

An Overview of Major Health-related Bills in the 2011-2012 Legislative Session

April 4, 2012

The following document provides a summary of the major bills relating to health and health care that were considered by the Wisconsin Legislature during the 2011-12 session, which came to a close in March.

This list does not include issues that were addressed in the budget repair and budget bills. See the Wisconsin Budget Project's [Comparative Analysis of the 2011-13 Biennial Budget](#) for more information on those issues.

As a result of a policy-making power shift approved in the budget repair and budget bills, changes to BadgerCare are now primarily the responsibility of the executive branch. Our summaries and analysis of the proposed BadgerCare changes and updates on their status are posted on the following WCCF webpage: [2011-13 DHS Medicaid/BadgerCare Cuts](#).

I. Bills approved by the Legislature and sent to Governor for his signature

All of the following bills were approved by both houses of the Legislature and have been sent to the Governor for his signature. In cases where he has signed the bill, we have included the Act number (and we will update this after he completes action on all the bills that the Legislature approved).

[Removing the Cap on Family Care \(SB 380, AB 477, WI Act 127\)](#) – This legislation removes the cap on Family Care and similar programs that provide community-based long-term care, and it allows the expansion of Family Care into the 15 counties that don't already have it. An amendment changes the Joint Finance Committee review process for expansions to new counties by allowing the committee to block an expansion by not taking action on the contract developed by a county and the Department of Health Services (DHS). (Read more in the Jan. 12th [WCCF blog](#) post.)

[Repeal of the Healthy Youth Act \(SB 237, AB 337, WI Act 216\)](#) – This controversial bill repeals the Healthy Youth Act, which had required sex education classes to include teaching about contraception. As a result of this change (which WCCF opposed), school districts will soon be able to teach abstinence-only sex education. (Read more in the [WI Academy of Pediatrics' position statement](#).)

[Medicaid Payer of Last Resort \(SB 487, AB 554, WI Act 189\)](#) – This bill enhances the ability of DHS to implement third-party liability for medical procedures, to help ensure that Medicaid is the payer of last resort. This policy, which was part of the Medicaid efficiencies proposed by DHS in the fall of 2011, expands the state database on private health insurance coverage to self-funded plans and limited benefit coverage. The Department estimates savings of between \$1.1 million and \$1.6 million GPR.

[Purchase of Tobacco Products for Minors \(AB 93, WI Act 249\)](#) – This legislation prohibits the purchase of tobacco products for distribution to minors.

[Administration of Medication to Pupils \(SB 45, AB 62, WI Act 86\)](#) – This new law, Act 86, eliminates the requirement that a nurse who distributes medication to pupils have a bachelor’s degree from an approved nursing program. Under ACT 86, the school nurse can be approved by the district if he or she has successfully completed a course, determined to be satisfactory to DPI, in public health or community health.

[Treatments of Concussions and Other Head Injuries Sustained in Youth Athletic Activities \(AB 259, SB 243, WI Act 172\)](#) – This new law, which WCCF supported, creates guidelines for treating concussions and other head injuries sustained in youth athletic activities. (Read more in the [Wisconsin Medical Society’s press release](#).)

[Change of Terminology for Those with Intellectual Disability \(SB 377, AB 471, WI Act 126\)](#) – WCCF supported this legislation, which eliminates the words “mentally retarded” and “mental retardation” in the statutes and replaces them with “intellectual disability.”

[Surgical Centers \(SB-297, WI Act 191\)](#) – As first introduced, this bill would have eliminated the ambulatory surgical center assessment, effective in July 2013. However, the amended version that was signed into law continues the assessment, as long as the state is able to use it to draw down federal Medicaid matching funds.

[Medical Assistance Asset Verification \(SB-474, AB 553, WI Act 192\)](#) – Current law requires matching financial records for Medical Assistance eligibility for applicants that require asset verification. This bill enhances the ability of DHS to access financial records it needs to conduct the required verification of assets. It also prohibits DHS from disclosing or retaining information from financial institutions for non-MA applicants, and ensures that financial institutions are not liable for actions taken in compliance with this program.

[Additional Barriers to Abortion Access and Interfering with Patient -Physician Relationship \(SB-306, WI Act 217\)](#) – The WI Medical Society and Wisconsin Alliance for Women’s Health opposed this bill, which further infringes into doctor-patient counseling and protocol for abortions, including a mandated physical exam, in-person dispensing of abortion-inducing drugs, and further regulation of informed consent. (Read more in the [testimony](#) of the Wisconsin Alliance for Women’s Health, and the Medical Society’s [press release](#).)

[Abortion Ban in State Health Insurance Exchange \(SB-92, WI Act 218\)](#) – This bill bans private insurance coverage of abortions in any health insurance exchange operating in Wisconsin. (Read more on the Wisconsin Alliance for Women’s Health’s [policy tracker](#) page.)

[Expanded Authority of Physician Assistants \(SB 421, Act 161, WI Act 161\)](#) – This new law expands the authority of physician assistants (PAs) to perform specific independent tasks. It allows them to order physical therapy services, patient restraints, home health services, and conduct DOT required drivers’ license medical examinations. (For more information, see the bill author’s [sign-on memo](#).)

[Income Tax Credit for Health Savings Accounts \(SB 1, WI Act 1\)](#) – This January 2011 Special Session bill adopted federal provisions of the Internal Revenue Code, allowing individuals to claim a nonrefundable state income tax credit for contributing to a health savings account.

II. Bills that weren't approved by the Legislature

These bills failed to win approval in both houses of the Legislature. All of these bills died at the conclusion of the March floor period, and they would have to be reintroduced to be considered next year.

[Repeal Ability of DHS to Make Changes to Medicaid \(AB 339, SB 232\)](#) – This bill, which WCCF supported, would have repealed the authority of the Department of Health Services Secretary to make eligibility and other changes to BadgerCare and Medicaid without approval from the full legislature.

[Restore BadgerCare \(AB 697, SB 538\)](#) – WCCF supported this legislation, which would have stopped DHS from implementing changes to BadgerCare that could have resulted in more than 64,000 Wisconsinites losing their coverage. (The number expected to lose BadgerCare coverage is lower now because federal officials were unwilling to approve most of the proposals that would have reduced the number of children enrolled.) The bill would have closed a new corporate tax loophole to fund the measure. (Read more in WCCF's Feb. 28 [blog post](#).)

[Federal Health Care Implementation \(SB 206\)](#) – This legislation, which we backed, would have begun implementation of the Affordable Care Act (ACA) in Wisconsin. (Read more in WCCF's September 2011 [blog post](#).)

[Implementation of Federal Health Care Reform \(AB 210\)](#) – This bill would have brought state statutes relating to insurance regulation into compliance with the federal health care reform law, as long as that law was in force. The bill had the strong backing of the insurance industry and was approved by a wide margin in the Assembly, but was blocked a committee chair in the Senate. (Read more in the [Feb. 7 WCCF blog post](#).)

[Reports on Implementation of Federal Health Reform \(AB 530\)](#) – AB 530 would have required reporting about the “costs to taxpayers of implementing ObamaCare in the state.” It did not require any reporting of the benefits.

[Restricting Agency Implementation of Federal Health Care Reform \(AB 531\)](#) – WCCF opposed this bill, which would have mandated that all implementation of the Affordable Care Act go through the full legislative process. Although we support legislative oversight of policy decisions, we thought this bill went much too far in limiting the authority of the executive branch to accept federal funding and initiate the rulemaking process. (Read more in the [Feb. 24 WCCF Blog post](#).)

[Prohibit Requiring a Person to Purchase Health Care \(SJR 21\)](#) – This constitutional amendment would provide that the people have the right to purchase private health care coverage, and it would prohibit enactment of laws that require any person to obtain or maintain health insurance coverage or to participate in any health care system or plan. The joint resolution was approved by the Senate, but didn't move forward in the Assembly.

[Readability of Insurance Policies \(AB 640, SB 469\)](#) – These companion bills would have required that insurance policies are in a format that is readable and understandable to the consumer, and they would have clarified that consumer insurance policies include both health care plans and disability income insurance policies.

[Requiring Documentary Evidence for Public Assistance Programs \(AB 222\)](#) – WCCF opposed this legislation that would have created additional red tape for enrolling in public assistance programs. We have frequently seen that requiring additional documentation denies benefits to people that are legally eligible to receive benefits.

[Restores Family Planning Services \(AB 348, AB 349, SB 279, SB 282\)](#) – These bills, which we supported, would protect the current state family planning programs. The state budget gave authority to the Department of Health Services Secretary to make cuts in those programs. The DHS Secretary has not used his new authority to make any changes to family planning, but still could under the state budget.

[Family Medical Leave \(SB 8\)](#) – WCCF opposed this bill, which would have weakened the state family medical leave law by repealing the portions that are stronger than the federal medical leave law.

[Workplace Wellness Tax Credits \(AB 220, SB 164\)](#) – This bill would have created an income and franchise tax credit for workplace wellness programs. Amendments were introduced and debated that would have limited the credit to small businesses and new workplace wellness programs. The amended bill was approved by the Senate and Assembly standing committees, but the Assembly referred it to the Joint Committee on Finance where it died.

[Creating the Badger Health Benefit Authority \(SB 273\)](#) – SB 273 would have created an independent authority to implement part of the federal health care reform law. The bill would have authorized stabling a Small Business Health Options Program (SHOP) and an individual exchange designed to bring increased cost containment and price transparency to health insurance. (Read more in Senator Vinehout's [sign-on memo](#).)

[Social and Financial Impact Reports on Health Insurance Mandates \(AB 692\)](#) – This bill would have expanded the current law requirement that the Commissioner of Insurance prepare an impact report on any bill including a health insurance mandate affecting an insurance plan, policy, or contract to include any amendment, as well as bill, containing an insurance mandate.

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