

BUDGET MODIFICATIONS

Motion:

Move the following provisions:

1. *Farmer Assistance Confidentiality.* Modify s. 93.51(3)(d) of the statutes, related to technical and planning assistance provided by the Department of Agriculture, Trade and Consumer Protection Farm Center, as follows, to specify information the Department is to keep confidential:

"Advisors and the department shall keep confidential all information obtained in the process of providing advice or counseling, except for aggregate data compiled by the department at not less than a countywide level that does not contain any reference to the identity of any individual or individual farm. Any such confidential information contained in a record is not subject to the right of public inspection and copying under s. 19.35 (1). This paragraph does not apply to information relating to possible criminal misconduct."

2. *Provision of Utility Services.* Amend s. 196.01 (5) (b) of the statutes to specify that the definition of "public utility" excludes, among other entities, a state agency, as defined in s. 20.001 (1) of the statutes, that may own, operate, manage or control all or any part of a plant or equipment for the production, transmission, delivery or furnishing of water either directly or indirectly for the public. Specify the provision takes effect on the first day of the 13th month beginning after the effective date of the bill.

Further, provide that for purposes of awarding federal Community Development Block Grant funding in the 2017-19 fiscal biennium, the Department of Administration is to give priority, to the extent allowed by federal law, to a project meeting all of the following: (a) the project would plan for or establish public or private facilities for the provision of water and sewer services primarily to residential users; (b) the new water service would replace services currently provided by an entity other than a public utility, a community water system, a cooperative association, or private groundwater wells; and (c) the new sewer service would replace services currently provided by an entity other than a public utility, private on-site wastewater treatment systems, or any other on-site forms of sewage disposal.

3. *Clean Water Fund Hardship Financial Assistance.* Modify prior Joint Finance action under the Environmental Improvement Fund to authorize a municipality that submitted an incomplete application for financial hardship assistance by June 30, 2017, to be eligible under 2015-16 statutory requirements if the municipality submits a complete application for financial hardship assistance by June 30, 2018, and meets the other eligibility criteria under the 2015-16 statutes related to median household income and wastewater user charges. Previous action approved the Governor's recommendation to eliminate the financial hardship assistance program, but authorized a

municipality that submitted a complete application for clean water financing by the current law deadline of June 30, 2017, to be eligible to apply for assistance under the current financial hardship program provisions. Under current law, a municipality must have a facility plan approved by the Department of Natural Resources (DNR) and biddable municipality facility plans and specifications before the application can be considered complete. It is anticipated that the Bluffview Sanitary District in Sauk County is the only municipality that would meet the modification.

4. *Building Occupational Skills for Success Program.* Modify prior Joint Finance action to specify that the Milwaukee Development Corporation, rather than the City of Milwaukee, shall receive a grant of \$200,000 in fiscal year 2017-18 from the Department of Workforce Development for the purpose of supporting the Building Occupational Skills for Success (BOSS) program. Provide that the Milwaukee Development Corporation or any other organization shall provide equal matching funds to support the BOSS program.

5. *Not-For-Profit Facility Building Permit Exemption.* Exempt from the definitions of place of employment and public building, for purposes of state building code requirements, a not-for-profit facility with the primary purpose of housing or rehabilitating abandoned, injured, or sick wildlife. Currently, places of employment and public buildings are generally subject to state building code requirements.

6. *Crime Laboratory and Drug Law Enforcement (CLDLE) Surcharge and DNA Surcharge.* Modify provisions adopted by Joint Finance in Paper #408 related to the appropriation structure of the CLDLE and DNA surcharge fund to retain the existing appropriation for Crime Laboratories and DNA analysis as a continuing, rather than an annual, appropriation. In addition, require that DOJ notify the Committee if it is anticipated that the CLDLE and DNA surcharge fund is anticipated to go into deficit.

7. *Compensation Reserves.* Advance the date of implementation of state employee (non-UW and UW) compensation increases from 2% on September 30, 2018, and 2% on May 26, 2019, to 2% on July 1, 2018, and 2% on January 1, 2019. Increase GPR funding in compensation reserves by \$25,700,000 in 2018-19.

8. *Program Revenue Appropriations.* Modify previous actions taken by the Joint Committee on Finance under Motion #48 (funding for a grant to the Wisconsin Court Appointed Special Advocate Association -- WiCASA), Motion #76 (funding for the beat patrol overtime grant program), and Motion #78 (funding for the treatment alternatives and diversion (TAD) program) to specify that PR annual appropriations be created in the Department of Justice (DOJ) to support the TAD program, the beat patrol overtime grant program, and the grant to WiCASA. Provide that an equivalent amount of funding (\$80,000 annually for WiCASA, \$1,000,000 annually for beat patrol overtime, and \$250,000 annually for TAD) for each of these programs provided under the initial motions be provided to the new annual PR appropriations. Provide that PR funding be supported by a transfer of funds to each appropriation from DOJ's administrative services gifts, grants, and proceeds continuing PR appropriation from settlement funds that are not committed under the terms of the settlement (Attorney General discretionary settlement funds), totaling \$160,000 in 2017-18 for WiCASA, \$2,000,000 in 2017-18 for beat patrol overtime, and \$500,000 in 2017-18 for TAD.

Eliminate additional GPR funding provided under Motion #48, Motion #76, and Motion #78 for each of the three programs, as well as a requirement that DOJ transfer an equivalent amount of Attorney General discretionary settlement funds to the general fund to offset the expenditure increases during the 2017-19 biennium. [As noted above, an equivalent amount of funding for each of the three programs would instead be supported by a direct transfer of Attorney General discretionary settlement funds.]

9. *Mobile Field Force Grants.* Modify prior actions by Joint Finance on Paper #445 related to creation of a mobile field force grant program in the Department of Military Affairs (DMA). Adopt, rather than delete, the Governor's recommendation to create a mobile field force grant program and provide \$500,000 GPR in 2017-18 to DMA to award grants to law enforcement agencies to fund crowd-control training and equipment used for crowd control. Create a continuing GPR appropriation for this purpose. In addition, prohibit DMA from requesting an increase in the appropriation in its biennial budget request for the 2019-21 biennium.

10. *Clarification of 2017 Act 33 Provisions.*

a. Create an initial applicability clause for 2017 Wisconsin Act 33 which first applies the Act to circumstances surrounding or leading to the commission of an act as an aider that occur on July 19, 2017.

b. Provide that an aider is immune from prosecution for bail jumping (under s. 946.49, Stats) under the circumstances surrounding or leading to his or her commission of an act as an aider to a person suffering from an overdose of, or other adverse reaction to, any controlled substance.

c. Provide that if an aided person is subject to prosecution for bail jumping (under s. 946.49, Stats) under the circumstances surrounding or leading to the aider's assistance, the District Attorney must offer the aided person a deferred prosecution agreement that includes the completion of a treatment program.

d. Sunset the bail jumping changes for aided persons and aiders on August 1, 2020. Provide that the bail jumping changes first apply to circumstances surrounding or leading to the commission of an act as an aider that occur on July 19, 2017.

11. *State Prosecutor Board -- Delay Effective Date.* Modify Motion #289, related to the creation of a Prosecutor Board and the creation of an Office of the State Prosecutors under the Board and the elimination of a similar office under the Department of Administration (DOA) to delay the establishment of the Office of the State Prosecutors under the Prosecutor Board until February 1, 2018 (under Motion #289, the Office would be created on the effective date of the budget act). Similarly, delay the transfer of the assets and liabilities, tangible personal property, contracts, pending matters, and rules and orders primarily related to the State Prosecutors Office that currently exists under DOA to the Prosecutor Board until February 1, 2018. Further, delay the elimination of the State Prosecutors Office that is currently under DOA until February 1, 2018. Modify the funding and position reduction to DOA under Motion #289 (\$181,700 GPR and 1.0 GPR position annually) by \$106,000 GPR in 2017-18, such that the reduction totals \$75,700 GPR in 2017-18 and \$181,700 GPR in 2018-19, and 1.0 GPR position in 2018-19. Modify funding

provided to the Prosecutor Board (\$225,000 GPR annually) by -\$131,200 GPR in 2017-18, such that total funding provided for the Prosecutor Board totals \$93,800 GPR in 2017-18 and \$225,000 GPR in 2018-19. Specify that the required report to the Joint Committee on Finance by August 31, 2017, related to a plan to house the State Prosecutors Office in the space that, on the effective date of the bill, is occupied by the existing director of the State Prosecutors Office that currently exists in DOA, instead be due March 1, 2018.

12. *OIG Audits of MA Reimbursements for Family Planning Services Provided by Certain Providers.* Require the Department of Health Services (DHS), Office of the Inspector General (OIG) to conduct an audit of all family planning service reimbursements paid to covered entities under the medical assistance (MA) program for the period January 1, 2013, to December 31, 2016, and to conclude the audit no later than June 30, 2019. For this purpose, define "covered entities," by referring to definitions in federal rules for entities that participate in a federal drug discount program. The covered entities would be: (a) family planning projects that receive a grant or contract under Title 10 of the federal Public Health Service Act; and (b) entities receiving federal funds for the treatment of sexually transmitted diseases.

Specify that 20 percent of the total moneys received (the state's share of overpayment recoveries) from these audits would be budgeted in the 2019-21 biennium to supplement each of the following appropriations: (a) DHS fraud and error reduction activities; (b) public health general aids and local assistance; (c) community aids; (d) grants for community programs; and (e) services for sex-trafficking victims administered by the Department of Children and Family Services.

[Most family planning services are funded 90% from federal MA matching funds and 10% with state funds. Consequently, 90% of any overpayments DHS recovers as a result of the audit would be returned to the federal MA program, while 10% would be retained by the state to supplement funding for specified programs in the 2019-21 biennium.]

13. *Birth Defect Prevention and Surveillance System.* Modify provisions relating to the state's birth defect prevention and surveillance system as follows.

Release of Children's Names. Authorize DHS to require the hospital, pediatric specialty clinic, or physician that diagnoses or treats an infant or child with a birth defect requiring a report to release the name of the infant or child to DHS unless the parent or guardian of the infant or child states in writing that he or she refuses to release the name or address of the infant or child. Require persons who are required to report to notify a parent of the infant or child who is diagnosed with a birth defect of the option to refuse to release the name and address of the infant or child to the registry.

Under current law, DHS may not require the hospital, pediatric specialty clinic, or physician to report the infant or child's name if the parent or guardian refuses to consent in writing to the release of the name or address of the infant or child. Therefore, the current provision requires affirmative consent by the parents before a child's name is released.

List of Reportable Birth Defects. Require the DHS Secretary, after reviewing

recommendations of the Council on Birth Defect Prevention and Surveillance, to keep a list of specific birth defects that the Council unanimously decides must be reported to DHS, and authorize DHS to require hospitals, pediatric specialty clinics and physicians to report these birth defects, in addition to any birth defects specified by rule. Provide that DHS may specify by rule any other birth defects that the Council does not unanimously decide should be reported.

Under current law, DHS is required to specify by rule all birth defects which require a report, and the Council is charged with making recommendations to DHS, including which birth defects DHS should reported under its rules.

Confidentiality. Authorize the release of information identifying the subject of the report to the State Registrar, vital records system, and other data systems maintained by DHS, or another state or federal agency for the purpose of: determining whether multiple reports are made for the same infant or child; matching reported information with vital records and other registries; and making referrals to intervention and treatment.

Deleting Names from Files More than 10 Years Old. Repeal a current requirement that DHS, not more than 10 years from the date of receipt of a report of a birth defect, delete from any DHS file the name of the infant or child that is contained in the report.

Modifications to Current Rules. Modify current rules relating to the program (DHS 116) to reflect these statutory changes.

14. Medical Assistance Coverage of Complex Rehabilitation Technology. Incorporate the provisions of 2017 Assembly Bill 462 and an identical bill, 2017 Senate Bill 381, into the budget bill, as described below.

Establish Complex Rehabilitation Technology as an MA Benefit. Specify that durable medical equipment that is considered complex rehabilitation technology (defined below) is a covered service under the medical assistance (MA) program.

Definitions. Establish the definitions for terms used in these provisions, as follows:

(a) "Complex needs patient" means an individual with a diagnosis or medical condition that results in significant physical impairment or functional limitation;

(b) "Complex rehabilitation technology" means items classified within Medicare as durable medical equipment that are individually configured for individuals to meet their specific and unique medical, physical, and functional needs and capacities for basic activities of daily living and instrumental activities of daily living identified as medically necessary;

(c) "Individually configured" means having a combination of sizes, features, adjustments, or modifications that a qualified complex rehabilitation technology supplier can customize to the specific individual by measuring, fitting, programming, adjusting, or adapting as appropriate so that the device operates in accordance with an assessment or evaluation of the individual by a qualified health care professional and is consistent with the individual's medical condition, physical and functional needs and capacities, body size, period of need, and intended use;

(d) "Medicare" means coverage under Part A or Part B of Title XVIII of the federal social security act, 42 USC 1395 et seq;

(e) "Qualified complex rehabilitation technology professional" means an individual who is certified as an assistive technology professional by the Rehabilitation Engineering and Assistive Technology Society of North America;

(f) "Qualified complex rehabilitation technology supplier" means a company or entity that meets all of the following criteria: (1) is accredited by a recognized accrediting organization as a supplier of complex rehabilitation technology; (2) is an enrolled supplier for purposes of Medicare reimbursement that meets the supplier and quality standards established for durable medical equipment suppliers, including those for complex rehabilitation technology under Medicare; (3) is an employer of at least one qualified complex rehabilitation technology professional to analyze the needs and capacities of the complex needs patient in consultation with qualified health care professionals, to participate in the selection of appropriate complex rehabilitation technology for those needs and capacities of the complex needs patient, and to provide training in the proper use of the complex rehabilitation technology; (4) requires a qualified complex rehabilitation technology professional to be physically present for the evaluation and determination of appropriate complex rehabilitation technology for a complex needs patient; (5) has the capability to provide service and repair by qualified technicians for all complex rehabilitation technology it sells; and (6) provides written information at the time of delivery of the complex rehabilitation technology to the complex needs patient stating how the complex needs patient may receive service and repair for the complex rehabilitation technology; and

(g) "Qualified health care professional" means any of the following: (1) a licensed physician or physician assistant; (2) a licensed physical therapist; or (3) a licensed occupational therapist.

Rules. Require the DHS to promulgate rules and other policies for use of complex rehabilitation technology by recipients of medical assistance. Specify that the rules shall include all of the following:

(a) Designation of billing codes as complex rehabilitation technology including creation of new billing codes or modification of existing billing codes and provisions allowing for quarterly updates to the designations;

(b) Establishment of specific supplier standards for companies or entities that provide complex rehabilitation technology and limiting reimbursement only to suppliers that are qualified complex rehabilitation technology suppliers;

(c) A requirement that MA recipients who need a manual wheelchair, power wheelchair, or other seating component to be evaluated by all of the following: (1) a qualified health care professional who does not have a financial relationship with a qualified complex rehabilitation technology supplier; and (2) a qualified complex rehabilitation technology professional;

(d) Establishment and maintenance of payment rates for complex rehabilitation technology that are adequate to ensure complex needs patients have access to complex rehabilitation technology, taking into account the significant resources, infrastructure, and staff needed to

appropriately provide complex rehabilitation technology to meet the unique needs of complex needs patients;

(e) A requirement for contracts with DHS that managed care plans providing services to MA recipients comply with statutory requirements related to the provision of complex rehabilitation technology and with the related administrative rules; and

(f) Protection of access to complex rehabilitation technology for complex needs patients.

Require DHS to submit in proposed form the administrative rules to the Legislative Council staff no later than the first day of the seventh month beginning after the effective date of the budget bill.

Specify that the proposed rules must designate certain healthcare common procedure system codes, which are used under the federal Medicare program and certain mixed complex rehabilitation technology product and standard mobility and accessory product codes. Require the Department to specify, in the proposed rules, that procurement of these codes shall be exempt from any bidding or selective contracting requirements.

Under current law, the state's MA program provides coverage for some types of complex rehabilitation technology under the durable medical equipment benefit.

15. *Ambulatory Surgical Center Assessment and Access Payments under Medical Assistance.* Modify the Committee's previous action under Motion 256 by adopt the Governor's position with respect to the ambulatory surgical center (ASC) assessment and ASC access payments, which would eliminate both the assessment and the access payments.

The Committee's previous action would have retained the ASC assessment and access payments. Relative to the Committee's earlier action, this item would result in MA appropriation increases of \$2,616,300 GPR in 2017-18 and \$2,623,400 GPR in 2018-19 to replace the portion of ASC assessment revenue that is currently used to offset general GPR-funded MA benefit expenditures. In addition, this item would result in appropriation reductions, as follows: (a) \$5,000,000 SEG annually to reflect the loss of ASC assessment revenue used for ASC access payments and other MA benefits; and (b) \$3,640,400 FED in 2017-18 and \$3,647,500 FED in 2018-19 to reflect a reduction the federal matching funds used for making ASC access payments. Reduce estimates of segregated revenue to the MA trust fund by \$5.0 million annually.

16. *Fiscal Adjustments to Actions Previously Approved by the Committee.* Make the following fiscal changes to motions previously approved by the Committee to correctly reflect the fiscal effect of these items.

a. *FoodShare Employment and Training Program -- Cost to Continue [Paper #345].* Modify funding in Item 31 in Motion 256 by increasing funding in the motion by \$3,743,700 FED in 2017-18 and by \$5,706,300 (-\$25,000 GPR and \$5,731,300 FED) in 2018-19 to correct estimates of federal funding that will be available to support program costs and correct estimates of total program costs, based on an average monthly enrollment cost of \$283 per enrollee in the 2017-19 biennium.

b. *FSET Pilot for Able-Bodied Adults with Dependents [Paper #347]*. Modify funding in item 33 in Motion 256 by increasing funding in the motion by \$116,000 (\$58,000 GPR and \$58,000 FED) in 2017-18 and decreasing funding in the motion by \$169,200 (-\$84,600 GPR and -\$84,600 FED) in 2018-19 to correct estimates of funding for the pilot program.

c. *Disproportionate Share Hospital Payments*. Modify funding in item 16 in Motion 256 by reducing estimates of federal medical assistance (MA) matching funds that would partially support disproportionate share hospitals by \$355,500 FED in 2017-18 and by \$359,200 FED in 2018-19. With this correction, funding for these payments would be increased by \$30,273,700 (\$12,500,000 GPR and \$17,773,700 FED) in 2017-18 and \$30,458,100 (\$12,500,000 GPR and \$17,958,100 FED).

17. *Nonresident Insurance Appointment Fee*. Reduce the annual fee for nonresident insurance appointments by \$10, from \$40 to \$30, effective January 1, 2019. Reduce estimated PR revenue by \$4,100,000 in 2018-19 and GPR-earned revenue by \$4,100,000 in 2018-19.

18. *SSI Caretaker Supplement*. Allocate an additional \$900,000 annually in federal temporary assistance for needy families (TANF) block grant funds to support the Department of Health Services' administration of caretaker supplement payments DHS makes to supplemental security income (SSI) recipients with dependent children. The total amount of TANF funds transferred to DHS for the SSI caretaker supplement would be \$26,938,000 annually.

19. *UW System Faculty and Academic Staff Teaching Workload Policies and Reporting Requirements*. Restore the Governor's recommendation relating to faculty and academic staff teaching workload policies and reporting that was removed from the bill as a non-fiscal policy item under prior Committee action.

(Under the Governor's recommendation, the Board of Regents would be required to develop and implement a plan that includes the following for each institution within the UW System: (a) policies for monitoring teaching workloads of faculty and instructional academic staff; and (b) policies for rewarding faculty and instructional academic staff who teach more than a standard academic workload. The Board and the UW-Madison Chancellor could revise their personnel systems and employment relations policies and practices to ensure that those systems, policies, and practices are consistent with the plan described above without approval by the Joint Committee on Employment Relations.

Additionally, the Board and the UW-Madison Chancellor would be required to include aggregate data on teaching hours reported to UW System Administration under the plan described above in the annual accountability reports that they are required to submit to the Governor and Legislature under current law, and publish the aggregate data on teaching hours included in the annual accountability reports on the accountability dashboard published on the UW System's Internet site.)

20. *Qualifications of UW System President, Chancellor, or Vice Chancellor Candidates*. Prohibit UW institutions from adopting any policy or promulgating any rule that requires the Board to consider only individuals who are faculty members or who have been granted tenure at UW

institutions or other institutions of higher education or who hold terminal degrees for appointment as the UW System President or the chancellor or vice chancellor of a UW institution. Under prior Committee action, the above prohibition would apply to the Board of Regents.

21. *UW-Oshkosh Foundation.* Prohibit the Board of Regents from transferring funds to the UW-Oshkosh Foundation unless the transfer is first approved by legislative enactment. Under the previous action of the Committee, the Joint Finance Committee could approve such a transfer under s.13.10.

22. *Whole Grade Sharing.* Specify that a school board may not enter into, extend, or renew a whole grade sharing agreement after February 15 of the school year preceding the school year in which the agreement, extension, or renewal takes effect, rather than January 10 as under current law.

Additionally, require the school board to adopt a resolution stating its intention to enter into, extend, or renew a whole grade sharing agreement at least 60 days before doing so, rather than 150 days as under current law.

As under current law, the school district clerk would be required to publish notice of the adoption of the resolution within 10 days of the school board's adoption of the resolution. A petition signed by at least 20 percent of the electors residing in the school district may be filed with the school board requesting a feasibility study of the agreement within 30 days after publication or posting. If a feasibility study is required, the school board must contract with an organization approved by DPI to conduct the feasibility study, and may not enter into, extend, or renew the whole grade sharing agreement until it receives the results of the study. Additionally, maintain the current law requirement that the school board hold a public hearing in the school district at which the proposed agreement is described and at which any school district elector may comment on the proposed agreement at least 30 days before entering into, extending, or renewing a whole grade sharing agreement.

23. *Charter School Authorizer Duties.* Specify that a charter school authorizer must consider (rather than adhere to, under current law) the principles and standards for quality charter schools established by the National Association of Charter School Authorizers when contracting for the establishment of a charter school.

24. *Independent Charter School Program -- Summer School Funding.* Modify prior Joint Finance action to specify that each independent charter school submit its summer daily attendance report to DPI by September 15 (rather than by October 1) and to require DPI to include summer school payments with the December (rather than November) payment installment.

25. *Open Enrollment Aid Transfer Amount -- Special Education.* Create a process under which the open enrollment aid transfer amount for certain special education pupils who participate in the open enrollment program could be adjusted.

For these pupils, specify that, in the first year of the pupil's participation in the program, the aid transfer amount would be equal to the amount under current law.

Beginning in the 2018-19 school year, at the end of a school year in which a special education pupil participates in open enrollment, specify that the nonresident district may submit to DPI a financial statement that shows the actual costs the nonresident district incurred to provide a free appropriate public education, as defined in statute, to the pupil during that year. Require DPI to provide the resident district with a copy of any financial statement it receives.

Beginning in the 2019-20 school year, specify that the open enrollment transfer amount for a pupil for whom the nonresident district does not submit a financial statement would equal the amount under current law. Specify that the transfer amount for a pupil for whom the nonresident district submits a financial statement would be the amount shown on the financial statement for that child for the previous school year, up to a maximum of \$30,000.

(Under current law, the resident district counts a pupil transferring to another district under open enrollment in its enrollment for revenue limits and general aid. A specified amount of state aid is transferred from the resident district to the nonresident district for each pupil. This aid is outside of the nonresident district's revenue limit. For a special education pupil that amount was \$12,000 in 2016-17, with that amount indexed annually by the revenue limit per pupil adjustment and any increase in statewide categorical aid per pupil.)

26. City of Janesville - Expenditure Restraint Payment. Increase funding for the expenditure restraint payment program by \$583,000 GPR in 2018-19, and each year thereafter through 2022-23 (five years), to make a payment to the City of Janesville (Rock County). Specify that the payment would be in addition to any formula amount received under the program and would not be included in the total funding amount distributed to all municipalities under the formula.

Note:

The following table shows the estimated fiscal effects of the motion in the 2017-19 biennium, compared to the Governor's budget bill. Items not shown in the table would have no fiscal effect in 2017-19 or a minimal fiscal effect relative to the bill.

| | <u>Change to Bill</u> | | | |
|--|-----------------------|----------------|-----------------|------------|
| | <u>2017-18</u> | <u>2018-19</u> | <u>Biennium</u> | |
| Compensation Reserves | \$0 | \$25,700,000 | \$25,700,000 | GPR-Comp |
| Program Revenue Appropriations | -1,330,000 | -1,330,000 | -2,660,000 | GPR |
| Program Revenue Appropriations | 1,330,000 | 1,330,000 | 2,660,000 | PR |
| Program Revenue Appropriations | -2,660,000 | 0 | -2,660,000 | GPR-Lapse |
| Mobile Field Force Grants | 500,000 | 0 | 500,000 | GPR |
| State Prosecutor Board -- Delay Effective Date | 106,000 | 0 | 106,000 | GPR |
| State Prosecutor Board -- Delay Effective Date | -131,200 | 0 | -131,200 | GPR |
| Ambulatory Surgical Center Assessment | 2,616,300 | 2,623,400 | 5,239,700 | GPR |
| Ambulatory Surgical Center Assessment | -3,640,400 | -3,647,500 | -7,287,900 | FED |
| Ambulatory Surgical Center Assessment | -5,000,000 | -5,000,000 | -10,000,000 | SEG |
| Ambulatory Surgical Center Assessment | -5,000,000 | -5,000,000 | -10,000,000 | SEG-REV |
| Fiscal Adjustments to Previous DHS Actions | 58,000 | -109,600 | -51,600 | GPR |
| Fiscal Adjustments to Previous DHS Actions | 3,446,200 | 5,287,500 | 8,733,700 | FED |
| Nonresident Insurance Appointment Fee | 0 | -4,100,000 | -4,100,000 | PR-REV |
| Nonresident Insurance Appointment Fee | 0 | -4,100,000 | -4,100,000 | GPR-Earned |
| SSI Caretaker Supplement | 900,000 | 900,000 | 1,800,000 | FED |
| City of Janesville - Expenditure Restraint Payment | 0 | 583,000 | 583,000 | GPR |
| TOTALS | \$1,819,100 | \$1,766,800 | \$3,585,900 | GPR |
| | 705,800 | 2,540,000 | 3,245,800 | FED |
| | 1,330,000 | 1,330,000 | 2,660,000 | PR |
| | -5,000,000 | -5,000,000 | -10,000,000 | SEG |
| | 0 | 25,700,000 | 25,700,000 | GPR-Comp |
| | -5,000,000 | -5,000,000 | -10,000,000 | SEG-REV |
| | 0 | -4,100,000 | -4,100,000 | PR-REV |
| | 0 | -4,100,000 | -4,100,000 | GPR-Earned |
| | -2,660,000 | 0 | -2,660,000 | GPR-Lapse |