

COVID-19 PUBLIC HEALTH EMERGENCY (PHE)

BILL #1 BACKGROUND

HEALTH SERVICES

<p>BILL PROVISION: Flexible grant funds to support local public health agencies.</p> <p>Fiscal: Approximately \$17 million over biennium.</p>	
Issue	Local public health agencies are on the frontline in communities working to coordinate local responses to COVID-19. Local public health agencies need resources for additional staffing, supplies, and equipment to effectively respond to local needs.
Considerations	<ul style="list-style-type: none"> • Department of Health Services distributes moneys to local health departments for communicable disease control and prevention. This appropriation is budgeted with \$500,000 GPR annually distributed equitably to local health departments. • The Department of Health Services has indicated that local resource needs will exceed \$7.5 million over the first 30 days of the public health emergency.

<p>BILL PROVISION: Sum sufficient GPR funding for general resources and position authority for the Department of Health Services during public health emergency.</p> <p>Fiscal: GPR-backed sum sufficient funding during a public health emergency.</p>	
Issue	During a public health emergency, the Department of Health Services needs the flexibility to expend funds and increase staffing capacity as necessary to appropriately respond.
Considerations	<ul style="list-style-type: none"> • DHS began accumulating staffing costs related to COVID-19 in February 2020. Between the first and second months of staffing for the emerging pandemic, DHS costs increased by 486 percent. DHS expects costs to continue to rise at that rate for the following two months and then level off. • This provision provides DHS the powers, resources and flexibility necessary to rapidly and adequately respond to a large-scale emergency and take timely and assertive action to protect public health. • Funds may be used to facilitate coordination, make grants, provide awards, enter into contracts, conduct investigations, facilitate research, purchase products, strengthen surveillance, support emergency operations, create and fund FTE positions and carry out other activities the state health officer determines appropriate.

<p>BILL PROVISION: Base-building additional 64 FTE at Division of Public Health.</p> <p>Fiscal: Approximately \$10 million over biennium.</p>	
Issue	Funding critical public health positions through federal grants does not allow Wisconsin to pivot quickly towards Wisconsin specific issues or needs. Staff funded through federal grants are obligated to fulfill the requirements of the grant and emerging needs in Wisconsin may suffer when the grant requirements are determined at the federal level.

Considerations	<ul style="list-style-type: none"> • DHS began accumulating staffing costs related to COVID-19 in February 2020. Between the first and second months of staffing for the emerging pandemic, DHS costs increased by 486 percent. DHS expects costs to continue to rise at that rate for the following two months and then level off. • Currently 95 percent of public health positions are funded through targeted grants and are obligated to fulfill the requirements of those grants. • Adding critical public health positions (including epidemiologists, public health educators, doctors, nurses, scientists, etc.) is necessary to adequately respond to issues as they arise around the state. • In addition to flexibility to establish positions during a public health emergency to meet those unique needs, these positions would strengthen DPH’s ability to comprehensively address public health threats on an ongoing, permanent basis.
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BILL PROVISION: Waiving requirement that DHS submit waivers and SPAs to Joint Finance for approval during a public health emergency.	
Fiscal: No appropriation.	
Issue	This statutory relief allows the Department to rapidly respond to opportunities made available by the federal government during a public health emergency.
Considerations	<ul style="list-style-type: none"> • During a national emergency or disaster declaration, state Medicaid programs are permitted to submit 1135 and 1115 waivers, as well as SPAs and Appendix Ks in order to adjust the program to meet unique needs emerging from the emergency. • This provision allows the Department to rapidly respond to opportunities made available by the federal government during a public health emergency. • This action would not give the department the ability to expand Medicaid.

BILL PROVISION: Authorizes DHS to suspend compliance with provisions of Medicaid statutes to satisfy criteria to qualify for an increased FMAP.	
Fiscal: No appropriation.	
Issue	Under current law, Wisconsin would be ineligible for the FMAP increase offered by the federal government due to the February 1, 2020, implementation of premiums for childless adults and the implementation of the substance abuse treatment needs question for childless adults.
Considerations	<ul style="list-style-type: none"> • The federal Families First Coronavirus Response Act provides an opportunity for states to obtain a temporary increased federal match for state Medicaid programs. • LFB estimates that the 6.2 percent increase to the FMAP would result in GPR savings of approximately \$150 million GPR per quarter. • This action would not give the department the ability to expand Medicaid.

INSURANCE

BILL PROVISION: Prohibiting coverage discrimination based on COVID-19.	
Fiscal: No appropriation.	
Issue	Without specific protections for individuals diagnosed with COVID-19, individuals affected by COVID-19 may be vulnerable to discriminatory actions.

Considerations	<ul style="list-style-type: none"> • This bill prevents discrimination in health insurance coverage by prohibiting insurers from doing the following based on a current or past diagnosis of COVID-19: <ul style="list-style-type: none"> ○ Establishing rules for the eligibility of any individual, employer or group to enroll or remain enrolled in a plan for the renewal of coverage of the plan; ○ Canceling coverage during a contract term; ○ Setting rates for coverage; or ○ Refusing to grant a grace period for the payment of a premium that would have generally been granted.
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BILL PROVISION: Requires that insurers cover all telehealth services that would be covered were the services provided in-person.

Fiscal: No appropriation.

Issue	The emergence of this public health emergency has illuminated the significant barriers, especially for individuals in rural areas, to accessing medical care via telehealth services under standard private health insurance. There should be coverage parity between in-person and telehealth services to ensure healthcare is as accessible and affordable as possible.
Considerations	<ul style="list-style-type: none"> • If we're truly going to slow or stop the spread of COVID-19, we must transition to broader use and acceptance of telehealth. • Telehealth also connects rural Wisconsinites to the care they need, which is increasingly important as access to health care in our communities is limited or strained by this public health emergency. • Allowing Wisconsinites to access the care they need in their homes will keep individuals, especially our most vulnerable citizens such as older adults and those with compromised immune systems, out of hospitals, clinics, and other health care facilities where they may be exposed or expose others to COVID-19. • The bill helps achieve telehealth parity by prohibiting health insurers from denying covered services delivered through telehealth.

BILL PROVISION: Prohibiting the cancellation of insurance policies during COVID-19.

Fiscal: No appropriation.

Issue	Individuals affected by the public health crisis may not be able to pay their premiums due to large-scale economic disruption and, without this provision, would otherwise be at risk of losing coverage under their health insurance policy.
Considerations	<ul style="list-style-type: none"> • Thousands of workers across the state are facing the potential of being without work for an extended period of time. • Wisconsinites need to have flexibility in paying their insurance premiums and shouldn't fear policy cancelations.

BILL PROVISION: Mandating coverage for testing, diagnosis, treatment, prescriptions, and vaccines related to COVID-19.

Fiscal: No appropriation.

Issue	The recently enacted federal bill, the Families First Coronavirus Response Act, provides that insurers cover testing and screening related to COVID-19. Uncertainty around coverage of
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	treatment, including prescription medicines, following the testing and diagnosis of COVID-19 disincentivizes individuals from obtaining testing, risking public health and safety and harming the collective effort to reduce the spread of the virus.
Considerations	<ul style="list-style-type: none"> • A recent study found that Americans were avoiding the use of health care services, even if they had insurance, out of fear for the financial implications. • Requiring coverage for COVID-19 related services provides certainty to consumers and enhances our collective ability to identify and treat affected individuals and reduce spread.

BILL PROVISION: Prohibiting cost-sharing and prior authorization for testing, diagnosis, treatment, prescriptions, and vaccines related to COVID-19.	
Fiscal: No appropriation.	
Issue	The recently enacted federal bill, the Families First Coronavirus Response Act, prohibits cost-sharing for testing and screening related to COVID-19. Eventual treatment associated with COVID-19 can produce significant costs for affected individuals, disincentivizing individuals from seeking medical care, further exacerbating the economic challenges individuals are experiencing during the public health emergency, all of which harm the collective effort to control the spread of the virus.
Considerations	<ul style="list-style-type: none"> • Estimates from Kaiser Family Foundation (KFF) suggest that the cost of inpatient admissions for COVID-19 treatment range from approximately \$10,000 to \$20,000. • Also according to KFF, individuals with employer coverage who are admitted for COVID-19 treatment could face out-of-pocket costs exceeding \$1,300. • A recent study found that Americans were avoiding the use of health care services, even if they had insurance, out of fear for the financial implications.

BILL PROVISION: Prohibits surprise and balance billing for care related to COVID-19 and out-of-network care that is a result of a preferred provider being unavailable due to the public health emergency.	
Fiscal: No appropriation.	
Issue	The healthcare system is experiencing capacity issues as it attempts to respond to the public health emergency. As a result, care that is both related and unrelated to COVID-19 may be routed to an out-of-network provider. Consumer protection measures, as well as a payment remedy, are necessary to ensure that healthcare remains accessible and affordable during a public health emergency.
Considerations	<ul style="list-style-type: none"> • Data on pneumonia treatment analogous to in-patient admissions for COVID-19 suggest that between 15–20 percent of patients are likely to receive a surprise bill following an in-network admission. • Some health insurance companies have indicated they will not charge higher cost-sharing for people who inadvertently receive out-of-network care, however, only providers would be in a position to stop balance bills. • This provision applies to any service, treatment or supply that is related to diagnosis or treatment for the condition for which the public health emergency has been declared and that is provided by an out-of-network provider. • The provision would also apply if the preferred provider network is unavailable due to the public health emergency and an individual is referred to an out-of-network provider for treatment of any condition.

BILL PROVISION: Prohibiting insurers from requiring prior authorization or imposing a quantity limit on certain prescription drugs during a public health emergency.	
Fiscal: No appropriation.	
Issue	Without statutory relief to ensure flexibility, unintentional or unnecessary barriers that don't account for the extenuating circumstances of a public health emergency may limit an individual's access to necessary prescription medicines.
Considerations	<ul style="list-style-type: none"> • Prohibits requiring prior authorization for early refills of a prescription drug or otherwise restricting the period of time in which a prescription can be refilled. • Also prohibits imposing a limit on the quantity of the prescription drugs if the quantity is no more than 90-days. • These provisions do not apply to controlled substances.

BILL PROVISION: Liability insurance for certain health care providers temporarily practicing in Wisconsin during a public health emergency.	
Fiscal: No appropriation.	
Issue	Without statutory changes physicians and nurse anesthetists temporarily practicing in Wisconsin during a public health emergency are at financial risk without the ability to file with the OCI a certificate of insurance for a liability policy.
Considerations	<ul style="list-style-type: none"> • It is essential to prepare for out-of-state health care workers who may need to come to Wisconsin to care for our residents. • This bill would afford liability insurance to physicians or nurse anesthetists from out of state. • We may need more licensed medical professionals to support those who become sick and it's critical to ensure they can operate safely and with liability insurance.

SAFETY & PROFESSIONAL SERVICES

BILL PROVISION: Allow pharmacists to extend most Rx refills by 30 days during a public health emergency, where it is safe to do so.	
Fiscal: No appropriation.	
Issue	Health care providers need to prioritize services during the PHE – typically, pharmacists must obtain a health care provider's approval to allow a prescription renewal.
Considerations	<ul style="list-style-type: none"> • Individuals and pharmacists need flexibility when providers are overextended or otherwise unable to extend a prescription in a timely manner. • Does not include controlled substances and where a "no refill" indication has been made. • Pharmacists must get a health care provider's approval for additional refills after the initial refill without affirmative physician approval.

BILL PROVISION: Allow out-of-state health professionals to work in Wisconsin during a public health emergency.

Fiscal: No appropriation.	
Issue	Health care provider demand will remain high during the PHE.
Considerations	<ul style="list-style-type: none"> • Wisconsin needs additional providers to deliver critical care to its citizens when state-credentialed providers may be overwhelmed with cases or ill as a result of COVID-19. • Credential applications take time to process – limiting the information DSPPS must process to grant or deny a temporary credential will allow for quicker processing times.

BILL PROVISION: Allow temporary credentials for former healthcare providers during a public health emergency.	
Fiscal: No appropriation.	
Issue	Health care provider demand will remain high during the PHE.
Considerations	<ul style="list-style-type: none"> • Former health care workers have the expertise and knowledge to assist in times of emergency when demand for health care is high and the number of available health care providers is not sufficient to meet demand. • Credential applications take time to process. Limiting the information DSPPS must process to grant or deny a temporary credential will allow for quicker processing times.

BILL PROVISION: Exempt certain health care provider credentials from renewal deadlines.	
Fiscal: No appropriation.	
Issue	Health care provider demand will remain high during the PHE.
Considerations	<ul style="list-style-type: none"> • Health care workers need to prioritize health care treatment over process and DSPPS needs to prioritize processing temporary credential applications for out-of-state and retired health care providers during the PHE.

ADMINISTRATION

BILL PROVISION: Grants to healthcare providers.	
Fiscal: \$100 million GPR over biennium.	
Issue	The public health emergency has presented numerous resource challenges to hospitals and other healthcare providers. In order to effectively respond to the crisis, additional resources are needed on the frontlines at our healthcare facilities to ensure access to critical supplies and equipment and the necessary deployment of certain activities and personnel.
Considerations	<ul style="list-style-type: none"> • The capacity of the healthcare system is a critical factor in prevention of COVID-19 related deaths. This grant is designed to provide flexible resources to meet urgent provider needs and build general health system capacity. • Grants could be used for the following purposes: <ul style="list-style-type: none"> ○ Establishment and operation of temporary sites to provide testing services, treatment beds, or to isolate or quarantine affected individuals; ○ Temporary conversion of space for another purpose that after a COVID-19 outbreak reverts to its original purpose; ○ Staff overtime and hiring additional staff;

	<ul style="list-style-type: none"> ○ Staff training or orientation; ○ Purchasing of consumable protective or treatment supplies and equipment; ○ Development and implementation of COVID-19 screening and testing procedures; ○ Patient outreach related to COVID-19; ○ Emergency transportation; ○ Information technology and systems to support telehealth activities, patient triage and COVID-19 screening; ○ Purchasing replacement parts or filters necessary for medical equipment; ○ Specialty cleaning supplies; ○ Expenses related to isolation and quarantine of staff; and ○ Expenses that assist with planning or preparing for, or responding to an outbreak of COVID-19.
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BILL PROVISION: DOA sum sufficient for direct COVID-19 costs.	
Fiscal: Sum sufficient GPR funding capped at \$200 million over biennium.	
Issue	Additional authority to expend resources is necessary for DOA to fulfill its responsibility in the facilitation of coordination among governmental bodies, support of emergency operations, facilities and IT costs, and personnel costs directly related to the emergency.
Considerations	<ul style="list-style-type: none"> • Specifically, the following activities are allowable under this appropriation: <ul style="list-style-type: none"> ○ (a) facilitating coordination between and among federal, state, local, and tribal agencies, social services agencies, and public and private health care entities; ○ (b) awarding grants and entering into contracts; ○ (c) supporting emergency operations, including investigation, education, and eradication; ○ (d) information technology; ○ (e) facilities expenditures; ○ (f) personnel costs, including salary, fringe, overtime, and additional leave benefits, for any state agency; ○ (g) state purchasing; ○ (h) expenditures associated with continuity of state government; and ○ (i) carrying out other activities as the Secretary of DOA determines applicable and appropriate. • The provision requires DOA to report to the JFC on expenditures from the public health emergency appropriation no later than 75 days after first spending funds and no later than the end of each month after that in which DOA spends funds from the appropriation.

BILL PROVISION: General obligation refunding bond limit increase.	
Fiscal: Indeterminate.	
Issue	In order to help pay for the state's efforts to address the public health emergency, action is necessary to increase the general obligation refunding bond limit by \$725 million to improve the state's flexibility to achieve savings through refinancing.

Considerations	<ul style="list-style-type: none"> • These bonds could only be issued if the debt refinancing meets the current law requirement that the true interest costs of the state must be reduced.
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BILL PROVISION: Granting additional authority to the DOA Secretary to move positions.	
Fiscal: No appropriation.	
Issue	Additional flexibility is necessary to ensure that state government can quickly and efficiently meet the rapidly evolving needs of state agencies to respond to the crisis.
Considerations	<ul style="list-style-type: none"> • Authorize the DOA Secretary to transfer state employees among agencies during the COVID-19 public health emergency. • The state agency receiving the transferring employee would be responsible for funding the employee's salary and fringe benefit costs.

BILL PROVISION: Providing the Division of Personnel Management with additional flexibility during the public health emergency.	
Fiscal: No appropriation.	
Issue	Statutory relief is necessary in order to allow DPM to assist agencies in retaining LTE staff and quickly recruiting additional staff critical to the response efforts, helping ensure that state agencies can dedicate the maximum level of resources to the emergency response.
Considerations	<ul style="list-style-type: none"> • The changes, which are only applicable during the public health emergency, include: <ul style="list-style-type: none"> ○ Suspending requirement that DPM provide a state employee his/her personnel file within seven days of the request; ○ Waiving the 1,040-hour annual limit that a limited term employee may work in a calendar year; ○ Permitting the DPM administrator to provide additional sabbatical leave to state employees that provide critical services during the public health emergency; ○ Allowing a state employee to take annual leave during the first six month of employment; ○ Allowing state employees returning from a leave absence to receive health insurance benefits immediately, rather than waiting the standard 30 days; ○ State employees do not waive his/her rights to appeal an employment decision if the employee does not file the complaint in a timely manner; and ○ Waiving requirement for appointing authorities to hold an in-person meeting with state employees that file a grievance.

BILL PROVISION: Local government emergency assistance.	
Fiscal: \$20 million GPR over biennium.	
Issue	Local governments will incur extraordinary costs related to the COVID-19 pandemic.
Considerations	<ul style="list-style-type: none"> • Eligible claims will be for extraordinary otherwise unreimbursed operational costs related to protecting and improving public health during the COVID-19 pandemic. • This program will not only provide assistance to local governments but will also help protect property taxpayers because less will have to be levied in the future to cover unreimbursed expenditures.

	<ul style="list-style-type: none"> Eligible recipients would include counties, cities, villages, towns, or federally-recognized American Indian tribes or bands in the state.
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<p>BILL PROVISION: A one percent increase in County and Municipal Aids in 2020.</p> <p>Fiscal: Approximately \$7.5 million GPR.</p>	
Issue	Local governments will incur extraordinary costs related to the COVID-19 pandemic.
Considerations	<ul style="list-style-type: none"> Local governments currently experience the burden of taking on additional costs associated with responding to COVID-19 and the public health emergency's associated challenges. From instituting new cleaning protocols, ensuring all emergency personnel have the supplies and equipment they need, municipal clerks responding to unprecedented demand for absentee ballots, or the additional strain on county human services, local governments, like the state and federal government, require additional resources to appropriately respond to the public health emergency.

CHILDREN & FAMILIES

<p>BILL PROVISION: Expand WI Shares eligibility during the public health emergency.</p> <p>Fiscal: \$100 million TANF package.</p>	
Issue	With the closure of schools, many families will need child care in order to continue working, especially essential workforce families (health care, first responders, etc.).
Considerations	<ul style="list-style-type: none"> We need essential employees to be able to continue reporting for work. These new WI Shares families would receive emergency authorizations under an expedited process.

<p>BILL PROVISION: Expand the Job Access Loan program during the public health emergency for individuals facing an immediate and discrete financial crisis due to the pandemic.</p> <p>Fiscal: \$100 million TANF package.</p>	
Issue	During the PHE, it will be critical that Wisconsinites are able to meet emergency needs that support employment.
Considerations	<ul style="list-style-type: none"> DCF would be authorized to provide loans of up to \$1,600 to individuals facing an immediate and discrete financial crisis due to COVID-19, if they meet certain requirements.

<p>BILL PROVISION: Expand the Wisconsin Works (W-2) program during the public health emergency.</p> <p>Fiscal: \$100 million TANF package.</p>	
Issue	Wisconsinites who are not able to work due to closure of their place of employment or lack of available child care due to the PHE will need assistance.
Considerations	<ul style="list-style-type: none"> Ensures that we are helping individuals who want to work but cannot due to COVID-19. Individuals may be eligible for assistance under the W-2 program even if they aren't eligible for things like unemployment benefits.

	<ul style="list-style-type: none"> Provides \$653 per month under the W-2 program to an individual who is facing an immediate and discrete financial crisis due to COVID-19, if they meet certain requirements.
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BILL PROVISION: Expand the [Emergency Assistance](#) program during the public health emergency for families in need who are facing homelessness.
Fiscal: \$100 million TANF package.

Issue	During the PHE, it will be critical that Wisconsinites are able to pay emergency housing or utility-related expenses.
Considerations	<ul style="list-style-type: none"> DCF would be authorized to provide payments of up to \$1,200 to an individual who suffers a loss of income due to COVID-19, if they meet certain requirements. Encompasses those between 18-24 years old and who are not parents or caretakers, but may still have emergency needs during the PHE.

BILL PROVISION: Create a short-term financial assistance program to provide cash payments for essential needs during the public health emergency.
Fiscal: \$100 million TANF package.

Issue	Wisconsin families will need help paying for housing, transportation, medical costs, and other essential needs during the PHE.
Considerations	<ul style="list-style-type: none"> Individuals who are receiving a W-2 benefit on the date they apply for short-term financial assistance would not be eligible.

BILL PROVISION: Increase administrative costs for implementation.
Fiscal: \$100 million TANF package.

Issue	DCF may incur additional IT and staffing costs to quickly implement the proposals in this package.
Considerations	<ul style="list-style-type: none"> DCF will incur certain costs to expand existing programs and/or stand up new programs quickly to address Wisconsinites' needs during the PHE.

BILL PROVISION: Create a grant program to provide hazard pay to child care providers that remain open during the public health emergency.
Fiscal: \$25 million GPR package.

Issue	Child care providers who remain open to serve healthcare professionals and essential workers do so at a risk to themselves and their business.
Considerations	<ul style="list-style-type: none"> Child care is a critical service and we need to make sure it remains accessible. We need to encourage experienced child care leaders to continue to operate. All providers would be eligible, regardless of whether they provide services to WI Shares families.

<p>BILL PROVISION: Create a grant program to help healthcare professionals and essential workers pay for child care costs incurred due to the pandemic and during the public health emergency.</p> <p>Fiscal: \$25 million GPR package.</p>	
Issue	Due to increased workload for Wisconsin's health care professionals and other essential workers, many Wisconsin families will need help paying for child care while they are helping combat the PHE.
Considerations	<ul style="list-style-type: none"> • Child care is a critical service and we need to make sure it remains accessible. • We need to ensure child care locations can be small and nimble. • We need to be able to rely on healthcare and other essential workers to keep our families, our neighbors, and our communities safe. For that to happen, they need somewhere safe to send their children. • DCF is continuing to work with partners at the local, state and federal levels as well as private partners to evaluate need and logistics.

EMPLOYEE TRUST FUNDS

<p>BILL PROVISION: Allow rehiring of retired annuitants during a public health emergency and the reinstatement of licensure (including people in the last 5 years and people from out of state)</p> <p>Fiscal: No appropriation.</p>	
Issue	Statutory relief is necessary in order to support the COVID-19 response efforts of state and local governments by ensuring that experienced staff can be quickly rehired and deployed to in-need areas.
Considerations	<ul style="list-style-type: none"> • This provision reduces the waiting period for a WRS participant who has applied to receive a retirement annuity must wait between terminating covered employment with a WRS employer and returning to WRS-covered employment from 75 days to 15 days. • This reduced waiting period, which is in effect only during a public health emergency, applies to participants rehired into classifications deemed as important to the COVID-19 response efforts, as determined by hiring state agencies and local government public health officials.

WORKFORCE DEVELOPMENT

<p>BILL PROVISION: Repeal the one-week waiting period for unemployment insurance.</p> <p>Fiscal: No appropriation.</p>	
Issue	The state has experienced an unprecedented increase in the number of unemployment claims within a very short time frame due to the PHE – allowing individuals to receive their UI benefit immediately will ensure financial stability for claimants and the economy.
Considerations	<ul style="list-style-type: none"> • Under the Families First Coronavirus Response Act, states must temporarily suspend waiting week requirements to receive federal matching for the first week of Extended Benefits and emergency administrative grants.

	<ul style="list-style-type: none"> • Elimination of the one-week waiting period helps not only the claimants, but also local businesses through the purchase of goods and services, landlords who may not otherwise receive a rent check but must continue to pay for upkeep and utilities, and local banks who service loans. • A full repeal is warranted at this time, as the economic repercussions of COVID-19 are not known and this type of assistance may be needed for months or years.
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EDUCATION

<p>BILL PROVISION: Grant DPI authority to waive state requirements for schools if closed by DHS and waive report card requirements for the 2019-20 school year.</p> <p>Fiscal: No appropriation.</p>	
Issue	K-12 schools are on the frontline of adapting to rapidly changing circumstances during the PHE. They need flexibility in the face of statutes and other restrictions that do not contemplate the magnitude of the current PHE.
Considerations	<ul style="list-style-type: none"> • Allowing DPI to waive requirements reduces the burden on schools that are devoting time to adapting their instruction and function to support schools remotely. • The burden of addressing requirements that are not possible for schools as the 2019-20 school year comes to a close is placed upon the department instead of each school. • DPI can waive certain requirements for public schools, but is unable to do so for private schools or independent charter schools.

<p>BILL PROVISION: Require public school employees continue to be paid at their regular rate if schools are closed by DHS.</p> <p>Fiscal: No appropriation.</p>	
Issue	Public school employees are on the frontline of adapting to rapidly changing circumstances during the PHE. They need to continue to be paid during the PHE as they help our K-12 students adapt.
Considerations	<ul style="list-style-type: none"> • This is especially critical given the staff shortages we've seen in recent years.

AGRICULTURE, TRADE AND CONSUMER PROTECTION

<p>BILL PROVISION: Enacting a statewide moratorium for residential and commercial evictions.</p> <p>Fiscal: No appropriation.</p>	
Issue	Action is needed to ensure housing security for Wisconsinites that lose their jobs or suffer financial hardship as a result of the COVID-19 pandemic and to assist Wisconsin businesses struggling to stay afloat both during and immediately following the COVID-19 public health emergency.
Considerations	<ul style="list-style-type: none"> • Under this provision, during a public health emergency, a landlord may not: (a) issue a tenant in default of rent payment a notice to pay or vacate within at least five days;

	<p>(b) issue a notice to vacate within at least 14 days; or (c) charge a late fee for late payment of rent.</p> <ul style="list-style-type: none"> • If a notice to pay or vacate was given prior to a declared public health emergency, the days during the public health emergency (including any extension and the 45 days following) are not counted in the five or 14-day notice.
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ECONOMIC DEVELOPMENT

<p>BILL PROVISION: Retain \$25 million scheduled to lapse to the general fund.</p> <p>Fiscal: \$25 million retained at WEDC.</p>	
Issue	Wisconsin businesses big and small are being affected by the public health emergency – it is essential for the health of our state and the future of our economy to ensure businesses shutdown during the PHE are closed temporarily and not permanently.
Considerations	<ul style="list-style-type: none"> • Combined with likely assistance from the federal government in the coming weeks, these funds will help businesses maintain employment and investment. • WEDC needs broad discretion in deploying these funds in the manner most effective to combat economic challenges in the rapidly changing PHE environment.

ELECTIONS

<p>BILL PROVISION: Suspending voter identification requirements during a public health emergency.</p> <p>Fiscal: No appropriation.</p>	
Issue	Residents may have voter IDs, such a driver's licenses, which have expired or will soon expire, and these voters may find it difficult to renew these forms of identification as a result of travel restrictions and health concerns related to the public health emergency.
Considerations	<ul style="list-style-type: none"> • The public health emergency poses additional barriers to vote in addition to the barriers already presented by certain Voter ID requirements. • Disruption caused by the public health emergency limits the ability for individuals to obtain certain documentation that is required in order to vote. • To avoid further disenfranchising voters, action needs to be taken in order to preserve access to voting.

<p>BILL PROVISION: Extending electronic voter registration to the same day to request an absentee ballot by mail and providing funding to update the voter registration system.</p> <p>Fiscal: No appropriation.</p>	
Issue	Without extension of online voter registration, eligible voters would be forced to register in-person during a public health emergency, which could result in exposure to COVID-19.
Considerations	<ul style="list-style-type: none"> • This provision provides the flexibility and funding necessary to extend online voter registration to avoid unnecessary exposure and additional risk of disease spread. • The bill would extend the online registration deadline for the spring election to April 2, 2020, and would additionally extend the deadline to the fifth day preceding the election for any other election held during a public health emergency.

	<ul style="list-style-type: none"> On March 20, 2020, the U.S. District Court for the Western District of Wisconsin issued an order extending the online registration deadline to March 30 for the April 7 spring election only.
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<p>BILL PROVISION: Allowing absentee voting for any election during a public health emergency, requiring the postmark by election date, and waiving the witness requirement.</p> <p>Fiscal: No appropriation.</p>	
Issue	Under current law, an absentee ballot must arrive at a polling place prior to the polls closing on Election Day.
Considerations	<ul style="list-style-type: none"> Voting absentee will drastically reduce the exposure clerks and volunteer poll workers, who often are elderly, have to others. This also reduces the exposure voters would have to others, not to mention reducing the exposure all have to voting equipment, which may be touched by dozens or more people on Election Day.

<p>BILL PROVISION: Authorize DOA to print absentee ballots for local governments.</p> <p>Fiscal: Indeterminate.</p>	
Issue	As more people request absentee ballots during the public health emergency, local governments will need help making sure they can print enough ballots quickly.
Considerations	<ul style="list-style-type: none"> This provision creates a continuing PR appropriation under DOA to support the cost of providing printing services.

EMERGENCY MANAGEMENT

<p>BILL PROVISION: Public health emergency costs GPR sum sufficient funding for the Department of Military Affairs.</p> <p>Fiscal: Sum sufficient GPR funding capped at \$300 million over biennium.</p>	
Issue	Without the authority granted in this provision, the Department of Military Affairs is limited from appropriately utilizing or planning for the use of necessary resources to swiftly address private and public needs related to responding to the public health emergency.
Considerations	<ul style="list-style-type: none"> Requires the department to report to the Joint Committee on Finance and the Governor no later than 75 days after the first expenditure, and monthly thereafter any expenditures from this appropriation.

ENTERPRISE-WIDE

<p>BILL PROVISION: General suspension of deadlines during a public health emergency.</p> <p>Fiscal: No appropriation.</p>	
Issue	Action is necessary to allow everyone to focus on the crisis at hand rather than dedicating time and resources to reports and other nonessential activities that have deadlines during the public health emergency.

Considerations	<ul style="list-style-type: none"> • Many statutory deadlines will be difficult, if not impossible, to meet during the period of disruption resulting from the public health emergency. • Without flexibility, many deadlines may not be met, and agency staff and resources that should be focused on addressing the public health emergency will be unnecessarily redirected toward meeting these deadlines.
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BILL PROVISION: General waiver of in-person requirements during a public health emergency.	
Fiscal: No appropriation.	
Issue	Statutory relief is necessary in order to provide flexibility to allow people to appear remotely where they would otherwise be required to appear in person is a common sense way to reduce unnecessary face-to-face interactions.
Considerations	<ul style="list-style-type: none"> • Face-to-face interactions present additional opportunities for exposure to and spread of the virus, which will hinder the state’s ability to swiftly address the emergency and will prolong the harm caused by the virus. • This provision enhances the state’s response to the public health emergency by allowing for the waiving of certain in-person requirements that may increase the public health risk.

JOINT RESOLUTION

BILL PROVISION: Senate Joint Resolution Extending the Public Health Emergency.	
Fiscal: No appropriation.	
Issue	Under current law, the Governor may declare a state of emergency via executive order. A state of emergency shall not exceed 60 days unless the state of emergency is extended by a joint resolution of the Legislature.
Considerations	<ul style="list-style-type: none"> • This joint resolution would extend the current public health emergency indefinitely until it is revoked by either an executive order of the Governor or a subsequent joint resolution of the Legislature. • Modeling suggests that the public health emergency Wisconsin and other states are currently facing will take a sustained approach to emergency management beyond the current end date of the declared emergency. • The state needs the flexibility and authority granted under an emergency declaration in order to continue meeting the emergency with an appropriate response.