



State of Wisconsin
2021 - 2022 LEGISLATURE

LRBa0030/1
ALL:all

**SENATE AMENDMENT 2,
TO SENATE SUBSTITUTE AMENDMENT 1,
TO ASSEMBLY BILL 1**

January 12, 2021 - Offered by Senators LEMAHIEU and TESTIN.

1 At the locations indicated, amend the substitute amendment as follows:

2 **1.** Page 13, line 23: after that line insert:

3 **“SECTION 5q.** 49.45 (3) (e) 9m. of the statutes is created to read:

4 49.45 (3) (e) 9m. a. In this subdivision, “hospital-associated service” has the
5 meaning given in s. 50.33 (2d).

6 b. Before January 1, 2022, any hospital-associated service that is provided by
7 a hospital in accordance with s. 50.36 (5m) that is of the type for which payment could
8 be claimed as an inpatient hospital service under the federal Medicare program, 42
9 USC 1395 et seq., shall be included as part of and reimbursed or paid as an inpatient
10 service under this section.

11 **SECTION 5r.** 49.45 (4r) of the statutes is created to read:

1 49.45 (4r) UTILIZATION DATA. (a) In this subsection, “health care data
2 aggregator” means a data organization or entity that collects, analyzes, and
3 disseminates health care information under subch. I of ch. 153 and that requests the
4 department to provide data under this subsection.

5 (b) Semiannually, the department shall provide to any health care data
6 aggregator all Medical Assistance program fee-for-service and managed care
7 encounter claims data and data specifications maintained by the department.

8 (c) Within 5 business days or a longer period specified by the department, of the
9 receipt of data under par. (b), a health care data aggregator shall create a data set
10 from the data received that is de-identified health information, as described in 42
11 CFR 164.514 (a), and that meets the requirements for de-identification described in
12 42 CFR 164.514 (b) and then shall destroy the original data provided by the
13 department under par. (b). The health care data aggregator shall make the
14 de-identified data set available to the public and may disseminate custom data sets
15 and reports if the data sets and reports contain only de-identified health
16 information.

17 (d) Data provided by the department to a health care data aggregator under
18 par. (b) are not subject to inspection or copying under s. 19.35. A health care data
19 aggregator shall comply with the requirements under s. 153.50 (3) to ensure
20 protection of patient identity with regard to data received and made available or
21 disseminated under this subsection.”.

22 **2.** Page 15, line 19: after that line insert:

23 “**SECTION 7d.** 50.33 (2d) of the statutes is created to read:

1 50.33 **(2d)** “Hospital-associated service” means a health care service that
2 meets all of the following conditions:

3 (a) The service is of the same type as those furnished by a hospital in an
4 inpatient or outpatient facility.

5 (b) The service is of a type for which a payment could be claimed as a hospital
6 service under the federal Medicare program, 42 USC 1395 et seq.

7 (c) The service is provided at a location other than in a facility approved by the
8 department under s. 50.35.

9 (d) The service is provided in a home setting before January 1, 2022.

10 **SECTION 7g.** 50.36 (5m) of the statutes is created to read:

11 50.36 **(5m)** If the federal centers for medicare and medicaid services has
12 approved a hospital to provide any hospital-associated service, the department may
13 apply to and enforce upon the hospital as the state standard for the
14 hospital-associated service any rule or standard that is required by the centers for
15 medicare and medicaid services for the service. This subsection does not apply on
16 or after January 1, 2022.

17 **SECTION 7j.** 50.49 (6m) (d) of the statutes is created to read:

18 50.49 **(6m)** (d) A hospital that is providing hospital-associated services in
19 accordance with s. 50.36 (5m).”.

20 **3.** Page 17, line 4: after that line insert:

21 **“SECTION 12m.** 108.141 (8) of the statutes is created to read:

22 108.141 **(8)** SECRETARY MAY WAIVE COMPLIANCE. Notwithstanding s. 108.141 (1)
23 (c) 1. b., the secretary may, if permitted by federal law, waive the prohibition under
24 s. 108.141 (1) (c) 1. b. that no extended benefit period may begin by reason of a

1 Wisconsin “on” indicator before the 14th week following the end of a prior extended
2 benefit period which was in effect with respect to Wisconsin.”.

3 **4.** Page 31, line 13: after that line insert:

4 “**SECTION 38g.** 609.205 (3m) of the statutes is created to read:

5 609.205 (**3m**) This section does not apply to the reimbursement for
6 administration of the vaccine against the SARS-CoV-2 coronavirus, which results
7 in COVID-19. The reimbursement administration of the SARS-CoV-2 vaccine shall
8 be consistent with Section 3203 of the federal Coronavirus Aid, Relief, and Economic
9 Security Act and 45 CFR 147.130 (a).”.

10 **5.** Page 33, line 12: delete the material beginning with “Noncompliance” and
11 ending with “section.” on line 15.

12 **6.** Page 33, line 19: delete the material beginning with that line and ending
13 with page 34, line 7, and substitute:

14 “**SECTION 43m.** 895.4801 (2m) of the statutes is created to read:

15 895.4801 (**2m**) IMMUNITY AFTER JULY 10, 2020. Subject to sub. (3), any health care
16 professional, health care provider, or employee, agent, or contractor of a health care
17 professional or health care provider is immune from civil liability for the death of or
18 injury to any individual or any damages caused by actions or omissions that satisfy
19 all of the following:

20 (a) During the period beginning on July 10, 2020, and ending on January 1,
21 2022, the action or omission is committed while the professional, provider, employee,
22 agent, or contractor is providing services related to the SARS-CoV-2 coronavirus or
23 COVID-19.

24 (b) The action or omission is substantially consistent with any of the following:

