

1 253.06 (8) INSPECTION OF PREMISES. The department may visit and inspect each
2 authorized vendor and infant formula supplier and each food direct distribution
3 center, and for such purpose shall be given unrestricted access to the premises
4 described in the authorization or contract.

5 **SECTION 1934b.** 253.06 (9) and (10) of the statutes are created to read:

6 253.06 (9) CONFIDENTIALITY OF APPLICANT AND PARTICIPANT INFORMATION. (a) Any
7 information about an applicant or participant, whether it is obtained from the
8 applicant or participant or another source or is generated as a result of application
9 for the Women, Infants, and Children program, that identifies the applicant or
10 participant or a family member of the applicant or participant is confidential.

11 (b) Except as explicitly permitted under this section, the department shall
12 restrict the use and disclosure of confidential applicant and participant information
13 to any person directly connected with the administration or enforcement of the
14 Women, Infants, and Children program that the department determines has a need
15 to know the information for Women, Infants, and Children program purposes.
16 Persons who may be allowed to access confidential information under this paragraph
17 include personnel from the local agencies, persons under contract with the
18 department to perform research regarding the Women, Infants, and Children
19 program, and persons that are investigating or prosecuting Women, Infants, and
20 Children program violations of federal, state, or local law.

21 (c) The department or any local agency may use or disclose to public
22 organizations confidential applicant and participant information for the
23 administration of other programs that serve individuals eligible for the Women,
24 Infants, and Children program in accordance with 7 CFR 246.26 (h).

1 (d) Staff of the department and local agencies who are required by state law to
2 report known or suspected child abuse or neglect may disclose confidential applicant
3 and participant information without the consent of the participant or applicant to
4 the extent necessary to comply with the law.

5 (e) Except in the case of subpoenas or search warrants, the department and
6 local agencies may disclose confidential applicant and participant information to
7 individuals or entities not listed in this section only if the affected applicant or
8 participant signs a release form authorizing the disclosure and specifying the parties
9 to which the information may be disclosed. The department or local agency shall
10 allow applicants and participants to refuse to sign the release form and shall notify
11 the applicant or participant that signing the form is not a condition of eligibility and
12 refusing to sign the form will not affect the applicant's or participant's application
13 or participation in the Women, Infants, and Children program. Release forms
14 authorizing disclosure to private physicians or other health care providers may be
15 included as part of the Women, Infants, and Children program application or
16 certification process. All other requests for applicants or participants to sign
17 voluntary release forms may occur only after the application and certification
18 process is complete.

19 (f) The department or local agency shall provide to an applicant or participant
20 access to all information he or she has provided to the Women, Infants, and Children
21 program. In the case of an applicant or participant who is an infant or child, the
22 access may be provided to a parent or guardian of the infant or child, assuming that
23 any issues regarding custody or guardianship have been settled. The department or
24 local agency is not required to provide the applicant or participant or parent or
25 guardian of an infant or child applicant or participant access to any other

1 information in the file or record, including documentation of income provided by a
2 3rd party and staff assessments of an applicant or participant's condition or
3 behavior, unless required by law or unless the information supports a state or local
4 agency decision being appealed under 7 CFR 246.9.

5 **(10) CONFIDENTIALITY OF VENDOR INFORMATION.** (a) Any information about a
6 vendor, whether it is obtained from the vendor or another source, that individually
7 identifies the vendor except for the vendor's name, address, telephone number,
8 Internet or electronic mail address, store type, and Women, Infants, and Children
9 program authorization status is confidential. The department shall restrict the use
10 or disclosure of confidential vendor information to any of the following:

11 1. Persons directly connected with the administration or enforcement of the
12 Women, Infants, and Children program or the food stamp program under s. 49.79
13 that the department determines has a need to know the information for purposes of
14 these programs. These persons may include personnel from local agencies and
15 persons investigating or prosecuting violations of Women, Infants, and Children
16 program or food stamp program federal, state, or local laws.

17 2. Persons directly connected with the administration or enforcement of any
18 federal or state law or local ordinance. Before releasing information to a state or local
19 entity, the department shall enter into a written agreement with the requesting
20 party specifying that the information may not be used or redisclosed except for
21 purposes directly connected with the administration or enforcement of the federal or
22 state law or local ordinance.

23 3. A vendor that is subject to an adverse action under sub. (5), including a claim,
24 to the extent that the confidential information concerns the vendor that is subject to
25 the adverse action and is related to the adverse action.

1 (b) The department may disclose to all authorized vendors and applicants to
2 be a vendor sanctions that have been imposed on vendors if the disclosure identifies
3 only the vendor's name, address, length of the disqualification or amount of the
4 monetary penalty, and a summary of the reason for the sanction provided in the
5 notice of adverse action under sub. (5). The information under this paragraph may
6 be disclosed only after all administrative and judicial review is exhausted and the
7 department has prevailed regarding the sanction imposed on the vendor or after the
8 time period for requesting administrative and judicial review has expired.”.

9 **76.** Page 445, line 17: after that line insert:

10 “SECTION 1935w. 253.07 (1) (a) 3. of the statutes is created to read:

11 253.07 (1) (a) 3. Pregnancy termination.

12 SECTION 1936w. 253.07 (1) (b) 3. of the statutes is created to read:

13 253.07 (1) (b) 3. Pregnancy termination.

14 SECTION 1937w. 253.07 (5) (b) (intro.) of the statutes is renumbered 253.07 (5)

15 (b) and amended to read:

16 253.07 (5) (b) ~~Subject to par. (c), a~~ A public entity that receives women's health
17 funds under this section may provide some or all of the funds to other public or
18 private entities ~~provided that the recipient of the funds does not do any of the~~
19 ~~following:~~

20 SECTION 1938w. 253.07 (5) (b) 1. to 3. of the statutes are repealed.

21 SECTION 1939w. 253.07 (5) (c) of the statutes is repealed.

22 SECTION 1940w. 253.075 of the statutes is repealed.”.

23

77. Page 446, line 1: delete lines 1 ^{and} 2 and substitute:

1 “254.151 (2m) Award grants for residential lead hazard abatement, residential
2 lead hazard reduction, and lead abatement worker training.”.

3 **78.** Page 448, line 25: delete the material beginning with that line and ending
4 with page 449, line 2, and substitute:

5 “**SECTION 1950m.** 255.06 (2) (i) of the statutes is amended to read:

6 255.06 (2) (i) *Multiple sclerosis services.* Allocate and expend at least up to
7 \$60,000 as reimbursement for the provision of multiple sclerosis services to women.”.

8 **79.** Page 454, line 12: after that line insert:

9 “**SECTION 2093k.** 632.796 of the statutes is created to read:

10 **632.796 Drug cost report. (1) DEFINITION.** In this section, “disability
11 insurance policy” has the meaning given in s. 632.895 (1) (a).

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

18 **SECTION 2094k.** 632.865 (3) of the statutes is created to read:

19 632.865 (3) **REGISTRATION REQUIRED.** (a) No person may perform any activities
20 of a pharmacy benefit manager in this state without first registering with the
21 commissioner under this subsection.

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

1 **SECTION 2095k.** 632.866 of the statutes is created to read:

2 **632.866 Prescription drug cost reporting. (1) DEFINITIONS.** In this section:

3 (a) "Brand-name drug" means a prescription drug approved under 21 USC 355
4 (b) or 42 USC 262.

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

7 (c) "Disability insurance policy" has the meaning given in s. 632.895 (1) (a).

8 (d) "Generic drug" means a prescription drug approved under 21 USC 355 (j).

9 (e) "Manufacturer" has the meaning given in s. 450.01 (12). "Manufacturer"
10 does not include an entity that is engaged only in the dispensing, as defined in s.
11 450.01 (7), of a brand-name drug or a generic drug.

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

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

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

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

23 (j) "Wholesale acquisition cost" means the most recently reported
24 manufacturer list or catalog price for a brand-name drug or a generic drug available

1 to wholesalers or direct purchasers in the United States, before application of
2 discounts, rebates, or reductions in price.

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

9 (b) A manufacturer shall notify the commissioner if it is increasing the
10 wholesale acquisition cost of a generic drug by more than 25 percent or by more than
11 \$300 during any 12-month period or if it intends to introduce to market a generic
12 drug that has an annual wholesale acquisition cost of \$3,000 or more.

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

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

23 (4) REBATES AND PRICE CONCESSIONS. By March 1 annually, each pharmacy
24 benefit manager shall report to the commissioner the amount received from
25 manufacturers as drug rebates and the value of price concessions, expressed as a

1 percentage of the wholesale acquisition cost, provided by manufacturers for each
2 drug.

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

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

12 (a) The terms of the programs.

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

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

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

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

1 (b) The commissioner shall analyze data collected under this section and
2 publish annually a report on emerging trends in prescription prices and price
3 increases, and shall annually conduct a public hearing based on the analysis under
4 this paragraph. The report under this paragraph shall include analysis of
5 manufacturer prices and price increases, analysis of hospital-specific margins and
6 how that revenue is spent or allocated on a hospital-specific basis, and analysis of
7 how pharmacy benefit manager discounts and net costs compare to retail prices paid
8 by patients.

9 (9) ALLOWING COST DISCLOSURE TO INSURED. The commissioner shall ensure that
10 every disability insurance policy that covers prescription drugs or biological products
11 does not restrict a pharmacy or pharmacist that dispenses a prescription drug or
12 biological product from informing and does not penalize a pharmacy or pharmacist
13 for informing an insured under a policy of a difference between the negotiated price
14 of, or copayment or coinsurance for, the drug or biological product under the policy
15 and the price the insured would pay for the drug or biological product if the insured
16 obtained the drug or biological product without using any health insurance
17 coverage.”.

18 ✓ **80.** Page 460, line 2: after that line insert:

19 “SECTION 2264g. 2017 Wisconsin Act 370, Section 44 (2) and (3) are repealed.”.

20 **81.** Page 488, line 8: after that line insert:

21 (1) PRESCRIPTION DRUG POOLING STUDY. The department of employee trust
22 funds, in consultation with the department of corrections, the department of health
23 services, and the department of veterans affairs, shall study the options and
24 opportunities for cost savings to state agencies through prescription drug pooling.

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1 No later than January 1, 2020, the department of employee trust funds shall submit
2 a report of the study to the governor and the appropriate standing committees of the
3 legislature, as determined by the speaker of the assembly and the president of the
4 senate, in the manner provided under s. 13.172 (3).”

5 **82.** Page 488, line 16: after that line insert:

6 “(1s) FORENSIC UNIT EXPANSION AT SAND RIDGE SECURE TREATMENT CENTER. From
7 the appropriation under s. 20.435 (2) (bm), the department shall allocate \$3,430,900
8 in fiscal year 2020-21 and create 36.50 FTE GPR positions to operate a 20-bed unit
9 for forensic patients at the Sand Ridge Secure Treatment Center.”.

10 (1t) YOUTH CRISIS STABILIZATION FACILITIES AND PEER-RUN RESPITE CENTERS FOR
11 VETERANS. The department of health services shall award in each fiscal year \$996,400
12 in grants to youth crisis stabilization facilities and \$450,000 in grants to a peer-run
13 respite center for veterans.”.

14 **83.** Page 488, line 17: delete the material beginning with that line and ending
15 with page 489, line 3, and substitute:

16 “(2b) MEDICAL ASSISTANCE REIMBURSEMENT FOR SERVICES PROVIDED THROUGH
17 TELEHEALTH. The department of health services shall develop, by rule, a method of
18 reimbursing providers under the Medical Assistance program for a service that is
19 covered by the Medical Assistance program under subch. IV of ch. 49 and that
20 satisfies any of the following:

21 (a) The service is a consultation between a provider at an originating site and
22 a provider at a remote location using a combination of interactive video, audio, and
23 externally acquired images through a networking environment.

1 (b) The service is an asynchronous transmission of digital clinical information
2 through a secure electronic system from a Medical Assistance recipient or provider
3 to a provider.”

4 **84.** Page 489, line 3: after that line insert:

5 “(2g) CHILDLESS ADULTS DEMONSTRATION PROJECT REFORM WAIVER. The
6 department of health services may submit a request to the federal department of
7 health and human services to modify or withdraw the waiver granted under s. 49.45
8 (23) (g), 2017 stats.”

9 (3g) ACADEMIC DETAILING TRAINING PROGRAM.

10 (c) In this subsection, “academic detailing” means a teaching model under
11 which health care experts are taught techniques for engaging in interactional
12 educational outreach to other health care providers and clinical staff to provide
13 information on evidence-based practices and successful therapeutic interventions
14 with the goal of improving patient care.

15 (d) The department of health services shall establish and implement a 2-year
16 academic detailing primary care clinic dementia training program in 10 primary
17 care clinics in the state through a contract with the Wisconsin Alzheimer’s Institute.

18 (e) The department shall, as part of the training program, provide primary care
19 providers with clinical training and access to educational resources on best practices
20 for diagnosis and management of common cognitive disorders, and referral
21 strategies to dementia specialists for complicated or rare cognitive or behavioral
22 disorders.

23 (f) The department shall ensure that the training program under this
24 subsection includes at least the following three components:

check
component

1 1. The most current research on effective clinical treatments and practices is
2 systematically evaluated by the academic detailing team.

3 2. Information gathered and evaluated under subd. 1. is packaged into an
4 easily accessible format that is clinically relevant, rigorously sourced, and
5 compellingly formatted.

6 3. Training is provided for clinicians to serve as academic detailers that equips
7 them with clinical expertise and proficiency in conducting an interactive educational
8 exchange to facilitate individualized learning among participating primary care
9 practitioners in the target clinics.”.

10 **85.** Page 489, line 14: after that line insert:

11 “(4c) CHILDLESS ADULTS DEMONSTRATION PROJECT. The department of health
12 services shall submit any necessary request to the federal department of health and
13 human services for a state plan amendment or waiver of federal Medicaid law or to
14 modify or withdraw from any waiver of federal Medicaid law relating to the childless
15 adults demonstration project under s. 49.45 (23), 2017 stats., to reflect the
16 incorporation of recipients of Medical Assistance under the demonstration project
17 into the BadgerCare Plus program under s. 49.471 and the termination of the
18 demonstration project.”.

19 **86.** Page 489, line 15: delete lines 15 to 20 and substitute:

20 “(6b) EVIDENCE-BASED ORAL HEALTH GRANTS AND SEAL-A-SMILE PROGRAM.
21 Notwithstanding s. 250.10 (1m) (b), in fiscal year 2019-20, the department of health
22 services shall, from the appropriation under s. 20.435 (1) (de), award to qualified
23 applicants grants totaling \$50,000 for fluoride varnish and other evidence-based

1 oral health activities, \$525,000 for school-based preventive dental services, and
2 \$100,000 for school-based restorative dental services.”.

3 **87.** Page 489, line 20: after that line insert:

4 “(6d) PRESCRIPTION DRUG IMPORTATION PROGRAM. The department of health
5 services shall submit the first report required under s. 250.048 (5) by the next
6 January 1 or July 1, whichever is earliest, that is at least 180 days after the date the
7 prescription drug importation program is fully operational under s. 250.048 (4). The
8 department of health services shall include in the first 3 reports submitted under s.
9 250.048 (5) information on the implementation of the audit functions under s.
10 250.048 (1) (n).”.

11 **88.** Page 490, line 5: after that line insert:

12 (8m) COMMUNITY-BASED DOULAS. From the appropriation under s. 20.435 (4)
13 (bm), the department of health services shall in fiscal year 2019-20 allocate \$192,000
14 to public or private entities, American Indian tribes or tribal organizations, or
15 community-based organizations for grants for community-based doulas. The
16 recipients of the grants shall use the moneys to identify and train local community
17 workers to mentor pregnant women.

18 **89.** Page 490, line 6: delete lines 6 to 11 and substitute:

19 “(9b) DENTAL SERVICES UNDER MEDICAL ASSISTANCE. During the 2019-21 fiscal
20 biennium, the department of health services shall allocate a total of \$2,000,000 in the
21 2019-20 fiscal year and \$3,000,000 in the 2020-21 fiscal year from all funding
22 sources to increase reimbursement rates for dental services that are covered under
23 the Medical Assistance program under subch. IV of ch. 49 and that are provided to
24 recipients of Medical Assistance who have disabilities.”.

1 **90.** Page 490, line 12: delete lines 12 to 16 and substitute:

2 “(10c) INFANT MORTALITY PREVENTION PROGRAM. The department of health
3 services shall allocate 5.0 FTE positions that are authorized for the department of
4 health services to staff an infant mortality prevention program. The department of
5 health services shall report in its 2021-23 budget request any necessary budget
6 adjustments to reflect this allocation of positions.”

7 **91.** Page 491, line 3: delete lines 3 to 15.

8 **92.** Page 491, line 20: delete the material beginning with “facilities;” and
9 ending with “2020-21” on line 23 and substitute “and an additional 1.5 percent
10 annual rate increase”.

11 **93.** Page 492, line 1: delete lines 1 to 7 and substitute:

12 “(12b) MEDICAL ASSISTANCE REIMBURSEMENT RATE INCREASE FOR DIRECT CARE IN
13 PERSONAL CARE AGENCIES. The department of health services shall increase the
14 Medical Assistance rates paid for direct care to agencies that provide personal care
15 services 1.5 percent annually to support staff in those agencies who perform direct
16 care.”

17 **94.** Page 492, line 7: after that line insert:

18 **(13)** LEAD EXPOSURE AND POISONING PREVENTION STAFF. The authorized FTE
19 positions for the department of health services are increased by 1.0 GPR project
20 position for the period ending June 30, 2021, and 1.14 GPR positions beginning on
21 July 1, 2019, to be funded from the appropriation under s. 20.435 (1) (a), for the
22 purpose of administering the department’s lead public health outreach initiative and
23 for enhancing the department’s lead poisoning prevention programs.”

24 **95.** Page 492, line 18: after that line insert:



PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION
ASSEMBLY AMENDMENT ,
TO ASSEMBLY BILL 56

1 At the locations indicated, amend the bill, as shown by assembly substitute
2 amendment 1, as follows:

3 1. Page 460, line 22: after that line insert:

4 "(4f) PSYCHIATRIC CARE TECHNICIANS; PAY INCREASES.

5 (a) In this subsection:

6 1. "Psychiatric care technician" means an individual classified as a psychiatric
7 care technician who is employed by the state and whose principal duties are
8 performing individual treatment programming and maintaining internal security
9 among individuals who are committed to any of the following:

10 a. The secure mental health facility established under s. 46.055.

11 b. The Wisconsin Resource Center established under s. 46.056.

12 c. The Mendota Juvenile Treatment Center established under s. 46.057.

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1 d. The Winnebago Mental Health Institute.

2 2. "Psychiatric care technician-advanced" means an individual classified as a
3 psychiatric care technician-advanced who is employed by the state and whose
4 principal duties are performing individual treatment programming and
5 maintaining internal security among individuals who are committed to any of the
6 following:

7 a. The secure mental health facility established under s. 46.055.

8 b. The Wisconsin Resource Center established under s. 46.056.

9 c. The Mendota Juvenile Treatment Center established under s. 46.057.

10 d. The Winnebago Mental Health Institute.

11 (b) The administrator of the division of personnel management in the
12 department of administration shall specify in the compensation plan under s. 230.12
13 for the 2019-21 biennium that the minimum starting wage for psychiatric care
14 technicians is \$19 per hour.

15 (c) The administrator of the division of personnel management in the
16 department of administration shall specify in the compensation plan under s. 230.12
17 for the 2019-21 biennium that the minimum starting wage for psychiatric care
18 technicians-advanced is \$19.91 per hour.

19 (d) The administrator of the division of personnel management shall specify in
20 the compensation plan under s. 230.12 for the 2019-21 biennium that the wage for
21 current psychiatric care technicians is increased by \$2.35 per hour, and the wage for
22 current psychiatric care technicians-advanced is increased by \$2.46 per hour.

23 (e) If, on the effective date of this paragraph, the compensation plan under s.
24 230.12 has been adopted for the 2019-21 biennium and the compensation plan does
25 not include the minimum hourly pay required under pars. (b) to (d), by no later than

1 30 days after the effective date of this paragraph, the administrator of the division
2 of personnel management in the department of administration shall propose an
3 amendment under s. 230.12 (3) (c) to include the minimum hourly pay required
4 under pars. (b) to (d) in the compensation plan for the 2019-21 biennium.

5 (5f) CORRECTIONAL OFFICERS AND YOUTH COUNSELORS; PAY INCREASES.

6 (a) In this section:

7 1. "Correctional officer" means an individual classified as a correctional officer
8 who is employed by the state and whose principal duty is any of the following:

9 a. The supervision of inmates at a prison, as defined in s. 302.01.

10 b. The supervision of persons committed under s. 980.06 at the secure mental
11 health facility established under s. 46.055 or the Wisconsin resource center
12 established under s. 46.056.

13 2. "Correctional sergeant" means an individual classified as a correctional
14 sergeant who is employed by the state and whose principal duty is any of the
15 following:

16 a. The supervision of inmates at a prison, as defined in s. 302.01.

17 b. The supervision of persons committed under s. 980.06 at the secure mental
18 health facility established under s. 46.055 or the Wisconsin resource center
19 established under s. 46.056.

20 3. "Youth counselor" means an individual classified as a youth counselor who
21 is employed by the state and whose principal duty is the supervision of juveniles held
22 in a juvenile correctional facility, as defined in s. 938.02 (10p).

23 4. "Youth counselor-advanced" means an individual classified as a youth
24 counselor-advanced who is employed by the state and whose principal duty is the

1 supervision of juveniles held in a juvenile correctional facility, as defined in s. 938.02
2 (10p).

3 (b) The administrator of the division of personnel management in the
4 department of administration shall specify in the compensation plan under s. 230.12
5 for the 2019-21 biennium that the minimum wage for correctional officers and youth
6 counselors is \$19 per hour.

7 (c) The administrator of the division of personnel management in the
8 department of administration shall specify in the compensation plan under s. 230.12
9 for the 2019-21 biennium that the minimum wage for correctional sergeants and
10 youth counselors-advanced is \$19.91 per hour.

11 (d) The administrator of the division of personnel management shall specify in
12 the compensation plan under s. 230.12 for the 2019-21 biennium that the wage for
13 current correctional officers and youth counselors is increased by \$2.35 per hour, and
14 the wage for current correctional sergeants and youth counselors-advanced is
15 increased by \$2.46 per hour.

16 (e) If, on the effective date of this paragraph, the compensation plan under s.
17 230.12 has been adopted for the 2019-21 biennium and the compensation plan does
18 not include the minimum hourly pay required under pars. (b) to (d), by no later than
19 30 days after the effective date of this paragraph, the administrator of the division
20 of personnel management in the department of administration shall propose an
21 amendment under s. 230.12 (3) (c) to include the minimum hourly pay required
22 under pars. (b) to (d) in the compensation plan for the 2019-21 biennium.

23 (6f) CORRECTIONAL OFFICERS AND CORRECTIONAL SERGEANTS AND YOUTH
24 COUNSELORS AND YOUTH COUNSELORS-ADVANCED AND PSYCHIATRIC CARE TECHNICIANS;
25 WAGE INCREASES. The amounts of the estimated expenditures in the compensation

1 reserves general purpose revenue shown in the schedule under s. 20.005 (1) are
2 increased by \$8,000,000 in fiscal year 2019-20 and by \$8,000,000 in fiscal year
3 2020-21.”

4 **2.** Page 507, line 21: after that line insert:

5 “(1e) PSYCHIATRIC CARE TECHNICIANS, CORRECTIONAL OFFICERS AND YOUTH
6 COUNSELORS; COMPENSATION INCREASE. SECTION 9101 (4f), (5f), and (6f) of this act takes
7 effect on January 1, 2020.”

8 (END)

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PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION
SENATE AMENDMENT ,
TO ASSEMBLY BILL 56

1 At the locations indicated, amend the bill as follows:

Insert
7-14

2 **1.** Page 146, line 4: after that line insert:
3 “(dg) Regional crisis stabilization facil-
4 ities GPR A -0- 2,500,000”.

Insert
9-20

5 **2.** Page 255, line 18: after that line insert:
6 “SECTION 205c. 20.435 (5) (dg) of the statutes is created to read:
7 20.435 (5) (dg) *Regional crisis stabilization facilities*. The amounts in the
8 schedule to provide grants to regional crisis stabilization facilities under s. 51.03
9 (7).”.

Insert
10-8

10 **3.** Page 353, line 11: delete the material beginning with that line and ending
11 with page 354, line 17 and substitute:

1 “49.45 (41) ~~MENTAL HEALTH-CRISIS~~ CRISIS INTERVENTION SERVICES. (a) In this
2 subsection, “~~mental health crisis intervention services~~” means crisis intervention
3 services for the treatment of mental illness, intellectual disability, substance abuse,
4 and dementia that are provided by a ~~mental health~~ crisis intervention program
5 operated by, or under contract with, a county, if the county is certified as a medical
6 assistance provider.

7 (b) If a county elects to become certified as a provider of ~~mental health~~ crisis
8 intervention services, the county may provide ~~mental health~~ crisis intervention
9 services under this subsection in the county to medical assistance recipients through
10 the medical assistance program. A county that elects to provide the services shall
11 pay the amount of the allowable charges for the services under the medical
12 assistance program that is not provided by the federal government. The department
13 shall reimburse the county under this subsection only for the amount of the allowable
14 charges for those services under the medical assistance program that is provided by
15 the federal government.

16 **SECTION 681b.** 49.45 (41) (c) of the statutes is created to read:

17 49.45 (41) (c) Notwithstanding par. (b), if a county elects to deliver crisis
18 intervention services under the Medical Assistance program on a regional basis
19 according to criteria established by the department, all of the following apply:

20 1. After January 1, 2020, the department shall require the county to annually
21 contribute for the crisis intervention services an amount equal to 75 percent of the
22 annual average of the county’s expenditures for crisis intervention services under
23 this subsection in calendar years 2016, 2017, and 2018, as determined by the
24 department.

Continue Insert 16-3

Item	Agency	Location
Home Visitation Program	DCF-TANF	#191- C1
Comprehensive Mental Health Consultation Program Planning	DHS- Behavioral Health	Backpage 2
Opioid and Methamphetamine Treatment Center Grants	DHS- Behavioral Health	Backpage 3
Crisis Team Grants	DHS- Behavioral Health	Backpage 4
Family Planning and Women's Health Block Grant	DHS- Public Health	Items Removed (LFB p.203, #14)
Prescription Drug Importation Program	DHS- Public Health	Items Removed (LFB p. 205, #15)
Lead Exposure and Poisoning Prevention	DHS- Public Health	#390- Ait 1
Birth to 3 Program Expansion	DHS- Public Health	#391- Ait 1
Tobacco Use Control	DHS- Public Health	#392- Ait 1
Dementia Initiatives	DHS- Public Health	#393- A1/B1
Dental Services - Public Health	DHS- Public Health	#394- Ait 1
Healthy Aging Grant	DHS- Public Health	#395- Ait 1
Minority Health program grants	DHS- Public Health	Backpage 7
Well Woman Program	DHS- Public Health	Backpage 11
Infant Mortality Prevention	DHS- Public Health	Backpage 12
Special Supplemental Nutrition Program for WIC	DHS- Public Health	Backpage 16
Full Medicaid Expansion	DHS-Medical Assistance	Items Removed (LFB p.165, #3)
Prescription Drug Copayments	DHS-Medical Assistance	Items Removed (LFB p.175, #16)
Childless Adult Demonstration	DHS-Medical Assistance	Items Removed (LFB p.185, #28)
Hospital Supplement Payments	DHS-Medical Assistance	#361-A1, B1, C1, D1, E1
Medical Assistance Cost-Continue	DHS-Medical Assistance	#360-Ait 1
Physician and Behavioral Health Services	DHS-Medical Assistance	#363-A1, B1
Crisis Intervention Services & Regional Stabilization Grants	DHS-Medical Assistance	#362-A1, B2, C1
Telehealth Expansion	DHS-Medical Assistance	Backpage 17
Dental Services for Individuals with Disabilities	DHS-Medical Assistance	Backpage 18
Behavioral Health Technology - Incentive Payments	DHS-Medical Assistance	Backpage 19
Substance Abuse Hub-and-Spoke Treatment Model	DHS-Medical Assistance	Backpage 20
FamilyCare Direct Care Funding	DHS-Medical Assistance	#368-Ait 1
Community Health Benefit	DHS-Medical Assistance	#364- Ait 1
Dental Access Incentives	DHS-Medical Assistance	#365- Ait 1
Expand post-partum MA eligibility	DHS-Medical Assistance	#367- Ait 1
Nursing Home Reimbursement rates	DHS-Medical Assistance	#369- Ait 1

Personal Care reimbursement rates	DHS-Medical Assistance	#370- Alt 1
Doula Services	DHS-Medical Assistance	Backpage 21
MA Reimbursement for Clinical Consultations	DHS-Medical Assistance	Backpage 22
SeniorCare Cost-to-Continue	DHS-Medical Assistance	#366 - Approve Mod
Prescription Drug Pooling Study	ETF	Items Removed (LFB p. 123, #12)
Prescription Drug Pricing and Cost Reporting	OCI	Item Removed (LFB p. 235, #7)
Healthcare Stability Plan	OCI	#440, Alt 1
Healthcare Outreach Positions	OCI	#442, Alt 1

Dodge, Tamara

From: Dodge, Tamara
Sent: Friday, June 21, 2019 3:14 PM
To: Groshek, Dave
Cc: Champagne, Rick; Hanaman, Cathlene
Subject: RE: Hintz Budget Amendments

Got it, Dave. Will do.

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: Groshek, Dave <Dave.Groshek@legis.wisconsin.gov>
Sent: Friday, June 21, 2019 2:57 PM
To: Champagne, Rick <Rick.Champagne@legis.wisconsin.gov>; Hanaman, Cathlene <Cathlene.Hanaman@legis.wisconsin.gov>
Cc: Dodge, Tamara <Tamara.Dodge@legis.wisconsin.gov>
Subject: RE: Hintz Budget Amendments

Rick, Cathlene and Tami-

For our healthcare omnibus amendment, can we have the following pieces added. This should be it for the health omnibus.

LFB Paper 406 – Alt 1

http://docs.legis.wisconsin.gov/misc/lfb/budget/2019_21_biennial_budget/102_budget_papers/406_health_services_forennsic_unit_expansion_at_sand_ridge_secure_treatment_center.pdf

LFB Paper 405 – Alt 1

http://docs.legis.wisconsin.gov/misc/lfb/budget/2019_21_biennial_budget/102_budget_papers/405_health_services_winnebago_mental_health_institute_operations.pdf

LFB Paper 410 – Alt 1a and 1b

http://docs.legis.wisconsin.gov/misc/lfb/budget/2019_21_biennial_budget/102_budget_papers/410_health_services_youth_crisis_stabilization_facility_and_peer_run_respite_centers_for_veterans.pdf

LFB Paper 172 – Alt 1 and 4b

http://docs.legis.wisconsin.gov/misc/lfb/budget/2019_21_biennial_budget/102_budget_papers/172_budget_management_and_compensation_reserves_compensation_for_certain_correctional_positions.pdf

Thanks so much,

Dave

Dave Groshek

Legislative Director
Office of Representative Gordon Hintz
(o)608-266-2254
(tf)888-534-0054

From: Groshek, Dave
Sent: Wednesday, June 19, 2019 5:36 PM
To: Champagne, Rick <Rick.Champagne@legis.wisconsin.gov>; Hanaman, Cathlene <Cathlene.Hanaman@legis.wisconsin.gov>
Cc: Pritzkow, Emily <Emily.Pritzkow@legis.wisconsin.gov>
Subject: Hintz Budget Amendments

Rick and Cathlene-

Attached, you will find five spreadsheets with our budget amendments. On two of the spreadsheets (Hintz_Higher Education Omnibus & Hintz_Health Omnibus), you will notice that a couple of the items are in bold. Those are in bold because I will need to speak to you about those Thursday afternoon sometime. In addition, I may have one addition to the Hintz_Health Omnibus amendment. I will also contact you tomorrow on that piece either way.

Please let me know if you have any questions or need clarification on any of these items. If I am not in the office, I can also be reached on my cell phone at 414-559-7094.

Thank you very much,

Dave

Dave Groshek

Legislative Director
Office of Representative Gordon Hintz
(o)608-266-2254
(tf)888-534-0054