named in
20 the will to act as personal representative, or person who was guardian of the
21 decedent at the time of the decedent's death shall provide to the department of health
22 services information about any of the decedent's property that the heir, trustee,
23 person named in the will to act as personal representative, or person who was
24 guardian of the decedent at the time of the decedent's death has distributed and
25 information about the persons to whom the property was distributed.

1 46.856 (1) (b), or a school, as defined in s. 609.655 (1) (c), is immune from civil liability
2 for his or her acts or omissions in rendering that care if all of the following conditions
3 exist:

4 **SECTION 2089.** 895.48 (1m) (a) 2. of the statutes is amended to read:

5 895.48 (1m) (a) 2. The physician, podiatrist, athletic trainer, chiropractor,
6 dentist, dental therapist, emergency medical services practitioner, as defined in s.
7 256.01 (5), emergency medical responder, as defined in s. 256.01 (4p), physician
8 assistant, registered nurse, massage therapist or bodywork therapist does not
9 receive compensation for the health care, other than reimbursement for expenses.

10 **SECTION 2090.** 938.02 (1) of the statutes is amended to read:

11 938.02 (1) "Adult" means a person who is 18 years of age or older, ~~except that~~
12 ~~for purposes of investigating or prosecuting a person who is alleged to have violated~~
13 ~~any state or federal criminal law or any civil law or municipal ordinance, "adult"~~
14 ~~means a person who has attained 17 years of age.~~

15 **SECTION 2091.** 938.02 (10m) of the statutes is amended to read:

16 938.02 (10m) "Juvenile," when used without further qualification, means a
17 person who is less than 18 years of age, ~~except that for purposes of investigating or~~
18 ~~prosecuting a person who is alleged to have violated a state or federal criminal law~~
19 ~~or any civil law or municipal ordinance, "juvenile" does not include a person who has~~
20 ~~attained 17 years of age.~~

21 **SECTION 2092.** 938.12 (2) of the statutes is amended to read:

22 938.12 (2) ~~SEVENTEEN-YEAR-OLDS~~ JUVENILES WHO BECOME ADULTS. If a petition
23 alleging that a juvenile is delinquent is filed before the juvenile is ~~17 years of age~~
24 becomes an adult, but the juvenile becomes 17 years of age an adult before admitting

1 the facts of the petition at the plea hearing or, if the juvenile denies the facts, before
2 an adjudication, the court retains jurisdiction over the case.

3 **SECTION 2093.** 938.18 (2) of the statutes is amended to read:

4 938.18 (2) PETITION. The petition for waiver of jurisdiction may be filed by the
5 district attorney or the juvenile or may be initiated by the court and shall contain a
6 brief statement of the facts supporting the request for waiver. The petition for waiver
7 of jurisdiction shall be accompanied by or filed after the filing of a petition alleging
8 delinquency and shall be filed prior to the plea hearing, except that if the juvenile
9 denies the facts of the petition and becomes ~~17 years of age~~ an adult before an
10 adjudication, the petition for waiver of jurisdiction may be filed at any time prior to
11 the adjudication. If the court initiates the petition for waiver of jurisdiction, the
12 judge shall disqualify himself or herself from any future proceedings on the case.

13 **SECTION 2094.** 938.183 (3) of the statutes is amended to read:

14 938.183 (3) PLACEMENT IN STATE PRISON; PAROLE. ~~When~~ Subject to s. 973.013
15 (3m), when a juvenile who is subject to a criminal penalty under sub. (1m) or s.
16 938.183 (2), 2003 stats., ~~attains the age of 17 years~~ becomes an adult, the department
17 of corrections may place the juvenile in a state prison named in s. 302.01, except that
18 that department may not place any person under the age of 18 years in the
19 correctional institution authorized in s. 301.16 (1n). A juvenile who is subject to a
20 criminal penalty under sub. (1m) or under s. 938.183 (2), 2003 stats., for an act
21 committed before December 31, 1999, is eligible for parole under s. 304.06.

22 **SECTION 2095.** 938.22 (2) (d) of the statutes, as affected by 2019 Wisconsin Act
23 (this act), is repealed ~~and recreated~~ to read:

1 938.22 (2) (d) 1. Except as provided in subd. 2., a juvenile detention facility is
2 authorized to accept juveniles for placement for more than 30 consecutive days under
3 s. 938.34 (3) (f) 1. if all of the following apply:

4 a. The juvenile detention facility is operated by a county, the county board of
5 supervisors of which has adopted a resolution under s. 938.34 (3) (f) 3., prior to
6 January 1, 2018, authorizing placement of juveniles at the juvenile detention facility
7 under s. 938.34 (3) (f) for more than 30 consecutive days.

8 b. The county that operates the juvenile detention facility is not awarded a
9 grant under 2017 Wisconsin Act 185, section 110 (4).

10 2. After the effective date of this subdivision ... [LRB inserts date], the number
11 of juveniles that may be housed at a juvenile detention facility under subd. 1. is
12 limited to the number that are housed at the juvenile detention facility on that date,
13 and the juvenile detention facility may not be altered or added to or repaired in excess
14 of 50 percent of its assessed value. If a juvenile detention facility violates this
15 subdivision, it is no longer authorized to accept juveniles for placement for more than
16 30 consecutive days.

17 **SECTION 2096.** 938.22 (2) (d) 1. of the statutes is renumbered 938.22 (2) (d), and
18 938.22 (2) (d) (intro.), as renumbered, is amended to read:

19 938.22 (2) (d) (intro.) ~~Except as provided in subd. 2., a~~ A juvenile detention
20 facility is authorized to accept juveniles for placement for more than 30 consecutive
21 days under s. 938.34 (3) (f) 1. if all of the following apply:

22 **SECTION 2097.** 938.22 (2) (d) 2. of the statutes is repealed.

23 **SECTION 2098.** 938.255 (1) (intro.) of the statutes is amended to read:

24 938.255 (1) **TITLE AND CONTENTS.** (intro.) A petition initiating proceedings
25 under this chapter, other than a petition initiating proceedings under s. 938.12,

1 938.125, or 938.13 (12), shall be entitled, "In the interest of (juvenile's name), a
2 person under the age of 18". A petition initiating proceedings under s. 938.12,
3 938.125, or 938.13 (12) shall be entitled, "In the interest of (juvenile's name), a person
4 ~~under the age of 17". juvenile.~~" A petition initiating proceedings under this chapter
5 shall specify all of the following:

6 **SECTION 2099.** 938.34 (3) (f) 1. of the statutes is amended to read:

7 938.34 (3) (f) 1. The placement may be for any combination of single or
8 consecutive days totalling not more than 365 in a juvenile detention facility under
9 s. 938.22 (2) (d) ~~1~~ and may be for no more than 30 consecutive days in any other
10 juvenile detention facility, including any placement under pars. (a) to (e). The
11 juvenile shall be given credit against the period of detention or nonsecure custody
12 imposed under this paragraph for all time spent in secure detention in connection
13 with the course of conduct for which the detention or nonsecure custody was imposed.

14 **SECTION 2100.** 938.34 (3) (f) 1. of the statutes, as affected by 2019 Wisconsin
15 Act (this act), is amended to read:

16 938.34 (3) (f) 1. The placement may be for any combination of single or
17 consecutive days totalling not more than 365 in a juvenile detention facility under
18 s. 938.22 (2) (d) 1 and may be for no more than 30 consecutive days in any other
19 juvenile detention facility, including any placement under pars. (a) to (e). The
20 juvenile shall be given credit against the period of detention or nonsecure custody
21 imposed under this paragraph for all time spent in secure detention in connection
22 with the course of conduct for which the detention or nonsecure custody was imposed.

23 **SECTION 2101.** 938.34 (8) of the statutes is amended to read:

24 938.34 (8) FORFEITURE. Impose a forfeiture based upon a determination that
25 this disposition is in the best interest of the juvenile and the juvenile's rehabilitation.

SECTION 2101

1 The maximum forfeiture that the court may impose under this subsection for a
2 violation by a juvenile is the maximum amount of the fine that may be imposed on
3 an adult for committing that violation or, if the violation is applicable only to ~~a person~~
4 ~~under 18 years of age juveniles~~, \$100. The order shall include a finding that the
5 juvenile alone is financially able to pay the forfeiture and shall allow up to 12 months
6 for payment. If the juvenile fails to pay the forfeiture, the court may vacate the
7 forfeiture and order other alternatives under this section; or the court may suspend
8 any license issued under ch. 29 for not less than 30 days nor more than 5 years, or
9 suspend the juvenile's operating privilege, as defined in s. 340.01 (40), for not more
10 than 2 years. If the court suspends any license under this subsection, the clerk of the
11 court shall immediately take possession of the suspended license if issued under ch.
12 29 or, if the license is issued under ch. 343, the court may take possession of, and if
13 possession is taken, shall destroy, the license. The court shall forward to the
14 department ~~which~~ that issued the license a notice of suspension stating that the
15 suspension is for failure to pay a forfeiture imposed by the court, together with any
16 license issued under ch. 29 of which the court takes possession. If the forfeiture is
17 paid during the period of suspension, the suspension shall be reduced to the time
18 period ~~which~~ that has already elapsed and the court shall immediately notify the
19 department, which shall then, if the license is issued under ch. 29, return the license
20 to the juvenile. Any recovery under this subsection shall be reduced by the amount
21 recovered as a forfeiture for the same act under s. 938.45 (1r) (b).

22 **SECTION 2102.** 938.343 (2) of the statutes is amended to read:

23 938.343 (2) FORFEITURE. Impose a forfeiture not to exceed the maximum
24 forfeiture that may be imposed on an adult for committing that violation or, if the
25 violation is only applicable to ~~a person under 18 years of age juveniles~~, \$50. The

1 order shall include a finding that the juvenile alone is financially able to pay and
2 shall allow up to 12 months for the payment. If a juvenile fails to pay the forfeiture,
3 the court may suspend any license issued under ch. 29 or suspend the juvenile's
4 operating privilege, as defined in s. 340.01 (40), for not more than 2 years. The court
5 shall immediately take possession of the suspended license if issued under ch. 29 or,
6 if the license is issued under ch. 343, the court may take possession of, and if
7 possession is taken, shall destroy, the ~~license~~. The court shall forward to the
8 department ~~which~~ that issued the license the notice of suspension stating that the
9 suspension is for failure to pay a forfeiture imposed by the court, together with any
10 license issued under ch. 29 of which the court takes possession. If the forfeiture is
11 paid during the period of suspension, the court shall immediately notify the
12 department, which shall, if the license is issued under ch. 29, return the license to
13 the person. Any recovery under this subsection shall be reduced by the amount
14 recovered as a forfeiture for the same act under s. 938.45 (1r) (b).

15 **SECTION 2103.** 938.344 (3) of the statutes is amended to read:

16 938.344 (3) PROSECUTION IN ADULT COURT. If the juvenile alleged to have
17 committed the violation is within 3 months of ~~his or her 17th birthday~~ becoming an
18 adult, the court assigned to exercise jurisdiction under this chapter and ch. 48 may,
19 at the request of the district attorney or on its own motion, dismiss the citation
20 without prejudice and refer the matter to the district attorney for prosecution under
21 s. 125.07 (4). The juvenile is entitled to a hearing only on the issue of his or her age.
22 This subsection does not apply to violations under s. 961.573 (2), 961.574 (2), or
23 961.575 (2) or a local ordinance that strictly conforms to one of those statutes.

24 **SECTION 2104.** 938.35 (1m) of the statutes is amended to read:

1 938.35 (1m) FUTURE CRIMINAL PROCEEDINGS BARRED. Disposition by the court
2 assigned to exercise jurisdiction under this chapter and ch. 48 of any allegation
3 under s. 938.12 or 938.13 (12) shall bar any future proceeding on the same matter
4 in criminal court when the juvenile attains 17 years of age becomes an adult. This
5 subsection does not affect proceedings in criminal court that have been transferred
6 under s. 938.18.

7 **SECTION 2105.** 938.355 (4) (b) of the statutes is amended to read:

8 938.355 (4) (b) Except as provided in s. 938.368, an order under s. 938.34 (4d)
9 or (4m) made before the juvenile attains 18 years of age may apply for up to 2 years
10 after the date on which the order is granted or until the juvenile's 18th 19th birthday,
11 whichever is earlier, unless the court specifies a shorter period of time or the court
12 terminates the order sooner. If the order does not specify a termination date, it shall
13 apply for one year after the date on which the order is granted or until the juvenile's
14 18th 19th birthday, whichever is earlier, unless the court terminates the order
15 sooner. Except as provided in s. 938.368, an order under s. 938.34 (4h) made before
16 the juvenile attains 18 years of age shall apply for 5 years after the date on which the
17 order is granted, if the juvenile is adjudicated delinquent for committing a violation
18 of s. 943.10 (2) or for committing an act that would be punishable as a Class B or C
19 felony if committed by an adult, or until the juvenile reaches 25 years of age, if the
20 juvenile is adjudicated delinquent for committing an act that would be punishable
21 as a Class A felony if committed by an adult. Except as provided in s. 938.368, an
22 extension of an order under s. 938.34 (4d), (4h), (4m), or (4n) made before the juvenile
23 attains 17 years of age becomes an adult shall terminate at the end of one year after
24 the date on which the order is granted unless the court specifies a shorter period of
25 time or the court terminates the order sooner. No extension under s. 938.365 of an

1 original dispositional order under s. 938.34 (4d), (4h), (4m), or (4n) may be granted
2 for a juvenile who is ~~17 years of age or older when~~ becomes an adult by the time the
3 original dispositional order terminates.

4 **SECTION 2106.** 938.355 (4m) (a) of the statutes is amended to read:

5 938.355 (4m) (a) A juvenile who has been adjudged delinquent under s. 48.12,
6 1993 stats., or s. 938.12 may, on ~~attaining 17 years of age~~ becoming an adult, petition
7 the court to expunge the court's record of the juvenile's adjudication. Subject to par.
8 (b), the court may expunge the record if the court determines that the juvenile has
9 satisfactorily complied with the conditions of his or her dispositional order and that
10 the juvenile will benefit from, and society will not be harmed by, the expungement.

11 **SECTION 2107.** 938.357 (3) (a) of the statutes is amended to read:

12 938.357 (3) (a) Subject to subs. (4) (b), (c), and (d) and (5) (e), if the proposed
13 change in placement would involve placing a juvenile in a juvenile correctional
14 facility or a secured residential care center for children and youth, notice shall be
15 given as provided in sub. (1) (am) 1. A hearing shall be held, unless waived by the
16 juvenile, parent, guardian, and legal custodian, before the court makes a decision on
17 the request. The juvenile is entitled to counsel at the hearing, and any party
18 opposing or favoring the proposed new placement may present relevant evidence and
19 cross-examine witnesses. The department of corrections shall have the opportunity
20 to object to a change of placement of a juvenile from a secured residential care center
21 for children and youth to a Type 1 juvenile correctional facility, except for the
22 Mendota juvenile treatment center, under par. (b). The proposed new placement may
23 be approved only if the court finds, on the record, that the conditions set forth in s.
24 938.34 (4m) (a) and (b) have been met.

25 **SECTION 2108.** 938.357 (3) (c) of the statutes is amended to read:

1 938.357 (3) (c) ~~Upon the recommendation of~~ If the department of health
2 services approves, the court may order the placement of a juvenile under par. (b) at
3 the Mendota juvenile treatment center. A court may not order the department of
4 health services to accept a juvenile placement under par. (b) at the Mendota juvenile
5 treatment center that the department has not approved. A juvenile under the
6 supervision of a county in a secured residential care center for children and youth
7 who is transferred to Mendota juvenile treatment center under this paragraph
8 remains under the supervision of that county.

9 **SECTION 2109.** 938.357 (3) (d) of the statutes is amended to read:

10 938.357 (3) (d) A juvenile who is placed in a Type 1 juvenile correctional facility
11 under par. (b) or (c) is the financial responsibility of the county department of the
12 county where the juvenile was adjudicated delinquent ~~and that.~~ The county
13 department shall reimburse the department of corrections at the rate specified
14 under s. 301.26 (4) (d) 2. or 3., whichever is applicable, for the cost of ~~the~~ a juvenile's
15 care while placed in a Type 1 juvenile correctional facility other than the Mendota
16 juvenile treatment center. The county department shall reimburse the department
17 of health services at a rate specified by that department for the cost of a juvenile's
18 care while placed at the Mendota juvenile treatment center and these payments
19 shall be deposited in the appropriation account under s. 20.435 (2) (gk).

20 **SECTION 2110.** 938.39 of the statutes is amended to read:

21 **938.39 Disposition by court bars criminal proceeding.** Disposition by the
22 court of any violation of state law within its jurisdiction under s. 938.12 bars any
23 future criminal proceeding on the same matter in circuit court when the juvenile
24 ~~reaches the age of 17~~ becomes an adult. This section does not affect criminal
25 proceedings in circuit court that were transferred under s. 938.18.

1 **SECTION 2111.** Subchapter IX (title) of chapter 938 [precedes 938.44] of the
2 statutes is amended to read:

3 **CHAPTER 938**

4 SUBCHAPTER IX

5 JURISDICTION OVER PERSONS 17

6 OR OLDER ADULTS

7 **SECTION 2112.** 938.44 of the statutes is amended to read:

8 **938.44 Jurisdiction over persons 17 or older adults.** The court has
9 jurisdiction over persons 17 years of age or older adults as provided under ss. 938.355
10 (4), 938.357 (6), 938.365 (5), and 938.45 and as otherwise specified in this chapter.

11 **SECTION 2113.** 938.45 (1) (a) of the statutes is amended to read:

12 938.45 (1) (a) If in the hearing of a case of a juvenile alleged to be delinquent
13 under s. 938.12 or in need of protection or services under s. 938.13 it appears that any
14 ~~person 17 years of age or older~~ adult has been guilty of contributing to, encouraging,
15 or tending to cause by any act or omission, ~~such that~~ that condition of the juvenile, the
16 court may make orders with respect to the conduct of that person in his or her
17 relationship to the juvenile, including orders relating to determining the ability of
18 the person to provide for the maintenance or care of the juvenile and directing when,
19 how, and from where funds for the maintenance or care shall be paid.

20 **SECTION 2114.** 938.45 (3) of the statutes is amended to read:

21 938.45 (3) PROSECUTION OF ADULT CONTRIBUTING TO DELINQUENCY OF JUVENILE.
22 If it appears at a court hearing that any ~~person 17 years of age or older~~ adult has
23 violated s. 948.40, the court shall refer the record to the district attorney. This
24 subsection does not prohibit prosecution of violations of s. 948.40 without the prior
25 reference by the court to the district attorney.

1 **SECTION 2115.** 938.48 (4m) (title) of the statutes is amended to read:

2 938.48 (4m) (title) CONTINUING CARE AND SERVICES FOR JUVENILES ~~OVER 17 WHO~~
3 BECOME ADULTS.

4 **SECTION 2116.** 938.48 (4m) (a) of the statutes is amended to read:

5 938.48 (4m) (a) Is at least ~~17 years of age~~ an adult.

6 **SECTION 2117.** 938.48 (4m) (b) of the statutes, as affected by 2017 Wisconsin
7 Act 185, section 82, is amended to read:

8 938.48 (4m) (b) Was under the supervision of the department under s. 938.183,
9 938.34 (4h) or (4n), or 938.357 (3) or (4) when the person reached ~~17 years of age~~
10 became an adult.

11 **SECTION 2118.** 938.48 (14) of the statutes, as affected by 2017 Wisconsin Act
12 185, section 88, is amended to read:

13 938.48 (14) SCHOOL-RELATED EXPENSES FOR JUVENILES ~~OVER 17 WHO BECOME~~
14 ADULTS. Pay maintenance, tuition, and related expenses from the appropriation
15 under s. 20.410 (3) (ho) for persons who, when they ~~attained 17 years of age~~ became
16 adults, were students regularly attending a school, college, or university or regularly
17 attending a course of vocational or technical training designed to prepare them for
18 gainful employment, and who upon ~~attaining that age~~ becoming adults were under
19 the supervision of the department under s. 938.183, 938.34 (4h) or (4n), or 938.357
20 (3) or (4) as a result of a judicial decision.

21 **SECTION 2119.** 938.49 (2) (b) of the statutes is amended to read:

22 938.49 (2) (b) Notify the juvenile's last school district or, if the juvenile was last
23 enrolled in a private school participating in the program under s. 118.60 or in the
24 program under s. 119.23 ~~or, pursuant to s. 115.999 (3), 119.33 (2) (c) 3., or 119.9002~~
25 (3) (c), ~~in a school under the operation and general management of the governing~~

1 ~~body of a private school, the private school or the governing body of a private school,~~
2 in writing of its obligation under s. 118.125 (4).

3 **SECTION 2120.** 938.57 (3) (title) of the statutes is amended to read:

4 938.57 (3) (title) CONTINUING MAINTENANCE FOR JUVENILES ~~OVER 17~~ WHO BECOME
5 ADULTS.

6 **SECTION 2121.** 938.57 (3) (a) (intro.) of the statutes is amended to read:

7 938.57 (3) (a) (intro.) From the reimbursement received under s. 48.569 (1) (d),
8 counties may provide funding for the maintenance of any juvenile person who meets
9 all of the following qualifications:

10 **SECTION 2122.** 938.57 (3) (a) 1. of the statutes is amended to read:

11 938.57 (3) (a) 1. Is ~~17 years of age or older~~ an adult.

12 **SECTION 2123.** 938.57 (3) (a) 3. of the statutes is amended to read:

13 938.57 (3) (a) 3. Received funding under s. 48.569 (1) (d) immediately prior to
14 ~~his or her 17th birthday~~ becoming an adult.

15 **SECTION 2124.** 938.57 (3) (b) of the statutes is amended to read:

16 938.57 (3) (b) The funding provided for the maintenance of a juvenile person
17 under par. (a) shall be in an amount equal to that ~~to~~ which the juvenile person would
18 receive under s. 48.569 (1) (d) if the person were a juvenile ~~were 16 years of age.~~

19 **SECTION 2125.** 939.632 (1) (e) 1. of the statutes is amended to read:

20 939.632 (1) (e) 1. Any felony under s. 940.01, 940.02, 940.03, 940.05, 940.09
21 (1c), 940.19 (2), (4) or (5), 940.21, 940.225 (1), (2) or (3), 940.235, 940.305, 940.31,
22 940.32, 941.20, 941.21, 943.02, 943.06, 943.10 (2), 943.23 (1g), 943.32 (2), 948.02 (1)
23 or (2), 948.025, 948.03 (2) (a) or (c) or (5) (a) 1., 2., 3., or 4., 948.05, 948.051, 948.055,
24 948.07, 948.08, 948.085, or 948.30 (2) or under s. 940.302 (2) if s. 940.302 (2) (a) 1.
25 b. applies.

1 **SECTION 2126.** 939.632 (1) (e) 3. of the statutes is amended to read:

2 939.632 (1) (e) 3. ~~Any~~ misdemeanor under s. 940.19 (1), 940.225 (3m), 940.32
3 ~~(2)~~, 940.42, 940.44, 941.20 (1), 941.23, 941.231, ~~941.235~~, or 941.38 (3).

4 **SECTION 2127.** 941.315 (5) of the statutes is amended to read:

5 941.315 (5) (a) Subsection (2) does not apply to a person to whom nitrous oxide
6 is administered for the purpose of providing medical or dental care, if the nitrous
7 oxide is administered by a physician ~~or~~, dentist, or dental therapist or at the direction
8 or under the supervision of a physician ~~or~~, dentist, or dental therapist.

9 (b) Subsection (3) does not apply to the administration of nitrous oxide by a
10 physician ~~or~~, dentist, or dental therapist, or by another person at the direction or
11 under the supervision of a physician ~~or~~, dentist, or dental therapist, for the purpose
12 of providing medical or dental care.

13 (c) Subsection (3) (c) does not apply to the sale to a hospital, health care clinic
14 or other health care organization or to a physician ~~or~~, dentist, or dental therapist of
15 any object used, designed for use or primarily intended for use in administering
16 nitrous oxide for the purpose of providing medical or dental care.

17 **SECTION 2128.** 946.15 of the statutes is created to read:

18 **946.15 Public construction contracts at less than full rate.** (1) Any
19 employer, or any agent or employee of an employer, who induces any individual who
20 seeks to be or is employed pursuant to a public contract, as defined in s. 66.0901 (1)
21 (c), or who seeks to be or is employed on a project on which a prevailing wage rate
22 determination has been issued by the department of workforce development under
23 s. 66.0903 (3), 103.49 (3), 103.50 (3), or 229.8275 (3) to give up, waive, or return any
24 part of the compensation to which that individual is entitled under his or her contract
25 of employment or under the prevailing wage rate determination issued by the

1 department, or who reduces the hourly basic rate of pay normally paid to an
2 employee for work on a project on which a prevailing wage rate determination has
3 not been issued under s. 66.0903 (3), 103.49 (3), 103.50 (3), or 229.8275 (3) during a
4 week in which the employee works both on a project on which a prevailing wage rate
5 determination has been issued and on a project on which a prevailing wage rate
6 determination has not been issued, is guilty of a Class I felony.

7 (2) Any individual employed pursuant to a public contract, as defined in s.
8 66.0901 (1) (c), or employed on a project on which a prevailing wage rate
9 determination has been issued by the department of workforce development under
10 s. 66.0903 (3), 103.49 (3), 103.50 (3), or 229.8275 (3) who gives up, waives, or returns
11 to the employer or agent of the employer any part of the compensation to which the
12 employee is entitled under his or her contract of employment or under the prevailing
13 wage determination issued by the department, or who gives up any part of the
14 compensation to which he or she is normally entitled for work on a project on which
15 a prevailing wage rate determination has not been issued under s. 66.0903 (3),
16 103.49 (3), 103.50 (3), or 229.8275 (3) during a week in which the individual works
17 part-time on a project on which a prevailing wage rate determination has been
18 issued and part-time on a project on which a prevailing wage rate determination has
19 not been issued, is guilty of a Class C misdemeanor.

20 (3) Any employer or labor organization, or any agent or employee of an
21 employer or labor organization, who induces any individual who seeks to be or is
22 employed on a project on which a prevailing wage rate determination has been issued
23 by the department of workforce development under s. 66.0903 (3), 103.49 (3), 103.50
24 (3), or 229.8275 (3) to allow any part of the wages to which that individual is entitled
25 under the prevailing wage rate determination issued by the department or local

1 governmental unit to be deducted from the individual's pay is guilty of a Class I
2 felony, unless the deduction would be allowed under 29 CFR 3.5 or 3.6 from an
3 individual who is working on a project that is subject to 40 USC 3142.

4 (4) Any individual employed on a project on which a prevailing wage rate
5 determination has been issued by the department of workforce development under
6 s. 66.0903 (3), 103.49 (3), 103.50 (3), or 229.8275 (3) who allows any part of the wages
7 to which that individual is entitled under the prevailing wage rate determination
8 issued by the department or local governmental unit to be deducted from his or her
9 pay is guilty of a Class C misdemeanor, unless the deduction would be allowed under
10 29 CFR 3.5 or 3.6 from an individual who is working on a project that is subject to
11 40 USC 3142.

12 SECTION 2129. 946.50 (intro.) of the statutes is amended to read:

13 **946.50 Absconding.** (intro.) Any person who is adjudicated delinquent, but
14 who intentionally fails to appear before the court assigned to exercise jurisdiction
15 under chs. 48 and 938 for his or her dispositional hearing under s. 938.335, and who
16 does not return to that court for a dispositional hearing before attaining the age of
17 17 years becoming an adult is guilty of the following:

18 SECTION 2130. 947.20 of the statutes is repealed.

19 SECTION 2131. 947.21 of the statutes is repealed.

20 SECTION 2132. 948.01 (1) of the statutes is amended to read:

21 948.01 (1) "Child" means a person who has not attained the age of 18 years,
22 ~~except that for purposes of prosecuting a person who is alleged to have violated a~~
23 ~~state or federal criminal law, "child" does not include a person who has attained the~~
24 ~~age of 17 years.~~

25 SECTION 2133. 948.11 (2) (am) (intro.) of the statutes is amended to read:

1 948.11 (2) (am) (intro.) Any person ~~who has attained the age of 17 and~~ adult
2 who, with knowledge of the character and content of the description or narrative
3 account, verbally communicates, by any means, a harmful description or narrative
4 account to a child, with or without monetary consideration, is guilty of a Class I
5 felony if any of the following applies:

6 **SECTION 2134.** 948.45 (1) of the statutes is amended to read:

7 948.45 (1) Except as provided in sub. (2), any person ~~17 years of age or older~~
8 adult who, by any act or omission, knowingly encourages or contributes to the
9 truancy, as defined under s. 118.16 (1) (c), of a person ~~17 years of age or under~~ child
10 is guilty of a Class C misdemeanor.

11 **SECTION 2135.** 948.60 (2) (d) of the statutes is amended to read:

12 948.60 (2) (d) A person ~~under 17 years of age~~ child who has violated this
13 subsection is subject to the provisions of ch. 938 unless jurisdiction is waived under
14 s. 938.18 or the person is subject to the jurisdiction of a court of criminal jurisdiction
15 under s. 938.183.

16 **SECTION 2136.** 948.61 (4) of the statutes is amended to read:

17 948.61 (4) A person ~~under 17 years of age~~ child who has violated this section
18 is subject to the provisions of ch. 938, unless jurisdiction is waived under s. 938.18
19 or the person is subject to the jurisdiction of a court of criminal jurisdiction under s.
20 938.183.

21 **SECTION 2137.** 961.01 (5m) of the statutes is created to read:

22 961.01 (5m) "Debilitating medical condition or treatment" has the meaning
23 given in s. 146.44 (1) (b).

24 **SECTION 2138.** 961.01 (12v) of the statutes is created to read:

SECTION 2138

1 961.01 (12v) "Lockable, enclosed facility" means an enclosed indoor or outdoor
2 area that is lockable, or requires a security device, to permit access only by a member
3 of a qualifying patient's treatment team.

4 SECTION 2139. 961.01 (14c) of the statutes is created to read:

5 961.01 (14c) "Maximum authorized amount" means 12 live cannabis plants or
6 3 ounces of usable cannabis.

7 SECTION 2140. 961.01 (14g) of the statutes is created to read:

8 961.01 (14g) "Medication with tetrahydrocannabinols" has the meaning given
9 in s. 146.44 (1) (c).

10 SECTION 2141. 961.01 (17k) of the statutes is created to read:

11 961.01 (17k) "Out-of-state registry identification card" has the meaning given
12 in s. 146.44 (1) (cm).

13 SECTION 2142. 961.01 (19m) of the statutes is created to read:

14 961.01 (19m) "Primary caregiver" has the meaning given in s. 146.44 (1) (d).

15 SECTION 2143. 961.01 (20hm) of the statutes is created to read:

16 961.01 (20hm) "Qualifying patient" has the meaning given in s. 146.44 (1) (e).

17 SECTION 2144. 961.01 (20ht) of the statutes is created to read:

18 961.01 (20ht) "Registry identification card" has the meaning given in s. 146.44
19 (1) (g).

20 SECTION 2145. 961.01 (20t) of the statutes is created to read:

21 961.01 (20t) "Treatment team" means a qualifying patient and his or her
22 primary caregivers.

23 SECTION 2146. 961.01 (21f) of the statutes is created to read:

24 961.01 (21f) "Usable cannabis" means cannabis leaves or flowers but does not
25 include seeds, stalks, or roots or any ingredients combined with the leaves or flowers.

1 **SECTION 2147.** 961.01 (21t) of the statutes is created to read:

2 961.01 (21t) "Written certification" has the meaning given in s. 146.44 (1) (h).

3 **SECTION 2148.** 961.14 (4) (t) 1. of the statutes is amended to read:

4 961.14 (4) (t) 1. Cannabidiol in a form without a psychoactive effect that is
5 dispensed as provided in s. 961.38 (1n) (a) or that is possessed as provided in s. 961.32
6 (2m) (b).

7 **SECTION 2149.** 961.32 (1m) of the statutes is renumbered 961.32.

8 **SECTION 2150.** 961.32 (2m) of the statutes is repealed.

9 **SECTION 2151.** 961.38 (1n) of the statutes is repealed.

10 **SECTION 2152.** 961.41 (1) (h) 1. of the statutes is renumbered 961.41 (1) (h) 1r.
11 and amended to read:

12 961.41 (1) (h) 1r. ~~Two hundred~~ More than 25 grams but not more than 200
13 ~~grams or less, or more than 2 but not more than 4 or fewer~~ plants containing
14 tetrahydrocannabinols, the person is guilty of a Class I felony.

15 **SECTION 2153.** 961.41 (1) (h) 1g. of the statutes is created to read:

16 961.41 (1) (h) 1g. Twenty-five grams or less, or 2 or fewer plants containing
17 tetrahydrocannabinols, the person is guilty of a Class I felony if the person is at least
18 17 years of age and distributes or delivers to a person who is no more than 17 years
19 of age and who is at least 3 years younger than the person distributing or delivering.

20 **SECTION 2154.** 961.41 (1m) (h) 1. of the statutes is amended to read:

21 961.41 (1m) (h) 1. ~~Two hundred~~ More than 25 grams but not more than 200
22 ~~grams or less, or more than 2 but not more than 4 or fewer~~ plants containing
23 tetrahydrocannabinols, the person is guilty of a Class I felony.

24 **SECTION 2155.** 961.41 (1q) (title) of the statutes is repealed and recreated to
25 read:

1 961.41 (1q) (title) TETRAHYDROCANNABINOLS PENALTY AND PROBABLE CAUSE.

2 SECTION 2156. 961.41 (1q) of the statutes is renumbered 961.41 (1q) (a).

3 SECTION 2157. 961.41 (1q) (b) and (c) of the statutes are created to read:

4 961.41 (1q) (b) The following are not sufficient to establish probable cause that
5 a violation of sub. (1) (h) has occurred:

6 1. Odor of marijuana.

7 2. The possession of not more than 25 grams of marijuana.

8 (c) No individual on parole, probation, extended supervision, supervised
9 release, or any other release may have the release revoked for possessing not more
10 than 25 grams of marijuana.

11 SECTION 2158. 961.41 (1r) of the statutes is amended to read:

12 961.41 (1r) DETERMINING WEIGHT OF SUBSTANCE. In determining amounts under
13 s. 961.49 (2) (b), 1999 stats., and subs. (1) and (1m), an amount includes the weight
14 of cocaine, cocaine base, heroin, phencyclidine, lysergic acid diethylamide, psilocin,
15 psilocybin, amphetamine, methamphetamine, tetrahydrocannabinols, synthetic
16 cannabinoids, or substituted cathinones, or any controlled substance analog of any
17 of these substances together with any compound, mixture, diluent, plant material
18 or other substance mixed or combined with the controlled substance or controlled
19 substance analog. In addition, in determining amounts under subs. (1) (h) and (1m)
20 (h), and (3g) (e), the amount of tetrahydrocannabinols ~~means anything included~~
21 ~~under s. 961.14 (4) (t) and includes~~ means the weight of any only marijuana.

22 SECTION 2159. 961.41 (3g) (e) of the statutes is amended to read:

23 961.41 (3g) (e) *Tetrahydrocannabinols*. If a person possesses or attempts to
24 possess more than 25 grams of tetrahydrocannabinols included under s. 961.14 (4)
25 (t), or a controlled substance analog of tetrahydrocannabinols, the person may be

1 fined not more than \$1,000 or imprisoned for not more than 6 months or both upon
2 a first conviction and is guilty of a Class I felony for a 2nd or subsequent offense. For
3 purposes of this paragraph, an offense is considered a 2nd or subsequent offense if,
4 prior to the offender's conviction of the offense, the offender has at any time been
5 convicted of any felony or misdemeanor under this chapter or under any statute of
6 the United States or of any state relating to controlled substances, controlled
7 substance analogs, narcotic drugs, marijuana, or depressant, stimulant, or
8 hallucinogenic drugs.

9 **SECTION 2160.** 961.436 of the statutes is created to read:

10 **961.436 Medical use defense in cases involving**
11 **tetrahydrocannabinols.** (1) A member of a qualifying patient's treatment team
12 has a defense to prosecution under s. 961.41 (1) (h) or (1m) (h) for manufacturing, or
13 possessing with intent to manufacture, tetrahydrocannabinols if all of the following
14 apply:

15 (a) The manufacture or possession is by the treatment team for medication with
16 tetrahydrocannabinols.

17 (b) The amount of cannabis does not exceed the maximum authorized amount.

18 (c) Any live cannabis plants are in a lockable, enclosed facility unless a member
19 of a qualifying patient's treatment team is accessing the plants or has the plants in
20 his or her possession.

21 (d) If the member is a primary caregiver, he or she is not a primary caregiver
22 to more than 10 qualifying patients.

23 (2) A member of a qualifying patient's treatment team has a defense to
24 prosecution under s. 961.41 (1) (h) or (1m) (h) for distributing or delivering, or

SECTION 2160

1 possessing with intent to distribute or deliver, tetrahydrocannabinols to another
2 member of the treatment team if all of the following apply:

3 (a) The distribution, delivery, or possession is by the treatment team for
4 medication with tetrahydrocannabinols.

5 (b) The amount of cannabis does not exceed the maximum authorized amount.

6 (c) Any live cannabis plants are in a lockable, enclosed facility unless a member
7 of a qualifying patient's treatment team is accessing the plants or has the plants in
8 his or her possession.

9 (d) If the member is a primary caregiver, he or she is not a primary caregiver
10 to more than 10 qualifying patients.

11 **(3)** (a) Except as provided in par. (b), a member of a qualifying patient's
12 treatment team has a defense to a prosecution under s. 961.41 (3g) (e) if all of the
13 following apply:

14 1. The possession or attempted possession is by the treatment team for
15 medication with tetrahydrocannabinols.

16 2. The amount of cannabis does not exceed the maximum authorized amount.

17 3. Any live cannabis plants are in a lockable, enclosed facility unless a member
18 of a qualifying patient's treatment team is accessing the plants or has the plants in
19 his or her possession.

20 4. If the member is a primary caregiver, he or she is not a primary caregiver
21 to more than 10 qualifying patients.

22 (b) A person may not assert the defense described in par. (a) if, while he or she
23 possesses or attempts to possess tetrahydrocannabinols, any of the following applies: