



WISCONSIN LEGISLATIVE COUNCIL
PROPOSED REPORT TO THE LEGISLATURE

SPECIAL COMMITTEE ON
PERFORMANCE-BASED
DISEASE MANAGEMENT
PROGRAMS FOR LARGE
POPULATIONS

March 18, 2009

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Special Committee on Performance-Based Disease Management Programs for Large Populations

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PART I

KEY PROVISIONS OF COMMITTEE RECOMMENDATIONS

The Special Committee on Performance-Based Disease Management Programs for Large Populations recommends the following bill drafts to the Joint Legislative Council for introduction in the 2009-10 Session of the Legislature.

Health Care Delivery System

WLC: 0384/2, relating to the electronic medical records tax credit

WLC: 0384/2 makes the following changes to the electronic medical records (EMR) tax credit that goes into effect in 2010:

- Allows credits to be claimed for costs of EMR services provided by a third party if a health care provider does not own its own EMR system.
- Specifies that priority must be given to claims for costs related to the establishment of new EMR systems and to upgrading EMR systems to enable them to meet interoperability standards.
- Specifies that priority must be given to claimants that provide health care to underserved or low-income populations and to claimants that have the greatest need for financial assistance.

WLC: 0389/2, relating to health care homes

WLC: 0389/2 directs the Department of Health Services (DHS) to establish a pilot program under which increased reimbursement is provided to physician practices that act as patient-centered medical homes for medical assistance beneficiaries.

Youth Fitness and Nutrition

WLC: 0385/2, relating to a quality rating system for child care

WLC: 0385/2 requires the Department of Children and Families (DCF) to establish a system that rates the quality of the care provided by licensed child care providers, including indicators relating to the food and beverages provided, nutrition policies and education, and physical activity.

WLC: 0388/2, relating to school nutrition

WLC: 0388/2 specifies that, generally beginning in the 2012-13 school year, the following requirements apply to foods sold on school grounds outside of federally reimbursed U.S. Department of Agriculture (USDA) meal programs:

- No more than 30% of its total calories shall be from fat (except for the sale of nuts or seeds);
- No more than 10% of its total calories shall be from saturated fat; and

- The consumption of whole grains, fresh fruits, and fresh vegetables must be encouraged.

The draft also does the following:

- Prohibits the sale of soft drinks and candy on school grounds during the school day.
- Prohibits the sale of soft drinks and candy from vending machines on school grounds at all times.
- Allows soft drinks and candy to be sold on school grounds (but not from vending machines) starting one-half hour after the end of the school day.
- Prohibits the sale of any beverages other than milk, water, and 100% fruit juice on school grounds, during the school day.

The draft encourages school fundraising that involves the sale of food to follow these requirements.

WLC: 0387/2, relating to physical fitness assessments

WLC: 0387/2 directs public schools, charter schools, and private schools to annually assess the physical fitness and aerobic capacity of pupils in grades 3 through 12. Exceptions are made for pupils who have a disability or other condition. The results must be shared with the parent or guardian and the Department of Public Instruction (DPI) but otherwise must be kept confidential.

Physical Education Instruction

WLC: 0397/1, relating to physical education teachers

WLC: 0397/1 directs school boards to ensure that all physical education instruction in elementary and high schools is provided by a licensed physical education teacher.

Walkable and Bikeable Communities

WLC: 0399/1, relating to traditional neighborhood development ordinances, mixed-use zoning, department of transportation planning for bicycle and pedestrian ways, and the state housing plan

WLC: 0399/1 does all of the following:

- Requires certain communities to report whether they have enacted a traditional neighborhood development ordinance and encourages smaller communities to enact such ordinances.
- Clarifies that municipalities with zoning authority may establish mixed-use zoning districts.
- Requires the Department of Transportation (DOT) to include bicycle and pedestrian ways in all new construction and reconstruction projects that utilize state or federal transportation funds (with certain exceptions).
- Requires the state housing plan to promote bicycle and pedestrian-oriented design in residential and mixed-use developments.

PART II

COMMITTEE ACTIVITY

Assignment

The Joint Legislative Council established the Special Committee on Performance-Based Disease Management Programs for Large Populations and appointed the chairperson by an April 9, 2008 mail ballot. (A subsequent mail ballot dated January 8, 2009, appointed Senator Lassa as chairperson, and former Representative Wieckert as a public member.) The committee was directed to: (1) examine the role of disease management programs in assisting to address the state's health care needs; (2) review best practice disease management programs from around the nation; (3) review current practices of the State of Wisconsin's programs; (4) review state-of-the-art procedures for measuring performance of disease management programs; (5) make recommendations on ways to more effectively measure disease management results; and (6) focus on group settings for children, primarily schools, preschool, and day care settings and the laws, rules, and policies related to nutrition and physical activities in those settings especially in regard to childhood obesity.

Membership of the Special Committee, appointed by a June 9, 2008 mail ballot, consisted of one Senator, three Representatives, and nine public members. A list of committee members is included as **Appendix 3** to this report.

Summary of Meetings

The Special Committee held five meetings on the following dates:

July 24, 2008
September 12, 2008
October 17, 2008
November 21, 2008
February 11, 2009

At the July 24, 2008 meeting, Amy Winterfeld, Program Principal, Health Program, National Conference of State Legislatures (NCSL), provided an overview of the obesity epidemic in the United States and described state legislative approaches to combating childhood obesity, including state farm-to-school policies and increasing physical education requirements. Jennifer Kammerud, Legislative Liaison, DPI, provided an overview of the state laws, rules, and policies related to nutrition, health, and physical activities in schools that target childhood obesity. Milda Aksamitauskas, MPP, Policy Analyst, Division of Health Care Access and Accountability, DHS, provided an overview of BadgerCare Plus initiatives to reduce childhood obesity. Mary Pesik, Nutrition and Physical Activity Coordinator, Division of Public Health, DHS, described the Wisconsin Nutrition and Physical Activity State Plan, designed to prevent obesity and reduce chronic disease. Denise Runde, MSPH, Policy Initiatives Advisor, Division of Access and Accountability, DHS, discussed disease management and its role in the health care system. Public Member Marilyn Follen, Administrator, Quality Improvement and Care Management, Marshfield Clinic, discussed Marshfield Clinic's participation in the Centers for Medicare and Medicaid Services Physician Group Practice Demonstration. Dr. David B. Allen, M.D./Professor Pediatrics-Endocrinology, University of Wisconsin (UW) American Family Children's Hospital, described policies and laws to combat childhood obesity, including tracking and reporting of body mass index (BMI) and fitness, school nutrition requirements, school daily physical activity requirements, safe walking routes to schools, and requiring parents to obtain treatment for children with chronic obesity. Dr. Brian Fidlin, PsyD Program Director, NEW Kids Program, Children's Hospital of Wisconsin, provided an overview of the NEW (Nutrition, Exercise and Weight management) Kids Program at Children's Hospital. His suggestions included medical reimbursement of preventive services for

obesity, treatment for obesity, universal coverage of health and behavior codes, and increased Medicare coverage of dietitians for preventive services.

At the September 12, 2008 meeting, Ken Thorpe, Executive Director, Partnership to Fight Chronic Disease, Atlanta, highlighted the causes of rising health care costs and laid out a state roadmap for health care reform. Laura Tobler, Program Director, Health Program, NCSL, described the economic impact of chronic health conditions and unhealthy lifestyles. She described state legislation, such as the Vermont Blueprint for Health, enacted to improve the delivery and quality of health care for those with chronic conditions. Monica Pomasl, Food Services Director, Appleton School District, described her district's successful food service program policy change to include healthier food options and integrative nutrition education. Dr. John Barkmeier described ThedaCare's disease management initiative, which has improved patient outcomes. Verna Van Nuland, a graduate of ThedaCare's Coronary Health Improvement Project (CHIP) program, now a program facilitator, described how the CHIP program dramatically improved her health and quality of life. Carolyn Fisher, Senior Advisor, Coordinated School Health Programs Office of the Director, Division of Adolescent and School Health CDC/NCCDPHP, Atlanta, made a presentation entitled "How Schools Can Help Prevent Obesity and How States Can Help Them Do It." She stressed the importance of using data, such as the CDC's Youth Risk Behavior Survey results, to guide policy development. Wisconsin Olympians Casey Fitzrandolph and Suzy Favor Hamilton described their involvement in the Movin' and Munchin' Schools Program.

At the October 17, 2008 meeting, James Galloway, Assistant Surgeon General, Region V, Chicago, described "Building a Healthier Chicago," which promotes healthy lifestyles. Elaine Mischler, CEO, Mischler Consultants, Waukesha, explained the population health services program impact model and discussed the ways in which disease management programs measure their impact and calculate cost savings. Denise Webb, Program Manager, eHealth Care Quality and Patient Safety Board, DHS, provided an overview of the Wisconsin eHealth Initiative and explained the state efforts regarding health information technology (HIT). Dr. Tim Bartholow, Wisconsin Health Information Organization, described the benefits and challenges to EMR adoption and discussed Prairie Clinic's experience with EMRs. Strategies to encourage physicians to use HIT include tax credits and technical assistance to smaller practice groups.

Following the testimony by invited speakers, the committee began to discuss options for committee recommendations and chose to pursue legislative options including K-12, preschool, and early childhood-based interventions; workplace wellness initiatives; community-based interventions; strengthening the nutrition education components of programs, such as WIC and FoodShare; and setting standards for HIT.

At the November 21, 2008 meeting, Dr. Lowell Keppell, President, Wisconsin Academy of Family Physicians, discussed the patient-centered medical home (PCMH) model for health care delivery. Dr. Keppell also described a legislative proposal developed by the Wisconsin Academy of Family Physicians under which a physician practice that is a PCMH would receive increased reimbursement for services provided to Medicaid patients.

Rachel Letzing and Mary Matthias, Legislative Council Staff, led the committee in a discussion of the alternatives set forth in Memo No. 5, *Options for Legislation*, based upon the discussion from the October 17 meeting. These options included drafting bills related to child care provider nutrition requirements, K-12 nutrition programs and reimbursements, funding for the Governor's Health Award, requiring schools to administer a physical fitness test, K-6 Physical Education requirements, the creation of a beverage tax, requiring nutritional information to be posted on restaurant menus, promoting walkable communities, and health information technology. The committee requested draft letters of support regarding a wellness component for a child care rating system, K-12 nutrition standards. The committee requested further information on state efforts to support Health Professional Shortage Areas.

Information relevant to many of the options was also provided by staff of DPI, Jennifer Kammerud and John Hisgen, as well as staff of DHS, Amy Meinen and Jon Morgan, much of which is

set forth in a table provided to the committee by DHS and DPI, entitled *DHS and DPI Input to Wisconsin Legislative Council Memorandum #5*.

At the February 11, 2009 meeting, Ms. Matthias and Ms. Letzing presented draft legislation requested by the committee. The committee approved WLC: 0382/1, WLC: 0390/2, WLC: 0391/1, WLC: 0392/1, relating to the promotion of walkable and bikeable communities, and asked that they be combined into one draft (subsequently drafted as WLC: 0399/1). Committee members approved WLC: 0387/2, relating to school physical fitness assessment. The committee amended and approved WLC: 0389/1, establishing a health care home pilot project (subsequently redrafted as WLC: 0389/2 to include the committee's amendments). After amendments were agreed upon, mail ballots were requested for the revised versions of the following bill drafts: WLC: 0384/1, related to electronic medical records; WLC: 0385/1, related to a quality rating system for child care; and WLC: 0388/1, related to school nutrition. The committee also agreed on the elements of a new draft relating to physical education teachers (subsequently drafted as WLC: 0397/1) and asked that it be included in the mail ballot.

Committee members approved a draft letter addressed to Governor Doyle regarding the child care quality rating system; a draft letter addressed to the Wisconsin Congressional Delegation regarding restaurant menu labeling; draft letters addressed to Governor Doyle and the Joint Finance Committee regarding school meal reimbursement and incentives; and draft letters addressed to Governor Doyle and the Joint Finance Committee regarding the AmeriCorps Farm-to-School program funding.

Bridget Holcomb, Associate Policy Director, Michael Fields Agricultural Institute, addressed the committee to discuss a letter to the committee from herself and Luke Rollins, Chair of Advocacy, WIPAN, Director of State Advocacy, American Heart Association. Based on this presentation, the committee requested that the letters addressed to Governor Doyle and the Joint Finance Committee in support of the Buy Local Buy Wisconsin program be amended to include a request for a Farm-to-School Economic Development Consultant. These revised letters were included in the mail ballot subsequently sent to the committee.

PART III

RECOMMENDATIONS INTRODUCED BY THE JOINT LEGISLATIVE COUNCIL

This part of the report provides background information on, and a description of, the drafts as recommended by the Special Committee on Performance-Based Disease Management Programs for Large Populations.

WLC: 0384/2, Relating to the Electronic Medical Records Tax Credit

Background

A state tax credit for EMRs will go into effect in 2010. The amount of tax credit available will be equal to 50% of the amount paid by a health care provider in a tax year for information technology hardware or software that is used to maintain medical records in an electronic form.

The Department of Commerce (Commerce) must implement a program to certify health care providers as eligible for the credit. If Commerce certifies a health care provider, Commerce must determine the amount of credits to allocate to that provider. No more than \$10 million in credits may be allocated each year.

There are currently no standards in state law pertaining to the interoperability of health care information technology. The federal Center for Medicaid Services (CMS) requires all health care providers that participate in its demonstration projects to utilize EMR systems that are certified by the Certification Commission for Healthcare Information Technology (CCHIT). CCHIT is an independent, nonprofit organization that has been awarded a contract by the U.S. Department of Health and Human Services to develop, create prototypes for, and evaluate the certification criteria and inspection process for electronic health records.

Description

WLC: 0384/2 makes the following changes to the EMR tax credit that goes into effect in 2010:

- Specifies that credit may be claimed for costs of EMR services provided by a third party EMR application service provider to maintain and deliver electronic medical records of the claimant when the claimant does not own related hardware and software.
- Specifies that in allocating credits, priority must be given to claims for costs related to the establishment of new EMR systems and to upgrading EMR systems to enable them to meet CCHIT standards or standards established by another recognized certification system that is designed to facilitate exchange of information and improve the quality of health care.

Specifies that in allocating credits, priority must be given to claimants that provide health care to underserved or low-income populations and to claimants that have the greatest need for financial assistance.

WLC: 0389/2, Relating to Health Care Homes

Background

The patient-centered medical home is a model for health care delivery. It is endorsed by the Wisconsin Academy of Family Physicians (WAFP), which describes it as follows:

The patient-centered medical home a health care delivery model based on a physician-guided medical practice that integrates and coordinates all the medical needs of a patient. The patient-centered medical home emphasizes prevention and wellness to reduce overall care costs and improve health outcomes. The model is patient-focused and designed to provide greater access to quality care and increase the involvement of patients in their own medical care.

The National Committee on Quality Assurance (NCQA) is a private, 501 (c) (3) not-for-profit organization that manages voluntary accreditation programs for individual physicians and medical groups. NCQA has established an accreditation program for patient-centered medical homes. Medical practices seeking NCQA certification must complete a Web-based data collection tool and provide documentation that validates responses. Practices are evaluated on the following aspects of care:

- Access and communication.
- Patient tracking and registry functions.
- Care management.
- Patient self-management support.
- Electronic prescribing.
- Test tracking.
- Referral tracking.
- Performance reporting and improvement.
- Advanced electronic communications.

Description

WLC: 0389/2 directs DHS to establish a pilot program under which increased reimbursement is provided to physician practices that act as patient-centered medical homes for medical assistance beneficiaries.

To be eligible to participate, a physician practice must be certified by NCQA as a patient-centered medical home.

The increased reimbursement required to be provided to physician practices participating in the program includes increased primary care payments for face-to-face care services and a per patient, per month care management fee. The amount of these payments is not specified in the draft. However, the draft specifies that the payments must be in an amount sufficient to provide an incentive for medical practices to participate in the program.

The draft requires DHS to develop and implement a method to evaluate the effectiveness of the pilot program in improving care for participants and reducing costs. The department must submit an evaluation of the program to the Joint Committee on Finance 30 months after the program's implementation.

WLC: 0385/2, Relating to a Quality Rating System for Child Care

Background

Current law requires anyone caring for four or more children, under age seven, unrelated to the provider, to be licensed by DCF. The two types of licensed child care providers are family child care (up to eight children in care at any given time) and group child care (nine or more children at any given time).

Current licensing requirements specify that meals and snacks provided at a licensed child care center must comply with the USDA Child and Adult Care Food program minimum meal requirements.

Licensed child care centers must provide children with experiences which promote large and small muscle development and children must go outside daily unless the weather prohibits doing so.

Current licensing requirements do not specifically direct child care centers to provide nutrition education to children.

Licensed child care providers are not rated as to the quality of services they provide in relation to each other.

Description

WLC: 0385/2 requires DCF to establish a system that rates the quality of the care provided by licensed child care providers, including, but not limited to, indicators relating to the food and beverages provided, nutrition policies and education, and physical activity.

DCF must make the rating information available to the parents, guardians, and legal custodians of children who are recipients or prospective recipients of care from a rated provider. The draft also requires DCF to seek funding to provide financial assistance to child care providers to improve their rating under the quality rating system.

WLC: 0388/2, Relating to School Nutrition

Background

The National School Lunch and School Breakfast programs provide federal funding to schools to serve free and reduced-priced meals and snacks. In exchange for receiving federal funds, schools must serve meals and snacks that adhere to federal nutritional requirements set by the USDA. USDA requires school lunches to meet the applicable recommendations of the 1995 Dietary Guidelines for Americans, which recommend that no more than 30% of an individual's calories come from fat and less than 10% from saturated fat.

Federal guidelines do not apply to or limit the sale of *à la carte* or vending machine foods sold in addition to federally funded meals and snacks.

Description

WLC: 0388/2 establishes nutritional standards for all foods sold on school grounds outside of federally reimbursed USDA meal programs (school lunch, school breakfast, school milk, and nutritional improvement for the elderly).

The requirements apply to all public, charter, and private schools. These requirements apply beginning in the 2012-13 school year or when a school contract with a vending machine company expires, whichever is later:

- No more than 30% of its total calories shall be from fat (except for the sale of nuts or seeds);
- No more than 10% of its total calories shall be from saturated fat; and
- The consumption of whole grains, fresh fruits, and fresh vegetables must be encouraged.

The draft also does all of the following:

- Prohibits the sale of soft drinks and candy on school grounds during the school day.
- Prohibits the sale of soft drinks and candy from vending machines on school grounds at all times.
- Allows soft drinks and candy to be sold on school grounds (but not from vending machines) starting one-half hour after the end of the school day.
- Prohibits the sale of any beverages other than milk, water, and 100% fruit juice on school grounds, during the school day.

The draft encourages school fundraising that involves the sale of food to follow these requirements.

WLC: 0387/2, Relating to Physical Fitness Assessments

Background

DPI and the UW received a three-year grant, which ends in 2010, to administer the FitnessGram physical fitness test in middle schools that volunteer to participate. For all elements of the FitnessGram, age and gender norms have been developed and individual scores are measured against these norms.

The FitnessGram is a software program which is comprised of four tests: BMI measurement, a quasi-situps abdominal strength test, a flexibility test, and the Progressive Aerobic Cardiovascular Endurance Run (PACER).

The PACER is a 20-meter shuttle run (back and forth) which is conducted in a class-based setting in which 20-50 children can run at a time. The PACER is designed to measure aerobic capacity. The UW has found that the PACER test is a good measure of fitness and a good indicator of diabetes risk.

Description

WLC: 0387/2 directs public schools, charter schools, and private schools to ensure that the physical fitness of pupils in grades 3 through 12 is assessed annually. The assessment must include an

evaluation of pupils' aerobic capacity. Schools are not required to assess pupils who have a disability or other condition as specified by DPI administrative rule.

The results of the physical fitness assessments must be kept confidential but schools are required to send results to DPI and to provide an individual child's results to their parent or guardian.

WLC: 0397/1, Relating to Physical Education Teachers

Background

Current law directs school boards to ensure that instruction in elementary and high schools in health, physical education, art, and music is provided by qualified teachers.

The current DPI administrative rule implementing this provision requires that physical education instruction in grades kindergarten through 6 be conducted by or under the direction of a licensed physical education teacher. The rule also requires all pupils in grades 7 through 12 (or 6 to 12 if a middle school has a grade 6) to participate in an instructional program of physical education taught by a licensed physical education teacher, except that in senior high schools one year or the equivalent may be optional to pupils.

Description

WLC: 0397/1 directs school boards to ensure that all physical education instruction in elementary and high schools is provided by a licensed physical education teacher. The effect of the draft would be to require all physical education classes in grades kindergarten through 6 to be conducted by licensed physical education teachers, instead of allowing schools the option of providing physical education instruction by or under the direction of a licensed physical education teacher.

WLC: 0399/1, Relating Traditional Neighborhood Development Ordinances, Mixed-Use Zoning, Department of Transportation Planning for Bicycle and Pedestrian Ways, and the State Housing Plan

Background

Traditional Neighborhood Development Ordinances

A traditional neighborhood development is a compact, mixed-use neighborhood where residential, commercial, and civic buildings are within close proximity to each other.

A conservation subdivision is a housing development in a rural setting that is characterized by compact lots and common open space, and where the natural features of land are maintained to the greatest extent possible.

Current law (s. 66.1027, Stats.) requires UW-Extension to develop a model ordinance for a traditional neighborhood development and an ordinance for a conservation subdivision. The model ordinance was completed on January 1, 2001.

Current law also requires every city and village with a population of at least 12,500 to enact an ordinance that is similar to the model traditional neighborhood development ordinance by January 1, 2002. A city or village whose population reaches at least 12,500, after January 1, 2002, must enact an ordinance that is similar to the model traditional neighborhood development within one year.

Description

This draft requires all communities with a population of 12,500 or more to report to the Department of Administration (DOA), by January 1, 2011, whether they are in compliance with the statutory requirement to enact a traditional neighborhood development ordinance.

The draft also requires a city or village whose population reaches 12,500 after January 1, 2011, to report to DOA, within 18 months after reaching that population size, whether it has adopted a traditional neighborhood development ordinance.

The draft also encourages communities with populations smaller than 12,500 to enact traditional neighborhood development ordinances.

Mixed-Use Zoning

Background

Current law authorizes cities, villages, and counties to enact zoning ordinances. A town may also enact a zoning ordinance if a town meeting authorizes a town board to exercise powers relating to villages and conferred on village boards by statute.

Description

This draft clarifies that a municipality that is authorized to enact a zoning ordinance may establish mixed-use districts that contain any combination of uses, such as industrial, commercial, public, or residential uses, in a compact urban form.

DOT Planning for Bicycle and Pedestrian Facilities

Background

Current law directs DOT to assist regional or municipal agencies in the planning, promotion, and development of bikeways and to draft model local zoning ordinances for the planning, promotion, and development of bikeways and bicycle racks.

DOT administers a bicycle and pedestrian facilities program to award grants of assistance to political subdivisions for the planning, development, or construction of bicycle and pedestrian facilities.

DOT also administers the federally-funded Safe Routes to School (SRTS) programs to encourage children in grades kindergarten-8 to walk and bike to school by creating safer walking and biking routes.

Description

The draft requires DOT to ensure that bicycle and pedestrian ways are established in all new construction and reconstruction projects that utilize state or federal transportation funds, unless DOT finds that certain circumstances exist.

The draft requires DOT to promulgate rules that specify the circumstances under which the requirement to include bicycle and pedestrian ways does not apply. These circumstances may include only situations in which one or more of the following apply:

1. Bicyclists or pedestrians are prohibited by law from using the roadway.

2. The cost of establishing bikeways or walkways would be excessively disproportionate to the need or probable use.
3. Establishing bikeways or walkways would have excessive negative impacts in a constrained environment.
4. Sparsity of population, traffic volume, or other factors indicate an absence of need.
5. Refusal of a community to accept an agreement for maintenance of sidewalks.

The provisions of the draft first apply to construction and reconstruction projects for which the initial planning begins after the enactment of the draft.

State Housing Strategy Plan

Background

Current law requires Commerce to prepare a comprehensive five-year state housing strategy plan and to update it every year. Commerce must submit the plan to the federal Department of Housing and Urban Development.

The state housing strategy plan must include all of the following:

- A statement of housing policies and recommendations.
- An evaluation and summary of housing conditions and trends in the state, including housing stock and housing cost analyses, general population and household composition demographic analyses, and housing and demographic forecasts.
- An evaluation of housing assistance needs.
- A discussion of major housing issues, including housing production, housing and neighborhood conservation, housing for persons with special needs, fair housing and accessibility, and housing affordability.
- Housing policies that set the general framework for the state's housing efforts.
- Strategies for utilizing federal funding and for coordinating federal and state housing efforts.
- Specific recommendations for public and private action that contribute to the attainment of housing policies under the plan.

Under current law, the Wisconsin Housing and Economic Development Authority must exercise its powers and perform its duties related to housing consistent with the state housing strategy plan created by Commerce.

Under current law, Commerce must prepare a report on every proposed administrative rule that directly or substantially affects the development, construction, cost, or availability of housing in Wisconsin before the Legislature acts on it. Among other things, the report must discuss the proposed rule's effect on the policies, strategies, and recommendations of the state housing strategy plan.

Description

The draft adds another element to the state housing strategy plan. It requires Commerce to include in the plan strategies and specific recommendations for public and private action that will facilitate the inclusion of bicycle and pedestrian-oriented design in residential and mixed-use developments that include residential elements.

PART IV

OTHER ACTION OF THE COMMITTEE

At its February 11, 2009 meeting, the Special Committee directed Senator Lassa, Chair of the Special Committee, to send the following letters expressing the committee's support of and recommendations pertaining to several programs and proposals related to its charge.

- Letters to Governor Jim Doyle and Representative Mark Pocan and Senator Mark Miller, Co-Chairs, Joint Committee on Finance, relating to the Buy Local Buy Wisconsin (BLBW) Initiative. (A copy of the letter to the Governor is included as **Appendix 2**.)

These letters urge the Governor and the Co-Chairs of the Joint Finance Committee to continue to fund the BLBW program. The letters also request additional funding for the BLBW program for the creation of a Farm-to-School Economic Development Consultant.

These letters were approved by the committee by mail ballot on a vote of Ayes, 9 (Sen. Lassa; Rep. Benedict; and Public Members, Adams, Christensen, Duran, Follen, Musser, Nitzke, and Schellhase); and Not Voting, 2 (Public Members Wubben and Wieckert).

- A letter to Governor Jim Doyle, with a copy sent to DHS Secretary Timberlake and DCF Secretary Bicha, relating to establishment of a child care quality rating system. (A copy of the letter is included as **Appendix 3**.)

This letter asks the Governor to direct the Advisory Council on Early Childhood Education and Care to create a quality rating system for child care, and to include within the quality rating system indicators regarding: (1) the developmentally appropriate nutrition education provided by the day care center; and (2) the developmentally appropriate physical activity provided to children attending the day care center.

The letter states that if the Advisory Council is not the appropriate vehicle to create the quality rating system, the committee requests that the Governor direct DCF to create the system.

This letter was approved by the committee by unanimous consent at its February 11, 2009 meeting.

- Letters to Governor Jim Doyle and Senator Mark Miller and Representative Mark Pocan, Co-Chairs, Joint Finance Committee, relating to school lunch reimbursement and incentives. (A copy of the letter to the Governor is included as **Appendix 4**.)

These letters express the committee's support for the DPI's 2009-11 budget requests of: (1) \$2,500,000 annually above annual base funding to increase payments to school districts under the state school lunch reimbursement program; and (2) \$1,263,100 in 2009-10 and \$2,176,900 in 2010-11 over annual base funding to increase payments to school districts under the state school breakfast reimbursement program.

These letters also express support for creation of a mechanism within the National School Lunch program to serve more fruits, vegetables, and whole grains to school children, in addition to any other increase in reimbursement rates the state is able to provide to schools.

These letters were approved by the committee by unanimous consent at its February 11, 2009 meeting.

- Letters to Governor Jim Doyle and Senator Mark Miller and Representative Mark Pocan, Co-Chairs, Joint Finance Committee, relating to the farm-to-school program. (A copy of the letter to the Governor is included as **Appendix 5**.)

These letters discuss the important role of the AmeriCorps Farm-To-School Pilot Program in fighting obesity and chronic disease. It also asks the Governor and the Joint Committee on Finance to continue to support funding from Serve Wisconsin for the efforts of the Department of Agriculture, Trade and Consumer Protection, DPI, and DHS in piloting the 10 farm-to-school projects throughout Wisconsin.

These letters were approved by the committee by unanimous consent at its February 11, 2009 meeting.

- Letter to Wisconsin Congressional Delegation relating to menu labeling. (A copy of the letter is included as **Appendix 6**.)

This letter expresses the committee's support of federal legislation such as the proposed LEAN Act of 2008, which would amend the federal Food, Drug and Cosmetic Act to require restaurants to provide calorie counts and other nutritional information to consumers at the point-of-purchase. The letter requests that the Delegation actively support legislation similar to the LEAN Act of 2008 in the 111th Congress of the United States.

This letter was approved by the committee by unanimous consent at its February 11, 2009 meeting.

Appendix 1

Committee and Joint Legislative Council Votes

The following drafts were recommended by the Special Committee on Performance-Based Disease Management Programs for Large Populations to the Joint Legislative Council for introduction in the 2009-10 Session of the Legislature.

Special Committee Votes

The Special Committee voted to recommend the following bill drafts to the Joint Legislative Council for introduction in the 2009-10 Session of the Legislature. The vote on the drafts were as follows:

- *WLC: 0384/2, relating to electronic medical records tax credit, passed by a vote of Ayes, 10 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Follen, Musser, Nitzke, Schellhase, and Wubben); Noes, 0; and Not Voting, 1 (Public Member Wieckert).*
- *WLC: 0385/2, relating to a quality rating system for child care, passed by a vote of Ayes, 10 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Follen, Musser, Nitzke, Schellhase, and Wubben); Noes, 0; and Not Voting, 1 (Public Member Wieckert).*
- *WLC: 0387/2, relating to physical fitness assessments, passed by a vote of Ayes, 9 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Musser, Nitzke, Schellhase and Wubben); Noes, 0; and Absent, 2 (Public Members Follen and Wieckert).*
- *WLC: 0388/2, relating to school nutrition, passed by a vote of Ayes, 10 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Follen, Musser, Nitzke, Schellhase, and Wubben); Noes, 0; and Not Voting, 1 (Public Member Wieckert).*
- *WLC: 0389/2, relating to health care homes, passed by a vote of Ayes, 9 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Musser, Nitzke, Schellhase, and Wubben); Noes, 0; and Absent, 2 (Public Members Follen and Wieckert).*
- *WLC: 0397/1, relating to physical education teachers, passed by a vote of Ayes, 8 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Musser, Nitzke, and Schellhase); Noes, 2 (Public Member Follen and Wubben); and Not Voting, 1 (Public Member Wieckert).*
- *WLC: 0399/1, relating to traditional neighborhood development ordinances, mixed-use zoning, department of transportation planning for bicycle and pedestrian ways, and the state housing strategy plan, passed by a vote of Ayes, 9 (Sen. Lassa; Rep. Benedict; and Public Members Adams, Christensen, Duran, Musser, Nitzke, Schellhase, and Wubben); Noes, 0; and Absent, 2 (Public Members Follen and Wieckert).*

State of Wisconsin
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President, State Senate

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Representative, State Assembly



LEGISLATIVE COUNCIL STAFF
Terry C. Anderson
Director
Laura D. Rose
Deputy Director

March 11, 2009

The Honorable Jim Doyle
Room 115 East
State Capitol
Madison, WI 53702

Dear Governor Doyle:

I am writing in my capacity as Chair of the Joint Legislative Council's Special Committee on Performance-Based Disease Management Programs for Large Populations. Based upon the research and testimony undertaken during its tenure, the Special Committee members would like to recognize the important role of the Buy Local Buy Wisconsin Initiative (BLBW) in providing public access to fresh, local produce. This letter sets forth a committee recommendation regarding this issue.

Over its course of study, this committee heard testimony regarding the high public and private costs of chronic disease. State and national leaders in health policy emphasized the importance of increasing access to fresh fruits and vegetables to prevent chronic disease. The committee believes the Buy Local Buy Wisconsin program is particularly well-designed to advance efforts to promote healthy lifestyles in this state.

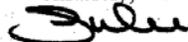
In 2008, the grant program was successful at enhancing the appeal of locally-sourced produce to consumers and expanding the regional markets for local farmers. During its first grants cycle in April 2008, the program received 94 applications requesting over \$3 million. This overwhelming interest points to a ready supply of local foods available for consumption.

The Special Committee requests that the Governor and the Joint Committee on Finance will continue to fund the BLBW program in recognition of its key role in increasing public access to fresh, healthy foods and supporting the livelihoods of Wisconsin farms, businesses, and nonprofits. The Committee also requests additional funding for BLBW for the creation of a Farm-to-School Economic Development Consultant. The Consultant would fill a special need within BLBW to work directly with school districts to provide local food to public schools. We believe expanded support for this already successful program will place Wisconsin at the forefront of the local food movement, while leading to long-term cost-savings in health care and improvements in public health for Wisconsin residents.

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<http://www.legis.state.wi.us/lc>

Thank you for your consideration of this request. If you have questions, please contact Rachel Letzing or Mary Matthias at the Legislative Council.

Sincerely,



Senator Julie Lassa
Chair, Special Committee on
Performance-Based Disease Management
Programs for Large Populations

JL:ksm

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Representative, State Assembly



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March 11, 2009

The Honorable Jim Doyle
Room 115 East
State Capitol
Madison, WI 53702

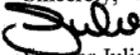
Dear Governor Doyle:

I am writing in my capacity as chair of the Joint Legislative Council's Special Committee on Performance-Based Disease Management for Large Populations. Among other items in its charge, the Special Committee is directed to focus on group settings for children, primarily schools, preschools, and day care settings and the laws, rules, and policies related to nutrition and physical activities in those settings, especially in regard to childhood obesity.

The Special Committee has received extensive testimony and research regarding methods to combat childhood obesity, including educating young children about good nutrition and providing them with daily physical activity. Much of the information regarding childhood obesity indicates that school-based approaches can be very effective in combating childhood obesity. To that end, the Special Committee members believe that nutrition education and physical activity must be included and encouraged at the earliest possible time in a child's life and incorporated into child care settings.

By executive order, you recently created the Advisory Council on Early Childhood Education and Care. On behalf of the Special Committee, I ask you to consider including in the council's charge a directive to create a quality rating system for child care, and to include within the quality rating system indicators regarding: (1) the developmentally appropriate nutrition education provided by the day care center; and (2) the developmentally appropriate physical activity provided to children attending the day care center. If the advisory council is not the appropriate vehicle to create the quality rating system, I ask that you direct the Department of Children and Families to create a quality rating system for child care and to include within a quality rating system indicators regarding the developmentally appropriate nutrition education and physical activity provided at the child care center. The Special Committee believes that giving parents and caregivers information about these important indicators will help them to better understand and identify quality care for their children.

Thank you for your consideration of this request. If you have questions, please contact Rachel Letzing or Mary Matthias at the Legislative Council.

Sincerely,


Senator Julie Lassa
Chair, Special Committee on
Performance-Based Disease Management
Programs for Large Populations

JL:ksm

cc: Karen Timberlake, Secretary, Department of Health Services
Reggie Bicha, Secretary, Department of Children and Families

State of Wisconsin
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Representative, State Assembly



LEGISLATIVE COUNCIL STAFF
Terry C. Anderson
Director
Laura D. Rose
Deputy Director

March 11, 2009

The Honorable Jim Doyle
Room 115 East
State Capitol
Madison, WI 53701

Dear Governor Doyle:

I am writing in my capacity as chair of the Joint Legislative Council's Special Committee on Performance-Based Disease Management for Large Populations. Among other items in its charge, the Special Committee is directed to focus on group settings for children, primarily schools, preschool, and day care settings and the laws, rules, and policies related to nutrition and physical activities in those settings especially in regard to childhood obesity.

The Special Committee would like to express its support for the Department of Public Instruction's 2009-11 budget requests of: (1) \$2,500,000 annually above annual base funding to increase payments to school districts under the state school lunch reimbursement program; and (2) \$1,263,100 in 2009-10 and \$2,176,900 in 2010-11 over annual base funding to increase payments to school districts under the state school breakfast reimbursement program.

As you know, the national school lunch and school breakfast programs provide nutritionally balanced, low-cost or free meals and snacks to children every school day. The state is then required to provide a set matching payment under the federal programs, based in part on the state's per capita income in a given year. According to the Legislative Fiscal Bureau, this amount has equaled approximately .43 per meal for lunches served and .1351 per breakfast served. The department's requested funding would provide an increase of approximately .025 per lunch served and provide sufficient funding for the full statutory reimbursement of .15 per breakfast served. The Special Committee members believe that these reimbursement increases would decrease the amount school districts are transferring from educational funds to school nutrition funds by approximately 50%.

The Special Committee also supports creating a mechanism within the national school lunch program to serve more fruits, vegetables and whole grains to school children, in addition to any other increase in reimbursement rates the state is able to provide to schools. The Special Committee believes that encouraging children to develop healthy eating habits complements existing statewide efforts to improve public health in Wisconsin. Preparing children to value health and nutrition will ensure that Wisconsin continues to be a national leader in public health.

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<http://www.legis.state.wi.us/lc>

Thank you for your consideration of this request. If you have questions, please contact Rachel Letzing or Mary Matthias at the Legislative Council.

Sincerely,



Senator Julie Lassa
Chair, Special Committee on
Performance-Based Disease Management
Programs for Large Populations

JL:ksm

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LEGISLATIVE COUNCIL STAFF
Terry C. Anderson
Director
Laura D. Rose
Deputy Director

March 11, 2009

The Honorable Jim Doyle
Room 115 East
State Capitol
Madison, WI 53702

Dear Governor Doyle:

I am writing in my capacity as Chair of the Joint Legislative Council's Special Committee on Performance-Based Disease Management Programs for Large Populations. Based upon the research and testimony undertaken during its tenure, the Special Committee members would like to recognize the important role of the AmeriCorps farm-to-school pilot program in fighting obesity and chronic disease by encouraging children to eat fresh, local foods. This letter sets forth a committee recommendation regarding this program.

In 2008, an AmeriCorps farm-to-school pilot program began to work with school lunch service staff and teachers in 10 Wisconsin schools to help with the procurement, education, and promotion of locally grown foods. AmeriCorps members have the unique role of working directly with school food service staff to identify local farmers and processors interested in selling produce to schools. They also work with school wellness programs to help teachers educate children about nutrition and healthy eating habits. Students benefit directly from the farm-to-school program. They learn the components of a healthy diet by eating fresher and more diverse food and by learning the origins of their food through classroom nutrition lessons and field trips to local farms. Educating children about healthy eating habits is an important way to address the increasing prevalence of obesity and chronic disease among children.

The Special Committee requests that the Governor and the Joint Committee on Finance will continue your support of funding from Serve Wisconsin for the efforts of DATCP, DPI, and DHS in piloting the ten farm-to-school projects throughout Wisconsin. Utilizing AmeriCorps members to help schools with the procurement, education, and promotion of locally grown foods is an effective and efficient way to improve the overall health of Wisconsin's children.

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Thank you for your consideration of this request. If you have questions, please contact Rachel Letzing or Mary Matthias at the Legislative Council.

Sincerely,



Senator Julie Lassa
Chair, Special Committee on
Performance-Based Disease Management
Programs for Large Populations

JL:ksm

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LEGISLATIVE COUNCIL STAFF

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Director
Laura D. Rose
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March 11, 2009

Senator Herb Kohl
330 Hart Senate Office Building
Washington, D.C. 20515

Senator Russell Feingold
506 Hart Senate Office Building
Washington, D.C. 20510

Representative Tammy Baldwin
2446 Rayburn Building
Washington, D.C. 20515

Representative Ron Kind
1406 Longworth House Office Building
Washington, D.C. 20515

Representative Gwen Moore
1239 Longworth House Office Building
Washington, D.C. 20515-4905

Representative Paul Ryan
1113 Longworth House Office Building
Washington, D.C. 20515

Representative Thomas Petri
2462 Rayburn House Office Building
Washington, D.C. 20515

Representative David Obey
2314 Rayburn House Office Building
Washington, D.C. 20515

Representative Steve Kagen
1232 Longworth House Office Building
Washington, D.C. 20515

Representative James Sensenbrenner
2449 Rayburn House Office Building
Washington, D.C. 20515

Dear Members of the Wisconsin Congressional Delegation:

I am writing to you as the Chair of the Joint Legislative Council's Special Committee on Performance-Based Disease Management Programs for Large Populations. This study committee was established by the leadership of the Wisconsin Legislature to, among other things, formulate legislative responses to the profound obesity epidemic that has emerged in Wisconsin. The study participants were a diverse and knowledgeable group of Wisconsin citizens who are medical and policy experts in children's health and health policy. A list of the committee membership is enclosed with this letter.

Over its course of our study, we heard disturbing testimony regarding the escalating public and private costs of obesity. According to a report published by the National Conference of State Legislatures, being overweight or obese increases the risk for heart disease, stroke, high blood pressure, diabetes, and cancer. These chronic diseases are the leading causes of death,

illness and disability in the United States. The Centers for Disease Control and Prevention (CDC) estimated the total medical costs related to obesity in Wisconsin in 2003 at nearly \$1.5 billion. Taxpayers foot the bill for almost half of that amount through Medicare and Medicaid.

The CDC reports that during the past 20 years there has been a dramatic increase in obesity in the United States. The CDC statistics for Wisconsin show that in 1990, the obesity rate was in the 10-14% range. Since then it increased steadily until 2006, when the rate was reported at 25-29%.

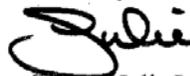
The committee received many suggestions for legislation to help address this epidemic, and we have recommended a package of legislation for introduction in the 2009-10 Wisconsin Legislative Session.

In addition to our package of state legislation, the committee strongly supports the enactment of federal legislation such as the proposed LEAN Act of 2008, which would amend the federal Food, Drug and Cosmetic Act to require restaurants to provide calorie counts and other nutritional information to consumers at the point of purchase. Disclosure of this information is of crucial importance for consumers of so-called "fast food," which is a major contributor to the obesity epidemic. Providing this information at the point of sale will help consumers make healthier choices. An additional benefit of this type of legislation was revealed when New York City passed an ordinance that required posting of nutritional information on menu boards resulted in many fast food chains. When faced with the prospect of consumers seeing the nutritional information at the moment they placed an order, many fast food chains reformulated their products to significantly decrease the fat and calorie content. This kind of change is urgently needed to address the health emergency in this country.

The Special Committee respectfully and urgently requests that you actively support legislation similar to the LEAN Act of 2008 in the 111th Congress of the United States.

Thank you for your consideration of this request. If you have questions, please contact Rachel Letzing or Mary Matthias at the Legislative Council.

Sincerely,



Senator Julie Lassa, Chair
Special Committee on Performance-Based
Disease Management Programs for Large
Populations

JL:ksm

Enclosure

Joint Legislative Council

[Joint Legislative Council Members Who Selected and Appointed Committee and Its Membership]

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5008 Risser Road
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Co-Chair

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Representative
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Eland, WI 54427

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De Pere, WI 54115

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Horicon, WI 53032

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MARLIN SCHNEIDER

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Wisconsin Rapids, WI 54494

MICHAEL HUEBSCH

Speaker
419 West Franklin
West Salem, WI 54669

This 22-member committee consists of the majority and minority party leadership of both houses of the Legislature, the co-chairs and ranking minority members of the Joint Committee on Finance, and 5 Senators and 5 Representatives appointed as are members of standing committees.

Joint Legislative Council

[Current Joint Legislative Council Members Receiving Committee Report]

Co-Chair

FRED A. RISSER

Senate President

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Co-Chair

MARLIN D. SCHNEIDER

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President Pro Tempore
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ROBIN VOS

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Racine, WI 53406

This 22-member committee consists of the majority and minority party leadership of both houses of the Legislature, the co-chairs and ranking minority members of the Joint Committee on Finance, and 5 Senators and 5 Representatives appointed as are members of standing committees.

**PERFORMANCE-BASED DISEASE MANAGEMENT
PROGRAMS FOR LARGE POPULATIONS**

Steve Wieckert, Chair (4/08 – 1/09)
1 Weatherstone Drive
Appleton, WI 54914

Senator Julie Lassa, Chair (1/09 to completion)
4901 Beaver Dam Road
Stevens Point, WI 54481

Representative Chuck Benedict
3639 Bee Lane
Beloit, WI 53511

Dr. Alexandra Adams
University of Wisconsin-Madison
777 South Mills Street
Madison, WI 53715

Cynthia S. Christensen
Children's Hospital of WI
9000 W. Wisconsin Ave.
Milwaukee, WI 53201

Mikki Duran
Appleton Area School District
2725 E. Forest St.
Appleton, WI 54915

Marilyn Follen
Marshfield Clinic
7749 Lanae Avenue
Hewitt, WI 54441

Jo Musser
WPS Insurance
1717 W. Broadway
Madison, WI 53708-8190

Professor Susan A. Nitzke
UW-Madison
1415 Linden Drive
Madison, WI 53706

Dr. Kenneth Schellhase
Medical College of Wisconsin
8701 Watertown Plank Road
Milwaukee, WI 53226

Dr. Deborah Wubben
Physicians Plus Insurance
P.O. Box 2078
Madison, WI 53701-2078

STUDY ASSIGNMENT: The committee is directed to: (1) examine the role of disease management programs in assisting to address the state's health care needs; (2) review best practice disease management programs from around the nation; (3) review current practices of the State of Wisconsin's programs; (4) review state-of-the-art procedures for measuring performance of disease management programs; (5) make recommendations on ways to more effectively measure disease management results; and (6) focus on group settings for children, primarily schools, preschool, and day care settings and the laws, rules, and policies related to nutrition and physical activities in those settings especially in regard to childhood obesity.

12 MEMBERS: 1 Senator, 1 Representative, and 9 Public Members.

LEGISLATIVE COUNCIL STAFF: Mary Matthias and Rachel Letzing, Senior Staff Attorneys, and Kelly Mautz, Support Staff.

Committee Materials List

(Copies of documents are available at www.legis.state.wi.us/lc)

March 2, 2009 Mail Ballot				
<ul style="list-style-type: none"> WLC: 0384/2, relating to the electronic medical records tax credit. WLC: 0385/2, relating to a quality rating system for child care. WLC: 0388/2, relating to school nutrition. WLC: 0397/1, relating to physical education teachers. Draft letter to Governor Jim Doyle, relating to the Buy Local Buy Wisconsin Initiative (March 2, 2009). Draft letter to Representative Mark Pocan and Senator Mark Miller, Co-Chairs, Joint Committee on Finance, relating to the Buy Local Buy Wisconsin Initiative (March 9, 2009). 				
February 11, 2009 Meeting	Notice	Agenda	Audio	Minutes
<ul style="list-style-type: none"> WLC: 0382/1, relating to traditional neighborhood development ordinances. WLC: 0384/1, relating to the electronic medical records tax credit. WLC: 0385/1, relating to a quality rating system for child care. WLC: 0386/1, relating to physical education. WLC: 0387/2, relating to physical fitness assessments. WLC: 0388/1, relating to school nutrition. WLC: 0389/1, relating to health care homes. WLC: 0390/2, relating to department of transportation planning for bicycle and pedestrian ways. WLC: 0391/1, relating to mixed-use zoning. WLC: 0392/1, relating to the state housing plan. Draft letter to Governor Jim Doyle, relating to a quality rating system. Draft letters to Governor Jim Doyle and Senator Mark Miller and Representative Mark Pocan, Co-Chairs, Joint Finance Committee, relating to school lunch reimbursement and incentives. Draft letters to Governor Jim Doyle and Senator Mark Miller and Representative Mark Pocan, Co-Chairs, Joint Finance Committee, relating to the farm-to-school program. Draft letters to Governor Jim Doyle and Senator Mark Miller and Representative Mark Pocan, Co-Chairs, Joint Finance Committee, relating to Buy Local Buy Wisconsin. Draft letter to Wisconsin Congressional Delegation relating to menu labeling. Appleton School District student nutrition guidelines, distributed at the request of Public Member Mikki Duran (June 9, 2003). Letter from Karent Ordians and Paul Costanzo, Co-Chairs, Governor's Council on Physical Fitness and Health (January 21, 2008). Letter from Andrea Gavin, MD - President, Wisconsin Academy of Family Physicians (February 11, 2008). Memorandum, <i>Farm-to-School Policy Options for Improving School Nutrition</i>, from Bridget Holcomb, Associate Policy Director, Michael Fields Agricultural Institute, and Luke Rollins, Chair of Advocacy, WIPAN, Director of State Advocacy, American Heart Association (February 11, 2009). 				
November 21, 2008 Meeting	Notice	Agenda	Audio	Minutes
<ul style="list-style-type: none"> Memo No. 5, <i>Options for Legislation</i> (November 17, 2008). Memo No. 6, <i>Documents Relating to Options for Legislation Described in Memo No. 5</i> (November 17, 2008). <ul style="list-style-type: none"> Summaries of selected healthy lifestyle initiatives of other states, from the Association of State and Territorial Health Officials Compendium of State Healthy Lifestyles Initiatives (2006). The Wisconsin Nutrition and Physical Activity State Plan 2007 Progress Report. 2007 Assembly Bill 1168 and fiscal estimates. New York City ordinance, s. 81.50, and California law, Chapter 600, Laws of 2007, requiring posting of calorie information on restaurant menus. 				

- National Committee on Quality Assurance (NCQA) Physician Practice Connections – Patient-Centered Medical Home Content and Scoring [Summary](#).
- 2007 Assembly Bill [90](#).
- 2005 Assembly Bill [235](#) and fiscal estimates.
- Policy Assessments from the Wisconsin Partnership for Activity and Nutrition (WIPAN) Advocacy Committee, distributed at the request of Luke Rollins, Director of State Advocacy, American Heart Association, Midwest Affiliate.
 - [Physical](#) education instruction in Wisconsin schools.
 - [Complete](#) streets; physical activity built environment.
 - [Increasing](#) access to fruits and vegetables in Wisconsin communities.
 - [Menu](#) labeling of foods and beverages in Wisconsin restaurants.
 - [Nutrition](#) education standards in Wisconsin schools.
 - [Nutrition](#) standards for foods and beverages sold in Wisconsin schools.
- [National](#) Governor's Association Expert Policy Panel Proceedings Proposed Addendum.
- [Healthier Wisconsin Schools Project](#), Expert Policy Panel Proceedings, National Governors Association Center for Best Practices Health Kids, Healthy America Grant (October 2008).
- [DHS](#) and DPI Input to Wisconsin Legislative Council Staff Memorandum #5 (November 21, 2008).
- [Testimony](#) from Dr. Lowell Keppel, President, Wisconsin Academy of Family Physicians (November 21, 2008).
- [Letter](#) from Dr. Lowell Keppel, President, Wisconsin Academy of Family Physicians (November 21, 2008).
- [Chart](#), *TransforMed, The TransforMED Medical Home*.
- [WAFP](#) Patient-Centered Medical Home Medicaid Payment Proposal.
- [Joint](#) Principles of the Patient-Centered Medical Home (March 2007).

October 17, 2008 Meeting	Notice	Agenda	Audio a.m. Audio p.m.	Minutes
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- [Memo No. 1](#), *Summary of Recommendations Made to the Special Committee at its July 24 and September 12, 2008 Meetings* (October 8, 2008).
- [Memo No. 2](#), *Selected State Legislation Regarding Childhood Obesity* (October 9, 2008).
- [Memo No. 3](#), *2008 Minnesota Legislation on Health Care Homes* (October 9, 2008).
 - [Enclosure](#), *Joint Principles of the Patient-Centered Medical Home* (March 2007), American Academy of Family Physicians, American Academy of Pediatrics, American College of Physicians, and American Osteopathic Association.
- [Memo No. 4](#), *Selected Provisions of 2005 Vermont Act 191, Relating to Health Care Affordability and the Blueprint for Health* (October 9, 2008).
- [Article](#), *Weight Management and Fruit and Vegetable Intake Among US High School Students*, Journal of School Health, August 2008, Vol. 78, No. 8, distributed by Carolyn Fisher, EdD, CHES, Senior Advisor, Division of Adolescent and School Health, NCCDPHP, CDC.
- [Legislative](#) Fiscal Bureau Paper #372, *Health Care Quality and Patient Safety Council and Grant Program (DHFS - Health Care Quality Fund)* (June 8, 2007).
- [Presentation](#) by Elaine Mischler, CEO, Mischler Consultants, Waukesha.
- [Presentation](#) by Denise Webb, Program Manager, eHealth Care Quality and Patient Safety Board, Department of Health Services, and Dr. Tim Bartholow, Wisconsin Health Information Organization.
 - [Handout](#), *Persons Enrolled in Diabetes Program at Prairie Clinic, Sauk City, WI By Year*, submitted by Dr. Bartholow, Wisconsin Health Information Organization.
- [Presentation](#) by James Galloway, Assistant Surgeon General, Region V, Chicago, IL.

September 12, 2008 Meeting	Notice	Agenda	Audio	Minutes
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- [Presentation](#), *ThedaCare Disease Management: Process and Outcomes*, by Dr. John Barkmeier, ThedaCare (September 12, 2008).
 - [Testimony](#) by Dr. John Barkmeier, Medical Director, Information Technology, ThedaCare Physicians-Menasha, ThedaCare, Inc. (September 12, 2008).
 - [Testimony](#) by Verna Van Nuland.
- [Presentation](#) by Ken Thorpe, Executive Director, Partnership to Fight Chronic Disease, Atlanta.
- [Presentation](#) by Laura Tobler, Program Director, Health Program, National Conference of State Legislatures (NCSL) (September 12, 2008).
 - [Handout](#), *Medicaid Disease Management, States Turn to Private Sector Solutions to Improve Medicaid Programs*, distributed by Laura Tobler, Program Director, Health Program, NCSL (August 2008).

- [Presentation](#) by Carolyn Fisher, EdD, CHES, Senior Advisor, Division of Adolescent and School Health, NCCDPHP, CDC (September 12, 2008).
 - [Handout](#), *Physical Activity and the Health of Young People*, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services (October 2007).
 - [Handout](#), *Nutrition and the Health of Young People*, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services (October 2007).
 - [Handout](#), *Division of Adolescent and School Health, School Health Programs 2008*, Coordinating Center for Health Promotion, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services (March 2008).
 - [Handout](#), *Body Mass Index Measurement in Schools, Executive Summary*, Centers for Disease Control and Prevention.

July 24, 2008 Meeting

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- [Presentation](#) by Amy Winterfeld, Program Principal, Health Program, NCSL (July 24, 2008).
 - [Postcard](#), *Percentage of Children Who Are Obese*, NCSL.
 - [Report](#), *Childhood Obesity, Update of Policy Options and Research*, by Amy P. Winterfeld, NCSL (June 2007).
 - [Report](#), *Childhood Obesity, Legislative Policy Approaches and the Evidence Base to Date*, by Amy Winterfeld, NCSL (July 2006).
 - [Brief](#), *State Farm-to-School Policies*, NCSL Legisbrief (August/September 2008).
 - [Article](#), *Nutrition Rules*, by Amy Winterfeld, NCSL (May 2006).
 - [Article](#), *PE Makes a Comeback*, by Amy Winterfeld, NCSL (December 2007).
 - [Article](#), *The High Costs of Obesity*, NCSL (April 2004).
- [Presentation](#) by Milda Aksamitauskas, MPP, Policy Analyst, Division of Health Care Access and Accountability, Department of Health Services (DHS).
- [Presentation](#) by Mary Pesik, Nutrition and Physical Activity Coordinator, Division of Public Health, DHS.
- [Presentation](#) by Denise Runde, MSPH, Policy Initiatives Advisor, Division of Access and Accountability, DHS.
- [Presentation](#) by Marilyn Follen, Administrator, Quality Improvement and Care Management, Marshfield Clinic.
- [Presentation](#) by Dr. Brian Fidlin, PsyD, Program Director, NEW Kids Program, Children's Hospital of Wisconsin.