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STATE REPRESENTATIVE • 60TH ASSEMBLY DISTRICT

**State Senate Committee on Government Operations, Technology and Consumer Protection
Tuesday, February 28, 2017**

Thank you for holding a hearing on Senate Bill 12 and allowing me to testify in favor of this legislation.

Senate Bill 12 is a technical fix to last session's Act 175, which I authored. This act allowed counties and municipalities to consolidate health departments and gave counties greater flexibility in accessing county levy to finance these entities. Initially, county-county and city-county consolidation were included in the bill language, but an amendment was offered and passed to include city-city and multiple municipal local health departments. Governing bodies for consolidated health departments were required to use either equalized valuation or a per capita determination to prepare their budget for the following year.

Several communities were interested in or have already established multijurisdictional health departments, but employed neither of these budget methodologies. As a result, I authored Assembly Bill 27 which permits entities interested in consolidating health departments to formulate a budget using their method of choice.

This bill allows more local control for those governing bodies that seek to consolidate health departments. So long as, these entities can agree on a budgetary method, they should be allowed to use the process of their choosing.

Thank you for your time and attention and I ask that you support this legislation. I would be happy to answer any questions.



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To: Senate Committee on Government Operations, Technology and Consumer Protection
From: Curt Witynski, J.D., Assistant Director, League of Wisconsin Municipalities
Date: February 28, 2017
Re: **SB 12, Multiple Jurisdiction Health Departments Clean-Up Bill**

The League of Wisconsin Municipalities supports SB 12, clarifying that when local governments agree to collaborate on combining their health departments, the agreeing parties have full discretion to determine how best to share between them the cost of providing the service. Legislation passed last session, 2015 Act 175, required that a multiple jurisdiction health department use either equalized valuation or a per capita method to determine how to share the cost of the health department between the agreeing local governments. This bill eliminates that requirement. The bill instead requires a governing body for a multiple jurisdiction health department to determine a budget in a manner agreed upon by the governing bodies of the participating entities.

The North Shore Health Department consists of seven communities and was created by an Intergovernmental Agreement adopted by the seven communities' elected boards effective January 1, 2012. The Agreement was a result of dialogue, negotiation, and compromise to create a Board of Health that would provide high quality services and be cost effective. The communities' taxpayers received improved services at a lower cost.

The negotiations included a funding formula adopted by the elected officials to specifically address the geography, demographics, and service level requirements of the seven community members. The agreed to formula was not consistent, however, with the Act 175 language requiring that the funding be divided between the agreeing communities exclusively on the basis of equalized valuation or population. Enactment of SB 12 would clarify that the North Shore Health Department may continue to operate under its agreement and that other local governments may develop whatever funding formulas they determine work best for the collaborative service delivery arrangement they have agreed upon.

We urge the committee to recommend passage of SB 12. Thanks for considering our comments.