

# State of Wisconsin



2019 Assembly Bill 1038

Date of enactment: April 15, 2020  
Date of publication\*: April 16, 2020

## 2019 WISCONSIN ACT 185

AN ACT *to renumber* 60.11 (2) (b) and 108.07 (5); *to renumber and amend* 49.688 (1) (c), 70.47 (3) (aL), 108.04 (3), 108.062 (4) and 108.062 (19); *to amend* 13.101 (4), 20.866 (2) (xm), 40.22 (1), 40.22 (2m) (intro.), 40.22 (2r) (intro.), 40.22 (3) (intro.), 40.26 (1m) (a), 40.26 (1m) (b), 40.26 (5) (intro.), 40.51 (8), 40.51 (8m), 66.0137 (4), 70.511 (2) (a), 71.01 (6) (L) 3., 71.22 (4) (L) 3., 71.22 (4m) (L) 3., 71.26 (2) (b) 12. d., 71.34 (1g) (L) 3., 71.42 (2) (L) 3., 71.98 (3), 74.35 (5) (c), 74.37 (4) (b), 108.04 (13) (d) 3. b., 108.04 (13) (d) 4. b., 108.062 (1) (b), 108.062 (3), 108.062 (15), 108.14 (8n) (e), 108.141 (7) (a), 108.16 (6m) (a), 115.385 (1) (intro.), 115.415 (1) (b), 115.999 (1) (d) 1., 115.999 (2m) (b) 1. a., 118.38 (2) (am) (intro.), 118.38 (3), 118.60 (7) (an) 1., 119.23 (7) (an) 1., 119.33 (2) (b) 3. b., 119.33 (2) (b) 3. c., 119.33 (5) (b) 2., 119.9002 (2) (d) 2. a., 119.9002 (2) (d) 2. b., 119.9002 (2) (d) 3. a., 119.9002 (2) (d) 3. b., 119.9004 (3) (b) 2., 120.13 (2) (g), 146.40 (3), 185.983 (1) (intro.), 450.11 (5) (a), 609.83, 625.12 (2), 628.34 (3) (a) and 895.51 (title); and *to create* 13.101 (4d), 40.26 (5m), 40.26 (6), 49.688 (1) (c) 2., 49.688 (10m), 60.11 (2) (b) 2., 70.47 (3) (aL) 2., 100.307, 102.03 (6), 102.565 (6), 103.13 (2m), 108.04 (2) (d), 108.04 (3) (b), 108.062 (2m), 108.062 (3r), 108.062 (4) (a) 2., 108.062 (19) (a) and (b), 108.062 (20), 108.07 (5) (bm), 115.385 (6), 115.7915 (8m), 118.38 (4), 118.60 (12), 119.23 (12), 153.23, 323.19 (3), 323.19 (4), 323.265, 323.2911, 323.2912, 323.2913, 323.2915, 440.08 (5), 450.11 (5) (br), 609.205, 609.846, 609.885, 632.729, 632.895 (14g), 632.895 (16v), 895.4801, 895.51 (1) (bd), 895.51 (1) (bg), 895.51 (1) (dp), 895.51 (2r) and 895.51 (3r) of the statutes; **relating to:** state government response to the COVID-19 pandemic.

*The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:*

**SECTION 1.** 13.101 (4) of the statutes is amended to read:

13.101 (4) The committee may transfer between appropriations and programs if the committee finds that unnecessary duplication of functions can be eliminated, more efficient and effective methods for performing programs will result or legislative intent will be more effectively carried out because of such transfer, if legislative intent will not be changed as the result of such transfer and the purposes for which the transfer is requested have

been authorized or directed by the legislature. The authority to transfer between appropriations includes the authority to transfer between 2 fiscal years of the same biennium, between 2 appropriations of the same agency and between an appropriation of one agency and an appropriation of a different agency. No transfer between appropriations or programs may be made to offset deficiencies arising from the lack of adequate expenditure controls by a department, board, institution, commission or agency. The Except as provided in sub. (4d), the authority to transfer between appropriations shall not include the authority to transfer from sum sufficient

\* Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

appropriations as defined under s. 20.001 (3) (d) to other types of appropriations.

**SECTION 2.** 13.101 (4d) of the statutes is created to read:

13.101 (4d) During the public health emergency declared on March 12, 2020, by executive order 72, and for a period of 90 days after termination of the emergency, the committee may transfer under sub. (4) an amount not to exceed \$75,000,000 from sum sufficient appropriations, as defined under s. 20.001 (3) (d), to be used for expenditures related to the emergency.

**SECTION 3.** 20.866 (2) (xm) of the statutes is amended to read:

20.866 (2) (xm) *Building commission; refunding tax-supported and self-amortizing general obligation debt.* From the capital improvement fund, a sum sufficient used to finance tax-supported or self-amortizing facilities. In addition to the amount that may be contracted under par. (xe), the state may contract public debt in an amount not to exceed \$6,785,000,000 \$7,510,000,000 for this purpose. Such indebtedness shall be construed to include any premium and interest payable with respect thereto. Debt incurred by this paragraph shall be repaid under the appropriations providing for the retirement of public debt incurred for tax-supported and self-amortizing facilities in proportional amounts to the purposes for which the debt was refinanced. No moneys may be expended under this paragraph unless the true interest costs to the state can be reduced by the expenditure.

**SECTION 4.** 40.22 (1) of the statutes is amended to read:

40.22 (1) Except as otherwise provided in sub. (2) and s. 40.26 (6), each employee currently in the service of, and receiving earnings from, a state agency or other participating employer shall be included within the provisions of the Wisconsin retirement system as a participating employee of that state agency or participating employer.

**SECTION 5.** 40.22 (2m) (intro.) of the statutes is amended to read:

40.22 (2m) (intro.) ~~An~~ Except as otherwise provided in s. 40.26 (6), an employee who was a participating employee before July 1, 2011, who is not expected to work at least one-third of what is considered full-time employment by the department, as determined by rule, and who is not otherwise excluded under sub. (2) from becoming a participating employee shall become a participating employee if he or she is subsequently employed by the state agency or other participating employer for either of the following periods:

**SECTION 6.** 40.22 (2r) (intro.) of the statutes is amended to read:

40.22 (2r) (intro.) ~~An~~ Except as otherwise provided in s. 40.26 (6), an employee who was not a participating

employee before July 1, 2011, who is not expected to work at least two-thirds of what is considered full-time employment by the department, as determined by rule, and who is not otherwise excluded under sub. (2) from becoming a participating employee shall become a participating employee if he or she is subsequently employed by the state agency or other participating employer for either of the following periods:

**SECTION 7.** 40.22 (3) (intro.) of the statutes is amended to read:

40.22 (3) (intro.) ~~A~~ Except as otherwise provided in s. 40.26 (6), a person who qualifies as a participating employee shall be included within, and shall be subject to, the Wisconsin retirement system effective on one of the following dates:

**SECTION 8.** 40.26 (1m) (a) of the statutes is amended to read:

40.26 (1m) (a) If Except as otherwise provided in sub. (6), if a participant receiving a retirement annuity, or a disability annuitant who has attained his or her normal retirement date, is employed in a position in covered employment in which he or she is expected to work at least two-thirds of what is considered full-time employment by the department, as determined under s. 40.22 (2r), the participant's annuity shall be suspended and no annuity payment shall be payable until after the participant terminates covered employment.

**SECTION 9.** 40.26 (1m) (b) of the statutes is amended to read:

40.26 (1m) (b) If Except as otherwise provided in sub. (6), if a participant receiving a retirement annuity, or a disability annuitant who has attained his or her normal retirement date, enters into a contract to provide employee services with a participating employer and he or she is expected to work at least two-thirds of what is considered full-time employment by the department, as determined under s. 40.22 (2r), the participant's annuity shall be suspended and no annuity payment shall be payable until after the participant no longer provides employee services under the contract.

**SECTION 10.** 40.26 (5) (intro.) of the statutes is amended to read:

40.26 (5) (intro.) If Except as otherwise provided in sub. (5m), if a participant applies for an annuity or lump sum payment during the period in which less than 75 days have elapsed between the termination of employment with a participating employer and becoming a participating employee with any participating employer, all of the following shall apply:

**SECTION 11.** 40.26 (5m) of the statutes is created to read:

40.26 (5m) During the public health emergency declared on March 12, 2020, by executive order 72, sub. (5) does not apply if at least 15 days have elapsed between the termination of employment with a participating employer and becoming a participating employee if the

position for which the participant is hired is a critical position, as determined by the secretary of health services under s. 323.19 (3).

**SECTION 12.** 40.26 (6) of the statutes is created to read:

40.26 (6) A participant who is hired during the public health emergency declared on March 12, 2020, by executive order 72, may elect to not suspend his or her retirement annuity or disability annuity under sub. (1m) for the duration of the state of emergency if all of the following conditions are met:

(a) At the time the participant terminates his or her employment with a participating employer, the participant does not have an agreement with any participating employer to return to employment or enter into a contract to provide employee services for the employer.

(b) The position for which the participant has been hired is a critical position, as determined under s. 323.19 (3).

**SECTION 13.** 40.51 (8) of the statutes is amended to read:

40.51 (8) Every health care coverage plan offered by the state under sub. (6) shall comply with ss. 631.89, 631.90, 631.93 (2), 631.95, 632.72 (2), ~~632.729~~, 632.746 (1) to (8) and (10), 632.747, 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855, 632.867, 632.87 (3) to (6), 632.885, 632.89, 632.895 (5m) and (8) to (17), and 632.896.

**SECTION 14.** 40.51 (8m) of the statutes is amended to read:

40.51 (8m) Every health care coverage plan offered by the group insurance board under sub. (7) shall comply with ss. 631.95, ~~632.729~~, 632.746 (1) to (8) and (10), 632.747, 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855, 632.867, 632.885, 632.89, and 632.895 (11) to (17).

**SECTION 15.** 49.688 (1) (c) of the statutes is renumbered 49.688 (1) (c) (intro.) and amended to read:

49.688 (1) (c) (intro.) “Prescription drug” means any of the following:

1. A prescription drug, as defined in s. 450.01 (20), that is included in the drugs specified under s. 49.46 (2) (b) 6. h. and that is manufactured by a drug manufacturer that enters into a rebate agreement in force under sub. (6).

**SECTION 16.** 49.688 (1) (c) 2. of the statutes is created to read:

49.688 (1) (c) 2. A vaccination recommended for administration to adults by the federal centers for disease control and prevention’s advisory committee on immunization practices and approved for administration to adults by the department.

**SECTION 17.** 49.688 (10m) of the statutes is created to read:

49.688 (10m) (a) Notwithstanding subs. (6) and (7) (a), from the appropriation accounts under s. 20.435 (4) (bv), (j), and (pg), except as provided under sub. (7) (b),

the department shall, under a schedule that is identical to that used by the department for payment of claims under the Medical Assistance program, provide to health care providers who administer vaccinations, including pharmacies and pharmacists, payments for vaccinations, as described under sub. (1) (c) 2., that are administered by health care providers to persons eligible under sub. (2) who have paid the deductible specified under sub. (3) (b) 1. or 2., or who, under sub. (3) (b) 1., are not required to pay a deductible. The reimbursement to a health care provider for each vaccination under this subsection shall be at the rate of payment made for the identical vaccination under s. 49.46 (2) (b), plus a dispensing fee that is equal to the dispensing fee permitted to be charged for vaccinations for which coverage is provided under s. 49.46 (2) (b). The department shall devise and distribute a claim form for use by health care providers under this subsection and may limit payment under this subsection to those vaccinations for which payment claims are submitted by health care providers directly to the department. The department may apply to the program under this subsection the same utilization and cost control procedures that apply under rules promulgated by the department to medical assistance under subch. IV of ch. 49.

(b) The department may provide payment for a vaccination under this subsection only after deducting the amount of any payment for the vaccination available from other sources.

**SECTION 18.** 60.11 (2) (b) of the statutes is renumbered 60.11 (2) (b) 1.

**SECTION 19.** 60.11 (2) (b) 2. of the statutes is created to read:

60.11 (2) (b) 2. The town board or, if the town board is unable to promptly meet, the town chair may postpone the annual town meeting to a date that is not during the period beginning on the first day of the public health emergency declared on March 12, 2020, by executive order 72, and ending 60 days after the termination of that order.

**SECTION 20.** 66.0137 (4) of the statutes is amended to read:

66.0137 (4) SELF-INSURED HEALTH PLANS. If a city, including a 1st class city, or a village provides health care benefits under its home rule power, or if a town provides health care benefits, to its officers and employees on a self-insured basis, the self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2), ~~632.729~~, 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.798, 632.85, 632.853, 632.855, 632.867, 632.87 (4) to (6), 632.885, 632.89, 632.895 (9) to (17), 632.896, and 767.513 (4).

**SECTION 21.** 70.47 (3) (aL) of the statutes is renumbered 70.47 (3) (aL) 1. and amended to read:

70.47 (3) (aL) 1. ~~If~~ Except as provided in subd. 2., if the assessment roll is not completed at the time of the first meeting, the board shall adjourn for the time necessary to

complete the roll, and shall post a written notice on the outer door of the place of meeting stating the time to which the meeting is adjourned.

**SECTION 22.** 70.47 (3) (aL) 2. of the statutes is created to read:

70.47 (3) (aL) 2. Regardless of whether the 2020 assessment roll is completed at the time of the 45-day period beginning on the 4th Monday of April, the board may publish a class 1 notice under ch. 985 that the board has adjourned and will proceed under sub. (2).

**SECTION 22d.** 70.511 (2) (a) of the statutes is amended to read:

70.511 (2) (a) If the reviewing authority has not made a determination prior to the time of the tax levy with respect to a particular objection to the amount, valuation or taxability of property, the tax levy on the property or person shall be based on the contested assessed value of the property. A tax bill shall be sent to, and paid by, the person subject to the tax levy as though there had been no objection filed, except that the payment shall be considered to be made under protest. The entire tax bill shall be paid when due under s. 74.11, 74.12 or 74.87 even though the reviewing authority has reduced the assessment prior to the time for full payment of the tax billed. The requirement to pay a tax timely under this paragraph does not apply to taxes due and payable in 2020 if paid by October 1, 2020, or by any installment date for which taxes are due after October 1, 2020.

**SECTION 23.** 71.01 (6) (L) 3. of the statutes is amended to read:

71.01 (6) (L) 3. For purposes of this paragraph, "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 24.** 71.22 (4) (L) 3. of the statutes is amended to read:

71.22 (4) (L) 3. For purposes of this paragraph, "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 25.** 71.22 (4m) (L) 3. of the statutes is amended to read:

71.22 (4m) (L) 3. For purposes of this paragraph, "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 26.** 71.26 (2) (b) 12. d. of the statutes is amended to read:

71.26 (2) (b) 12. d. For purposes of subd. 12. a., "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 27.** 71.34 (1g) (L) 3. of the statutes is amended to read:

71.34 (1g) (L) 3. For purposes of this paragraph, "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 28.** 71.42 (2) (L) 3. of the statutes is amended to read:

71.42 (2) (L) 3. For purposes of this paragraph, "Internal Revenue Code" does not include amendments to the federal Internal Revenue Code enacted after December 31, 2017, except that "Internal Revenue Code" includes sections 1106, 2202, 2203, 2204, 2205, 2206, 2307, 3608, 3609, 3701, and 3702 of division A of P.L. 116-136.

**SECTION 29.** 71.98 (3) of the statutes is amended to read:

71.98 (3) DEPRECIATION, DEPLETION, AND AMORTIZATION. For taxable years beginning after December 31, 2013, and for purposes of computing depreciation and amortization, the Internal Revenue Code means the federal Internal Revenue Code in effect for federal purposes on January 1, 2014, except that sections 13201 (f), 13203, 13204, and 13205 of P.L. 115-97 and section 2307 of division A of P.L. 116-136 apply at the same time as for federal purposes. For taxable years beginning after December 31, 2013, and for purposes of computing depletion, the Internal Revenue Code means the federal Internal Revenue Code in effect for federal purposes for the year in which the property is placed in service.

**SECTION 30.** 74.35 (5) (c) of the statutes is amended to read:

74.35 (5) (c) No claim may be filed or maintained under this section unless the tax for which the claim is filed, or any authorized installment payment of the tax, is timely paid under s. 74.11, 74.12 or 74.87. This paragraph does not apply to taxes due and payable in 2020 if paid by October 1, 2020, or by any installment date for which taxes are due after October 1, 2020.

**SECTION 31.** 74.37 (4) (b) of the statutes is amended to read:

74.37 (4) (b) No claim or action for an excessive assessment may be brought or maintained under this sec-

tion unless the tax for which the claim is filed, or any authorized installment of the tax, is timely paid under s. 74.11 or 74.12. This paragraph does not apply to taxes due and payable in 2020 if paid by October 1, 2020, or by any installment date for which taxes are due after October 1, 2020.

**SECTION 32.** 100.307 of the statutes is created to read:

**100.307 Returns during emergency; prohibition.**

(1) DEFINITIONS. In this section:

(a) "Food product" has the meaning given in s. 93.01 (6).

(b) "Personal care product" has the meaning given in s. 299.50 (1) (b).

(2) CERTAIN RETURNS PROHIBITED DURING EMERGENCY. Except as provided in sub. (3), no person who sells food products, personal care products, cleaning products, or paper products at retail may accept a return of a food product, personal care product, cleaning product, or paper product during the public health emergency declared on March 12, 2020, by executive order 72, or during the 30 days immediately after the public health emergency ends.

(3) EXCEPTIONS. A person who sells food products, personal care products, cleaning products, or paper products at retail may accept a return of a food product, personal care product, cleaning product, or paper product if any of the following applies:

(a) The product is returned no more than 7 days after purchase.

(b) The product is adulterated within the meaning of s. 97.02 or defective as a result of a production error or defect.

(4) OTHER RETURNS ALLOWED. A retailer may accept a return of a product that is not prohibited by sub. (2).

**SECTION 33.** 102.03 (6) of the statutes is created to read:

102.03 (6) (a) In this subsection, "first responder" means an employee of or volunteer for an employer that provides fire fighting, law enforcement, or medical treatment of COVID-19, and who has regular, direct contact with, or is regularly in close proximity to, patients or other members of the public requiring emergency services, within the scope of the individual's work for the employer.

(b) For the purposes of benefits under this chapter, where an injury to a first responder is found to be caused by COVID-19 during the public health emergency declared by the governor under s. 323.10 on March 12, 2020, by executive order 72, and ending 30 days after the termination of the order, and where the employee has been exposed to persons with confirmed cases of COVID-19 in the course of employment, the injury is presumed to be caused by the individual's employment.

(c) An injury claimed under par. (b) must be accompanied by a specific diagnosis by a physician or by a positive COVID-19 test.

(d) An injury claimed under par. (b) may be rebutted by specific evidence that the injury was caused by exposure to COVID-19 outside of the first responder's work for the employer.

**SECTION 34.** 102.565 (6) of the statutes is created to read:

102.565 (6) This section does not apply to an employee whose claim of injury is presumed to be caused by employment under s. 102.03 (6).

**SECTION 35.** 103.13 (2m) of the statutes is created to read:

103.13 (2m) EMPLOYEE RECORDS DURING AN EMERGENCY. Notwithstanding sub. (2), during the public health emergency declared on March 12, 2020, by executive order 72, an employer is not required to provide an employee's personnel records within 7 working days after an employee makes a request to inspect his or her personnel records, and an employer is not required to provide the inspection at a location reasonably near the employee's place of employment during normal working hours.

**SECTION 36.** 108.04 (2) (d) of the statutes is created to read:

108.04 (2) (d) If required under s. 108.07 (5) (bm), each claimant shall and each employer shall under s. 108.09 (1) or when otherwise requested by the department, indicate whether a claim for regular benefits is related to the public health emergency declared on March 12, 2020, by executive order 72. The department may specify the information required to be provided under this paragraph.

**SECTION 37.** 108.04 (3) of the statutes is renumbered 108.04 (3) (a) and amended to read:

108.04 (3) (a) ~~The Subject to par. (b).~~ the first week of a claimant's benefit year for which the claimant has timely applied and is otherwise eligible for regular benefits under this chapter is the claimant's waiting period for that benefit year.

**SECTION 38.** 108.04 (3) (b) of the statutes is created to read:

108.04 (3) (b) Paragraph (a) does not apply with respect to benefit years that begin after March 12, 2020, and before February 7, 2021. The department shall seek the maximum amount of federal reimbursement for benefits that are, during the time period specified in this paragraph, payable for the first week of a claimant's benefit year as a result of the application of this paragraph.

**SECTION 39.** 108.04 (13) (d) 3. b. of the statutes is amended to read:

108.04 (13) (d) 3. b. If recovery of an overpayment is not permitted under s. 108.22 (8) (c), restore the proper amount to the employer's account and charge that amount to the fund's balancing account unless s. 108.07 (5) ~~(e)~~ (am) 3. applies.

**SECTION 40.** 108.04 (13) (d) 4. b. of the statutes is amended to read:

108.04 (13) (d) 4. b. If recovery of an overpayment is not permitted under s. 108.22 (8) (c), restore the proper amount to the employer's account and charge that amount in accordance with s. 108.07 (5) (am).

**SECTION 41.** 108.062 (1) (b) of the statutes is amended to read:

108.062 (1) (b) "Work-share program" means a program approved by the department under which the hours of work of employees ~~in a work unit~~ are reduced in lieu of the layoffs of 2 or more employees ~~in the work unit~~.

**SECTION 42.** 108.062 (2m) of the statutes is created to read:

108.062 (2m) APPLICATIONS; DEPARTMENT ASSISTANCE. The department shall allow employers to submit applications under this section using an online form. The department shall provide assistance to employers with submitting applications and developing work-share plans.

**SECTION 43.** 108.062 (3) of the statutes is amended to read:

108.062 (3) APPROVAL OF PLANS. The department shall approve a plan if the plan includes all of the elements specified in sub. (2) or (20), whichever is applicable. The approval is effective for the effective period of the plan unless modified under sub. (3m).

**SECTION 43m.** 108.062 (3r) of the statutes is created to read:

108.062 (3r) APPLICABILITY OF LAWS. A work-share program shall be governed by the law that was in effect when the plan or modification was last approved under sub. (3) or (3m), until the program ends as provided in sub. (4), but an employer with a work-share program governed by sub. (2) may, while sub. (20) is in effect, apply for a modification under sub. (3m), and that modification application shall be governed by sub. (20).

**SECTION 44.** 108.062 (4) of the statutes is renumbered 108.062 (4) (a) 1. and amended to read:

108.062 (4) (a) 1. ~~A~~ Except as provided in subd. 2., a work-share program becomes effective on the later of the Sunday of the 2nd week beginning after approval of a work-share plan under sub. (3) or any Sunday after that day specified in the plan.

(b) A work-share program ends on the earlier of the last Sunday that precedes the end of the 6-month period beginning on the effective date of the program or any Sunday before that day specified in the plan unless the program terminates on an earlier date under sub. (5), (14), or (15).

**SECTION 45.** 108.062 (4) (a) 2. of the statutes is created to read:

108.062 (4) (a) 2. With respect to a work-share plan approved during a period described under sub. (20), the work-share program becomes effective on the later of the Sunday of or after approval of a work-share plan under sub. (3) or any Sunday after that day specified in the plan.

**SECTION 46.** 108.062 (15) of the statutes is amended to read:

108.062 (15) INVOLUNTARY TERMINATION. If in any week there are fewer than 20 employees who are included in a work-share program of any employer, the program terminates on the 2nd Sunday following the end of that week. This subsection does not apply to a work-share program to which sub. (20) applies.

**SECTION 47.** 108.062 (19) of the statutes is renumbered 108.062 (19) (intro.) and amended to read:

108.062 (19) SECRETARY MAY WAIVE COMPLIANCE. (intro.) The secretary may ~~waive compliance with any requirement under this section~~ do any of the following if the secretary determines that ~~waiver of the requirement~~ doing so is necessary to permit continued certification of this chapter for grants to this state under Title III of the federal Social Security Act, for maximum credit allowances to employers under the federal Unemployment Tax Act, or for this state to qualify for full federal financial participation in the cost of administration of this section and financing of benefits to employees participating in work-share programs under this section.;

**SECTION 47m.** 108.062 (19) (a) and (b) of the statutes are created to read:

108.062 (19) (a) Waive compliance with any requirement under this section.

(b) Waive the application of sub. (20), in whole or in part, to the extent necessary for any of the purposes specified in this subsection or, to the extent necessary for any of those purposes, require the continued application of any requirement under sub. (2).

**SECTION 48.** 108.062 (20) of the statutes is created to read:

108.062 (20) SUSPENSIONS OF CERTAIN PROVISIONS. Notwithstanding sub. (2), this subsection, and not sub. (2), applies to work-share plans submitted on or after the effective date of this subsection ... [LRB inserts date], and before December 31, 2020, subject to sub. (19). During that period, prior to implementing a work-share program, an employer shall submit a work-share plan for the approval of the department. In its submittal, the employer shall certify that its plan is in compliance with all requirements under this section. Each plan shall:

(a) Specify the affected positions, and the names of the employees filling those positions on the date of submittal. The plan need not be limited to a particular work unit.

(b) Provide for initial coverage under the plan of at least 2 positions that are filled on the effective date of the work-share program.

(c) Specify the period or periods when the plan will be in effect, which may not exceed a total of 6 months in any 5-year period within the same work unit.

(d) Exclude participation by employees who are employed on a seasonal, temporary, or intermittent basis.

(e) Apply only to employees who have been engaged in employment with the employer for a period of at least 3 months on the effective date of the work-share program and who are regularly employed by the employer in that employment.

(f) Specify the normal average hours per week worked by each employee in the work unit and the percentage reduction in the average hours of work per week worked by that employee, exclusive of overtime hours, which shall be applied in a uniform manner and which shall be at least 10 percent of the normal hours per week of that employee but not more than whichever of the following is greater:

1. Sixty percent of the normal hours per week of that employee.

2. The maximum percent reduction of the normal hours per week of that employee that is permissible under federal law.

(g) Describe the manner in which requirements for maximum federal financial participation in the plan will be implemented, including a plan for giving notice, where feasible, to participating employees of changes in work schedules.

(h) Provide an estimate of the number of layoffs that would occur without implementation of the plan.

(i) Specify the effect on any fringe benefits provided by the employer to the employees who are included in the work-share program other than fringe benefits required by law.

(j) Include a statement affirming that the plan is in compliance with all employer obligations under applicable federal and state laws.

(k) Indicate whether the plan includes employer-sponsored training to enhance job skills and acknowledge that the employees may participate in training funded under the federal Workforce Innovation and Opportunity Act, 29 USC 3101 to 3361, or another federal law that enhances job skills without affecting availability for work, subject to department approval.

**SECTION 49.** 108.07 (5) of the statutes is renumbered 108.07 (5) (am).

**SECTION 50.** 108.07 (5) (bm) of the statutes is created to read:

108.07 (5) (bm) 1. The department shall, when processing initial claims for regular benefits, determine whether a claim or plan is related to the public health emergency declared on March 12, 2020, by executive order 72. If a claim is so related, the regular benefits for that claim shall, except as provided in subd. 2., be paid as provided in subd. 3.

2. a. Subdivision 1. applies only with respect to benefits payable for weeks beginning after March 12, 2020, and beginning before December 31, 2020.

b. Subdivision 1. does not apply if the employer fails to timely and adequately provide any information required by the department under s. 108.04 (2) (d).

c. Subdivision 1. does not apply with respect to any benefits paid or reimbursed by the federal government, or any portion thereof, including the portion of any benefits reimbursed by the federal government for reimbursable employers, as defined in s. 108.155 (1) (b).

d. In the case of a claim for regular benefits that is a combined wage claim, as defined in s. 108.04 (13) (g) 1. a., subd. 1. applies only with respect to this state's share of benefits.

e. Subdivision 1. does not apply with respect to work-share benefits under s. 108.062 (6).

f. Subdivision 1. does not apply to benefits chargeable as provided in sub. (7).

3. Charges for benefits to which subd. 1. applies shall, notwithstanding any other provision of this chapter, be paid or reimbursed as follows:

a. For employers subject to the contribution requirements of ss. 108.17 and 108.18, the benefits shall be charged to the fund's balancing account.

b. For reimbursable employers, as defined in s. 108.155 (1) (b), the benefits shall be paid in the manner provided under par. (am) 1.

**SECTION 51.** 108.14 (8n) (e) of the statutes is amended to read:

108.14 (8n) (e) The department shall charge this state's share of any benefits paid under this subsection to the account of each employer by which the employee claiming benefits was employed in the applicable base period, in proportion to the total amount of wages he or she earned from each employer in the base period, except that if s. 108.04 (1) (f), (5), (7) (a), (c), (cg), (e), (L), (q), (s), or (t), (7m) or (8) (a) or (b), 108.07 (3), (3r), or (5) ~~(b)~~ (am) 2., or 108.133 (3) (f) would have applied to employment by such an employer who is subject to the contribution requirements of ss. 108.17 and 108.18, the department shall charge the share of benefits based on employment with that employer to the fund's balancing account, or, if s. 108.04 (1) (f) or (5) or 108.07 (3) would have applied to an employer that is not subject to the contribution requirements of ss. 108.17 and 108.18, the department shall charge the share of benefits based on that employment in accordance with s. 108.07 (5) ~~(a) and (b)~~ (am) 1. and 2. The department shall also charge the fund's balancing account with any other state's share of such benefits pending reimbursement by that state.

**SECTION 52.** 108.141 (7) (a) of the statutes is amended to read:

108.141 (7) (a) The department shall charge the state's share of each week of extended benefits to each employer's account in proportion to the employer's share of the total wages of the employee receiving the benefits in the employee's base period, except that if the employer is subject to the contribution requirements of ss. 108.17 and 108.18 the department shall charge the share of extended benefits to which s. 108.04 (1) (f), (5), (7) (a), (c), (cg), (e), (L), (q), (s), or (t), (7m) or (8) (a) or (b),

108.07 (3), (3r), or (5) ~~(b)~~ (am) 2., or 108.133 (3) (f) applies to the fund's balancing account.

**SECTION 53.** 108.16 (6m) (a) of the statutes is amended to read:

108.16 **(6m)** (a) The benefits thus chargeable under s. 108.04 (1) (f), (5), (5g), (7) (h), (8) (a) or (b), (13) (c) or (d) or (16) (e), 108.07 (3), (3r), (5) ~~(b)~~ (am) 2. and (bm) 3. a., (5m), ~~or and~~ (6), 108.133 (3) (f), 108.14 (8n) (e), 108.141, 108.151, or 108.152 or sub. (6) (e) or (7) (a) and (b).

**SECTION 54.** 115.385 (1) (intro.) of the statutes is amended to read:

115.385 **(1)** (intro.) Annually Except as provided in sub. (6), annually by November 30, the department shall publish a school and school district accountability report that includes all of the following components:

**SECTION 55.** 115.385 (6) of the statutes is created to read:

115.385 **(6)** The department shall not publish a school and school district accountability report under this section in the 2020–21 school year.

**SECTION 56.** 115.415 (1) (b) of the statutes is amended to read:

115.415 **(1)** (b) For the evaluation of teachers and principals in the ~~2014–15~~ 2019–20 school year, the school board and the operator of a charter school established under s. 118.40 (2r) may not consider pupil performance on statewide assessments administered under s. 118.30 in the ~~2014–15~~ 2019–20 school year and may not include pupil performance on those assessments in the evaluation score assigned to a teacher or principal under the educator effectiveness evaluation system developed under this section.

**SECTION 57.** 115.7915 (8m) of the statutes is created to read:

115.7915 **(8m)** PUBLIC HEALTH EXCEPTION. During the public health emergency declared on March 12, 2020, by executive order 72, if a private school participating in the program under this section is closed for at least 10 school days in a school year by a local health officer, as defined in s. 250.01 (5), or the department of health services, in the school year during which the school is closed and the following school year, the department may not withhold payment from the private school under sub. (8) (c) or bar the private school from participating in the program under sub. (8) (a) for failing to comply with a requirement under this section or a rule promulgated under this section if all of the following occur:

(a) The private school submits information to the department that explains how the school closure impacted the private school's ability to comply with the requirement and any action the private school took to mitigate the consequences of not complying with the requirement.

(b) The department determines that the private school's failure to comply with the requirement was caused by the closure.

**SECTION 58.** 115.999 (1) (d) 1. of the statutes is amended to read:

115.999 **(1)** (d) 1. The school district was assigned to the lowest performance category on the 2 most recent accountability reports published ~~for the district~~ under s. 115.385 (1) ~~in the 2 most recent school years.~~

**SECTION 59.** 115.999 (2m) (b) 1. a. of the statutes is amended to read:

115.999 **(2m)** (b) 1. a. The unified school district was assigned to the lowest performance category on the 3 most recent accountability reports published ~~for the district~~ under s. 115.385 (1) ~~in the 3 most recent school years.~~

**SECTION 60.** 118.38 (2) (am) (intro.) of the statutes is amended to read:

118.38 **(2)** (am) (intro.) In determining whether to grant ~~the a~~ waiver under sub. (1), the department shall consider all of the following factors and may consider additional factors:

**SECTION 61.** 118.38 (3) of the statutes is amended to read:

118.38 **(3)** A waiver granted under sub. (2) is effective for 4 years. The department shall renew the waiver for additional 4-year periods if the school board has evaluated the educational and financial effects of the waiver over the previous 4-year period, except that the department is not required to renew a waiver if the department determines that the school district is not making adequate progress toward improving pupil academic performance.

**SECTION 62.** 118.38 (4) of the statutes is created to read:

118.38 **(4)** (a) Beginning on the first day of the public health emergency declared on March 12, 2020, by executive order 72, and ending on October 31, 2020, the department may do all of the following:

1. Waive any requirement in chs. 115 to 121 or the administrative rules promulgated by the department under the authority of those chapters related to any of the following:

a. A program under s. 115.7915, 118.60, or 119.23.

b. A private school participating in a program under s. 115.7915, 118.60, or 119.23.

c. A charter school under s. 118.40 (2r) or (2x), including any requirement related to an authorizer, governing board, or operator of a charter school under s. 118.40 (2r) or (2x).

2. Establish an alternate deadline for any requirement related to a program under s. 115.7915, 118.60, or 119.23 in chs. 115 to 121 and any requirement related to a program under s. 115.7915, 118.60, or 119.23 in the administrative rules promulgated by the department under the



authority of chs. 115 to 121 if the original deadline is any of the following:

a. A deadline that occurs during the period beginning on the first day of the public health emergency declared on March 12, 2020, by executive order 72, and ending on October 31, 2020.

b. A deadline for a requirement that affects a date during the period beginning on the first day of the public health emergency declared on March 12, 2020, by executive order 72, and ending on October 31, 2020.

(b) 1. The department shall notify the legislative reference bureau of each waiver under par. (a) 1. and alternate deadline established under par. (a) 2. The legislative reference bureau shall publish a notice in the Wisconsin Administrative Register of the waiver or alternate deadline.

2. The department shall post each waiver under par. (a) 1. and alternate deadline established under par. (a) 2. on the department's Internet site.

(c) A waiver under par. (a) 1. applies only to the 2019-20 school year.

**SECTION 63.** 118.60 (7) (an) 1. of the statutes is amended to read:

118.60 (7) (an) 1. A private school participating in the program under this section shall maintain a cash and investment balance that is at least equal to its reserve balance. If a private school does not maintain a cash and investment balance that is at least equal to its reserve balance, the private school shall refund the reserve balance to the department. This subdivision does not apply to a school year that occurs during the public health emergency declared on March 12, 2020, by executive order 72.

3. If a private school ceases to participate in or is barred from the program under this section and s. 119.23 and the private school's reserve balance is positive, the private school shall refund the reserve balance to the department.

**SECTION 64.** 118.60 (12) of the statutes is created to read:

118.60 (12) During the public health emergency declared on March 12, 2020, by executive order 72, if a private school participating in the program under this section is closed for at least 10 school days in a school year by a local health officer, as defined in s. 250.01 (5), or the department of health services, in the school year during which the school is closed and the following school year, the department may not withhold payment from the private school under sub. (10) (d) or bar the private school from participating in the program under sub. (10) (a), (am), or (ar) for failing to comply with a requirement under this section or a rule promulgated under this section if all of the following occur:

(a) The private school submits information to the department that explains how the school closure impacted the private school's ability to comply with the

requirement and any action the private school took to mitigate the consequences of not complying with the requirement.

(b) The department determines that the private school's failure to comply with the requirement was caused by the closure.

**SECTION 65.** 119.23 (7) (an) 1. of the statutes is amended to read:

119.23 (7) (an) 1. A private school participating in the program under this section shall maintain a cash and investment balance that is at least equal to its reserve balance. If a private school does not maintain a cash and investment balance that is at least equal to its reserve balance, the private school shall refund the reserve balance to the department. This subdivision does not apply to a school year that occurs during the public health emergency declared on March 12, 2020, by executive order 72.

3. If a private school ceases to participate in or is barred from the program under this section and s. 118.60 and the private school's reserve balance is positive, the private school shall refund the reserve balance to the department.

**SECTION 66.** 119.23 (12) of the statutes is created to read:

119.23 (12) During the public health emergency declared on March 12, 2020, by executive order 72, if a private school participating in the program under this section is closed for at least 10 school days in a school year by a local health officer, as defined in s. 250.01 (5), or the department of health services, in the school year during which the school is closed and the following school year, the department may not withhold payment from the private school under sub. (10) (d) or bar the private school from participating in the program under sub. (10) (a), (am), or (ar) for failing to comply with a requirement under this section or a rule promulgated under this section if all of the following occur:

(a) The private school submits information to the department that explains how the school closure impacted the private school's ability to comply with the requirement and any action the private school took to mitigate the consequences of not complying with the requirement.

(b) The department determines that the private school's failure to comply with the requirement was caused by the closure.

**SECTION 67.** 119.33 (2) (b) 3. b. of the statutes is amended to read:

119.33 (2) (b) 3. b. A person who is operating a charter school. The superintendent of schools may proceed under this subd. 3. b. only if one of the following applies: the performance on the most recent examinations administered under s. 118.30 (1r) of pupils attending a school operated by the person exceeds the performance on the most recent examinations administered under s. 118.30

(1) of pupils attending the school being transferred to the person under this subdivision; or, ~~in each of the 3 preceding consecutive accountability reports published under s. 115.385 (1),~~ the performance category assigned to a school operated by the person ~~on accountability reports published under s. 115.385 (1) for the school in each of the 3 preceding consecutive school years~~ exceeds the performance category assigned to the school being transferred to the person under this subdivision ~~in each of the 3 preceding consecutive school years~~. If fewer than 3 accountability reports have been published for a charter school described in this subd. 3. b., the superintendent of schools shall determine an alternative method for comparing the school's performance.

**SECTION 68.** 119.33 (2) (b) 3. c. of the statutes is amended to read:

119.33 (2) (b) 3. c. The governing body of a nonsectarian private school participating in a program under s. 118.60 or 119.23. The superintendent of schools may proceed under this subd. 3. c. only if one of the following applies: the performance on the most recent examinations administered under s. 118.30 (1s) or (1t) of pupils attending a school operated by the governing body exceeds the performance on the most recent examinations administered under s. 118.30 (1) of pupils attending the school being transferred to the governing body under this subdivision; or, in each of the 3 preceding consecutive accountability reports published under s. 115.385 (1), the performance category assigned to a school operated by the governing body ~~on accountability reports published under s. 115.385 (1) for the school in each of the 3 preceding consecutive school years~~ exceeds the performance category assigned to the school being transferred to the governing body under this subdivision ~~in each of the 3 preceding consecutive school years~~. If fewer than 3 accountability reports have been published for a private school described in this subd. 3. c., the superintendent of schools shall determine an alternative method for comparing the school's performance.

**SECTION 69.** 119.33 (5) (b) 2. of the statutes is amended to read:

119.33 (5) (b) 2. The school district operating under this chapter has been assigned ~~in the 3 most recent school years~~ a performance category of "fails to meet expectations" on the 3 most recent ~~accountability report reports~~ published under s. 115.385 (1).

**SECTION 70.** 119.9002 (2) (d) 2. a. of the statutes is amended to read:

119.9002 (2) (d) 2. a. The performance, on the most recent examinations administered under s. 118.30 (1r), of pupils attending a school operated by the person exceeds the performance, on the most recent examinations administered under s. 118.30 (1), of pupils attending the school being transferred to the person under this subdivision.

**SECTION 71.** 119.9002 (2) (d) 2. b. of the statutes is amended to read:

119.9002 (2) (d) 2. b. ~~The~~ In each of the 3 preceding consecutive accountability reports published under s. 115.385 (1), the performance category assigned to a school operated by the person ~~on accountability reports published under s. 115.385 (1) for the school in each of the 3 preceding consecutive school years~~ exceeds the performance category assigned to the school being transferred to the person under this subdivision ~~in each of the 3 preceding consecutive school years~~. If fewer than 3 accountability reports have been published for a school described in this subd. 2. b., the commissioner shall determine an alternative method for comparing the school's performance.

**SECTION 72.** 119.9002 (2) (d) 3. a. of the statutes is amended to read:

119.9002 (2) (d) 3. a. The performance, on the most recent examinations administered under s. 118.30 (1s) or (1t), of pupils attending a school operated by the governing body exceeds the performance, on the most recent examinations administered under s. 118.30 (1), of pupils attending the school being transferred to the governing body under this subdivision.

**SECTION 73.** 119.9002 (2) (d) 3. b. of the statutes is amended to read:

119.9002 (2) (d) 3. b. ~~The~~ In each of the 3 preceding consecutive accountability reports published under s. 115.385 (1), the performance category assigned to a school operated by the governing body ~~on accountability reports published under s. 115.385 (1) for the school in each of the 3 preceding consecutive school years~~ exceeds the performance category assigned to the school being transferred to the governing body under this subdivision ~~in each of the 3 preceding consecutive school years~~. If fewer than 3 accountability reports have been published for a private school described in this subd. 3. b., the commissioner shall determine an alternative method for comparing the school's performance.

**SECTION 74.** 119.9004 (3) (b) 2. of the statutes is amended to read:

119.9004 (3) (b) 2. The school district operating under this chapter has been assigned ~~in the 3 most recent school years~~ a performance category of "fails to meet expectations" on the 3 most recent ~~accountability report reports~~ published under s. 115.385 (1).

**SECTION 75.** 120.13 (2) (g) of the statutes is amended to read:

120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2), ~~632.729~~, 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.798, 632.85, 632.853, 632.855, 632.867, 632.87 (4) to (6), 632.885, 632.89, 632.895 (9) to (17), 632.896, and 767.513 (4).

**SECTION 76.** 146.40 (3) of the statutes is amended to read:

146.40 (3) Except as provided in sub. (4d), the department shall approve instructional programs for nurse aides that apply for, and satisfy standards for, approval that are promulgated by rule by the department. The department may not require an instructional program to exceed the federally required minimum total training hours or minimum hours of supervised practical training under 42 CFR 483.152 (a). The department shall review the curriculum of each approved instructional program at least once every 24 months following the date of approval to determine whether the program continues to satisfy the standards for approval. Under this subsection, the department may, after providing notice, suspend or revoke the approval of an instructional program or impose a plan of correction on the program if the program fails to satisfy the standards for approval or operates under conditions that are other than those contained in the application approved by the department.

**SECTION 77.** 153.23 of the statutes is created to read:

**153.23 Public health emergency dashboard. (1)**

In this section, “public health emergency related to the 2019 novel coronavirus” means the period covered by any of the following:

(a) The national emergency declared by the U.S. president under 50 USC 1621 on March 13, 2020, in response to the 2019 novel coronavirus.

(b) The public health emergency declared under 42 USC 247d by the secretary of the federal department of health and human services on January 31, 2020, in response to the 2019 novel coronavirus.

(c) The state of emergency related to public health declared under s. 323.10 on March 12, 2020, by executive order 72.

(2) During the public health emergency related to the 2019 novel coronavirus, the entity under contract under s. 153.05 (2m) (a) shall prepare and publish a public health emergency dashboard using health care emergency preparedness program information collected by the state from acute care hospitals. A dashboard published under this section shall include information to assist emergency response planning activities. For purposes of this section, the entity and the department shall enter into a data use agreement and mutually agree to the health care emergency preparedness program information the department will provide to the entity, the information the entity will include in the dashboard, any publication schedule, and any other terms considered necessary by the entity or the department.

**SECTION 78.** 185.983 (1) (intro.) of the statutes is amended to read:

185.983 (1) (intro.) Every voluntary nonprofit health care plan operated by a cooperative association organized under s. 185.981 shall be exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31,

601.41, 601.42, 601.43, 601.44, 601.45, 611.26, 611.67, 619.04, 623.11, 623.12, 628.34 (10), 631.17, 631.89, 631.93, 631.95, 632.72 (2), 632.729, 632.745 to 632.749, 632.775, 632.79, 632.795, 632.798, 632.85, 632.853, 632.855, 632.867, 632.87 (2) to (6), 632.885, 632.89, 632.895 (5) and (8) to (17), 632.896, and 632.897 (10) and chs. 609, 620, 630, 635, 645, and 646, but the sponsoring association shall:

**SECTION 79.** 323.19 (3) of the statutes is created to read:

323.19 (3) Based on guidance provided by the secretary of health services, the head of each state agency and each local health department shall determine which public employee positions within the respective state agency or local government are critical during the public health emergency declared on March 12, 2020, by executive order 72, for the purposes of s. 40.26 (5m) and (6) (b).

**SECTION 80.** 323.19 (4) of the statutes is created to read:

323.19 (4) (a) In this subsection, “state entity” means any state agency, institution of higher education, association, society, or other body in state government created or authorized to be created by the constitution or any law that is entitled to expend moneys appropriated by law, including the legislature, the courts, and any authority.

(b) During the public health emergency declared on March 12, 2020, by executive order 72, the head or governing body of a state entity may waive a requirement imposed, administered, or enforced by the state entity that an individual appear in person if the head or governing body finds that the waiver assists in the state’s response to the public health emergency or that enforcing the requirement may increase the public health risk.

**SECTION 81.** 323.265 of the statutes is created to read:

**323.265 Suspension of certain deadlines and training requirements during a public health emergency. (1) DEFINITIONS.** In this section:

(a) “Agency” means any office, department, agency, institution of higher education, association, society, or other body in state government created or authorized to be created by the constitution or any law, including any authority created in subch. II of ch. 114 or in ch. 231, 232, 233, 234, 237, 238, or 279, the legislature, or the courts.

(b) “Deadline” means any date certain by which, or any other limitation as to time within which, an action or event is required to occur.

(c) “Emergency period” means the period covered by the public health emergency declared on March 12, 2020, by executive order 72, plus 30 days.

(d) “Local governmental unit” means a political subdivision of this state, a special purpose district in this state, an agency or corporation of a political subdivision or special purpose district, or a combination or subunit of any of the foregoing.

(2) DEADLINES. (a) Each agency or local governmental unit may toll for the duration of an emergency period

any deadline falling within that period that the agency or local governmental unit administers or enforces. The agency or local governmental unit may not charge any interest or penalty that would otherwise apply with respect to the tolled deadline.

(b) Paragraph (a) does not apply to all of the following:

1. Any deadline with respect to the filing or payment of a tax for which the revenue is deposited or is expected to be deposited in the general fund, a tax or fee for which the revenue is deposited or is expected to be deposited in the transportation fund, or a property tax.

2. The date on which an election, as defined in s. 5.02 (4), is to be held, and any deadline relating to an election.

(3) TRAINING REQUIREMENTS. During an emergency period, each agency or local governmental unit may suspend any training requirement associated with any program the agency or local unit of government administers or enforces.

**SECTION 82.** 323.2911 of the statutes is created to read:

**323.2911 Public employee health insurance coverage.** Notwithstanding s. 40.02 (40), for the purpose of group health insurance coverage offered by the group insurance board under subch. IV of ch. 40, if an employee who was on a leave of absence returns from leave, even if the employee has not resumed active performance of duty for 30 consecutive calendar days on March 12, 2020, due to the public health emergency declared by executive order 72, the leave of absence is deemed ended or interrupted on that date.

**SECTION 83.** 323.2912 of the statutes is created to read:

**323.2912 Suspension of limited term appointment hours.** Notwithstanding s. 230.26 (1), the director of the bureau of merit recruitment and selection in the division of personnel management in the department of administration may increase or suspend the number of hours for a limited term appointment for the duration of the public health emergency declared on March 12, 2020, by executive order 72.

**SECTION 84.** 323.2913 of the statutes is created to read:

**323.2913 Use of annual leave during probationary period by state employee.** Notwithstanding s. 230.35 (1) (b), a state employee may take annual leave within the first 6 months of the employee's probationary period upon initial appointment during the public health emergency declared on March 12, 2020, by executive order 72. If an employee who has taken annual leave under this section terminates his or her employment before earning annual leave equivalent to the amount of annual leave the employee has taken, the appointing authority shall deduct the cost of the unearned annual leave from the employee's final pay.

**SECTION 85.** 323.2915 of the statutes is created to read:

**323.2915 State civil service grievance procedures.** (1) Notwithstanding s. 230.445 (2) and (3), an employee does not waive his or her right to appeal an adverse employment decision if the employee does not timely file the complaint or appeal during the public health emergency declared on March 12, 2020, by executive order 72. The tolling period under s. 230.445 (3) (a) 1. begins 14 days after the termination of such public health emergency.

(2) Notwithstanding s. 230.445 (3) (a) 2., an appointing authority or his or her designee is not required to meet with a complainant in person during the public health emergency declared on March 12, 2020, by executive order 72, when conducting an investigation under s. 230.445 (3) (a) 2.

**SECTION 86.** 440.08 (5) of the statutes is created to read:

440.08 (5) RENEWAL SUSPENSION FOR PUBLIC HEALTH EMERGENCY. (a) In this subsection, "health care provider credential" means any credential issued under ch. 441, 447, 448, 450, 455, 460, or 462.

(b) Notwithstanding subs. (1) to (3) and the applicable provisions in chs. 440 to 480, but subject to any professional discipline imposed on the credential, a health care provider credential is not subject to renewal, or any other conditions for renewal including continuing education, and remains valid during the period specified in par. (c).

(c) For purposes of par. (b), the period shall be the period beginning on March 12, 2020, and ending on the 60th day after the end of the period covered by the public health emergency declared on March 12, 2020, by executive order 72.

(d) A renewal that occurs subsequent to the period described in par. (c) is not subject to the late renewal fee under sub. (3) (a) if the application to renew the credential is received before the next applicable renewal date. Notwithstanding the applicable provisions in chs. 440 to 480, the applicable credentialing board may, for that next applicable renewal date, provide an exemption from or reduction of continuing education or other conditions for renewal.

**SECTION 87.** 450.11 (5) (a) of the statutes is amended to read:

450.11 (5) (a) Except as provided in ~~par. pars.~~ (bm) ~~and (br)~~, no prescription may be refilled unless the requirements of sub. (1) and, if applicable, sub. (1m) have been met and written, oral, or electronic authorization has been given by the prescribing practitioner. Unless the prescribing practitioner has specified in the prescription order that dispensing a prescribed drug in an initial amount followed by periodic refills as specified in the prescription order is medically necessary, a pharma-

cist may exercise his or her professional judgment to dispense varying quantities of the prescribed drug per fill up to the total number of dosage units authorized by the prescribing practitioner in the prescription order including any refills, subject to par. (b).

**SECTION 88.** 450.11 (5) (br) of the statutes is created to read:

450.11 (5) (br) 1. In the event a pharmacist receives a request for a prescription to be refilled and the prescription cannot be refilled as provided in par. (a), the pharmacist may, subject to subd. 2. a. to e., extend the existing prescription order and dispense the drug to the patient, if the pharmacist has not received and is not aware of written or oral instructions from the prescribing practitioner prohibiting further dispensing pursuant to or extension of the prescription order.

2. a. A prescribing practitioner may indicate, by writing on the face of the prescription order or, with respect to a prescription order transmitted electronically, by designating in electronic format the phrase “No extensions,” or words of similar meaning, that no extension of the prescription order may be made under subd. 1. If such indication is made, the pharmacist may not extend the prescription order under subd. 1.

b. A pharmacist acting under subd. 1. may not extend a prescription order to dispense more than a 30-day supply of the prescribed drug, except that if the drug is typically packaged in a form that requires a pharmacist to dispense the drug in a quantity greater than a 30-day supply, the pharmacist may extend the prescription order as necessary to dispense the drug in the smallest quantity in which it is typically packaged.

c. A pharmacist may not extend a prescription order under subd. 1. for a drug that is a controlled substance.

d. A pharmacist may not extend a prescription order under subd. 1. for a particular patient if a prescription order was previously extended under subd. 1. for that patient during the period described in subd. 3.

e. A pharmacist shall, at the earliest reasonable time after acting under subd. 1., notify the prescribing practitioner or his or her office, but is not required to attempt to procure a new prescription order or refill authorization for the drug by contacting the prescribing practitioner or his or her office prior to acting under subd. 1. After acting under subd. 1., the pharmacist may notify the patient or other individual that any further refills will require the authorization of a prescribing practitioner.

3. This paragraph applies only during the public health emergency declared on March 12, 2020, by executive order 72, and for 30 days after the conclusion of that public health emergency. During that time, this paragraph supersedes par. (bm) to the extent of any conflict.

**SECTION 89.** 609.205 of the statutes is created to read:

**609.205 Public health emergency for COVID–19.**

(1) In this section, “COVID–19” means an infection caused by the SARS–CoV–2 coronavirus.

(2) All of the following apply to a defined network plan or preferred provider plan during the state of emergency related to public health declared under s. 323.10 on March 12, 2020, by executive order 72, and for the 60 days following the date that the state of emergency terminates:

(a) The plan may not require an enrollee to pay, including cost sharing, for a service, treatment, or supply provided by a provider that is not a participating provider in the plan’s network of providers more than the enrollee would pay if the service, treatment, or supply is provided by a provider that is a participating provider. This subsection applies to any service, treatment, or supply that is related to diagnosis or treatment for COVID–19 and to any service, treatment, or supply that is provided by a provider that is not a participating provider because a participating provider is unavailable due to the public health emergency.

(b) The plan shall reimburse a provider that is not a participating provider for a service, treatment, or supply provided under the circumstances described under par. (a) at 225 percent of the rate the federal Medicare program reimburses the provider for the same or a similar service, treatment, or supply in the same geographic area.

(3) During the state of emergency related to public health declared under s. 323.10 on March 12, 2020, by executive order 72, and for the 60 days following the date that the state of emergency terminates, all of the following apply to any health care provider or health care facility that provides a service, treatment, or supply to an enrollee of a defined network plan or preferred provider plan but is not a participating provider of that plan:

(a) The health care provider or facility shall accept as payment in full any payment by a defined network plan or preferred provider plan that is at least 225 percent of the rate the federal Medicare program reimburses the provider for the same or a similar service, treatment, or supply in the same geographic area.

(b) The health care provider or facility may not charge the enrollee for the service, treatment, or supply an amount that exceeds the amount the provider or facility is reimbursed by the defined network plan or preferred provider plan.

(4) The commissioner may promulgate any rules necessary to implement this section.

**SECTION 90.** 609.83 of the statutes is amended to read:

**609.83 Coverage of drugs and devices.** Limited service health organizations, preferred provider plans, and defined network plans are subject to ss. 632.853 and 632.895 (16t) and (16v).

**SECTION 91.** 609.846 of the statutes is created to read:

**609.846 Discrimination based on COVID–19 prohibited.** Limited service health organizations, preferred provider plans, and defined network plans are subject to s. 632.729.

**SECTION 92.** 609.885 of the statutes is created to read:  
**609.885 Coverage of COVID–19 testing.** Defined network plans, preferred provider plans, and limited service health organizations are subject to s. 632.895 (14g).

**SECTION 93.** 625.12 (2) of the statutes is amended to read:

625.12 (2) CLASSIFICATION. ~~Risks Except as provided in s. 632.729, risks~~ may be classified in any reasonable way for the establishment of rates and minimum premiums, except that no classifications may be based on race, color, creed or national origin, and classifications in automobile insurance may not be based on physical condition or developmental disability as defined in s. 51.01 (5). Subject to ~~s. ss. 632.365 and 632.729,~~ rates thus produced may be modified for individual risks in accordance with rating plans or schedules that establish reasonable standards for measuring probable variations in hazards, expenses, or both. Rates may also be modified for individual risks under s. 625.13 (2).

**SECTION 94.** 628.34 (3) (a) of the statutes is amended to read:

628.34 (3) (a) No insurer may unfairly discriminate among policyholders by charging different premiums or by offering different terms of coverage except on the basis of classifications related to the nature and the degree of the risk covered or the expenses involved, subject to ss. 632.365, 632.729, 632.746 and 632.748. Rates are not unfairly discriminatory if they are averaged broadly among persons insured under a group, blanket or franchise policy, and terms are not unfairly discriminatory merely because they are more favorable than in a similar individual policy.

**SECTION 95.** 632.729 of the statutes is created to read:

**632.729 Prohibiting discrimination based on COVID–19.** (1) DEFINITIONS. In this section:

(a) “COVID–19” means an infection caused by the SARS–CoV–2 coronavirus.

(b) “Health benefit plan” has the meaning given in s. 632.745 (11).

(c) “Pharmacy benefit manager” has the meaning given in s. 632.865 (1) (c).

(d) “Self–insured health plan” has the meaning given in s. 632.85 (1) (c).

(2) ISSUANCE OR RENEWAL. (a) An insurer that offers an individual or group health benefit plan, a pharmacy benefit manager, or a self–insured health plan may not establish rules for the eligibility of any individual to enroll, for the continued eligibility of any individual to remain enrolled, or for the renewal of coverage under the plan based on a current or past diagnosis or suspected diagnosis of COVID–19.

(b) An insurer that offers a group health benefit plan, a pharmacy benefit manager, or a self–insured health plan may not establish rules for the eligibility of any employer or other group to enroll, for the continued eligibility of any employer or group to remain enrolled, or for

the renewal of an employer’s or group’s coverage under the plan based on a current or past diagnosis or suspected diagnosis of COVID–19 of any employee or other member of the group.

(3) CANCELLATION. An insurer that offers an individual or group health benefit plan, a pharmacy benefit manager, or a self–insured health plan may not use as a basis for cancellation of coverage during a contract term a current or past diagnosis of COVID–19 or suspected diagnosis of COVID–19.

(4) RATES. An insurer that offers an individual or group health benefit plan, a pharmacy benefit manager, or a self–insured health plan may not use as a basis for setting rates for coverage a current or past diagnosis of COVID–19 or suspected diagnosis of COVID–19.

(5) PREMIUM GRACE PERIOD. An insurer that offers an individual or group health benefit plan, a pharmacy benefit manager, or a self–insured health plan may not refuse to grant to an individual, employer, or other group a grace period for the payment of a premium based on an individual’s, employee’s, or group member’s current or past diagnosis of COVID–19 or suspected diagnosis of COVID–19 if a grace period for payment of premium would generally be granted under the plan.

**SECTION 96.** 632.895 (14g) of the statutes is created to read:

632.895 (14g) COVERAGE OF COVID–19 TESTING. (a) In this subsection, “COVID–19” means an infection caused by the SARS–CoV–2 coronavirus.

(b) Before March 13, 2021, every disability insurance policy, and every self–insured health plan of the state or of a county, city, town, village, or school district, that generally covers testing for infectious diseases shall provide coverage of testing for COVID–19 without imposing any copayment or coinsurance on the individual covered under the policy or plan.

**SECTION 97.** 632.895 (16v) of the statutes is created to read:

632.895 (16v) PROHIBITING COVERAGE LIMITATIONS ON PRESCRIPTION DRUGS. (a) During the period covered by the state of emergency related to public health declared by the governor on March 12, 2020, by executive order 72, an insurer offering a disability insurance policy that covers prescription drugs, a self–insured health plan of the state or of a county, city, town, village, or school district that covers prescription drugs, or a pharmacy benefit manager acting on behalf of a policy or plan may not do any of the following in order to maintain coverage of a prescription drug:

1. Require prior authorization for early refills of a prescription drug or otherwise restrict the period of time in which a prescription drug may be refilled.

2. Impose a limit on the quantity of prescription drugs that may be obtained if the quantity is no more than a 90–day supply.

(b) This subsection does not apply to a prescription drug that is a controlled substance, as defined in s. 961.01 (4).

**SECTION 98.** 895.4801 of the statutes is created to read:

**895.4801 Immunity for health care providers during COVID–19 emergency.** (1) **DEFINITIONS.** In this section:

(a) “Health care professional” means an individual licensed, registered, or certified by the medical examining board under subch. II of ch. 448 or the board of nursing under ch. 441.

(b) “Health care provider” has the meaning given in s. 146.38 (1) (b) and includes an adult family home, as defined in s. 50.01 (1).

(2) **IMMUNITY.** Subject to sub. (3), any health care professional, health care provider, or employee, agent, or contractor of a health care professional or health care provider is immune from civil liability for the death of or injury to any individual or any damages caused by actions or omissions that satisfy all of the following:

(a) The action or omission is committed while the professional, provider, employee, agent, or contractor is providing services during the state of emergency declared under s. 323.10 on March 12, 2020, by executive order 72, or the 60 days following the date that the state of emergency terminates.

(b) The actions or omissions relate to health services provided or not provided in good faith or are substantially consistent with any of the following:

1. Any direction, guidance, recommendation, or other statement made by a federal, state, or local official to address or in response to the emergency or disaster declared as described under par. (a).

2. Any guidance published by the department of health services, the federal department of health and human services, or any divisions or agencies of the federal department of health and human services relied upon in good faith.

(c) The actions or omissions do not involve reckless or wanton conduct or intentional misconduct.

(3) **APPLICABILITY.** This section does not apply if s. 257.03, 257.04, 323.41, or 323.44 applies.

**SECTION 99.** 895.51 (title) of the statutes is amended to read:

**895.51 (title) Civil liability exemption: food or emergency household products; emergency medical supplies; donation, sale, or distribution.**

**SECTION 100.** 895.51 (1) (bd) of the statutes is created to read:

895.51 (1) (bd) “Cost of production” means the cost of inputs, wages, operating the manufacturing facility, and transporting the product.

**SECTION 101.** 895.51 (1) (bg) of the statutes is created to read:

895.51 (1) (bg) “Emergency medical supplies” means any medical equipment or supplies necessary to limit the spread of, or provide treatment for, a disease associated with the public health emergency related to the 2019 novel coronavirus pandemic, including life support devices, personal protective equipment, cleaning supplies, and any other items determined to be necessary by the secretary of health services.

**SECTION 102.** 895.51 (1) (dp) of the statutes is created to read:

895.51 (1) (dp) “Public health emergency related to the 2019 novel coronavirus pandemic” means the period covered by the public health emergency declared under 42 USC 247d by the secretary of the federal department of health and human services on January 31, 2020, in response to the 2019 novel coronavirus or the national emergency declared by the U.S. president under 50 USC 1621 on March 13, 2020, in response to the 2019 novel coronavirus.

**SECTION 103.** 895.51 (2r) of the statutes is created to read:

895.51 (2r) Any person engaged in the manufacturing, distribution, or sale of emergency medical supplies, who donates or sells, at a price not to exceed the cost of production, emergency medical supplies to a charitable organization or governmental unit to respond to the public health emergency related to the 2019 novel coronavirus pandemic is immune from civil liability for the death of or injury to an individual caused by the emergency medical supplies donated or sold by the person.

**SECTION 104.** 895.51 (3r) of the statutes is created to read:

895.51 (3r) Any charitable organization that distributes free of charge emergency medical supplies received under sub. (2r) is immune from civil liability for the death of or injury to an individual caused by the emergency medical supplies distributed by the charitable organization.

**SECTION 105. Nonstatutory provisions.**

(1) **ENHANCED FEDERAL MEDICAL ASSISTANCE PERCENTAGE.** If the federal government provides an enhanced federal medical assistance percentage during an emergency period declared in response to the novel coronavirus pandemic, the department of health services may do any of the following during the period to which the enhanced federal medical assistance percentage applies in order to satisfy criteria to qualify for the enhanced federal medical assistance percentage:

(a) Suspend the requirement to comply with the premium requirements under s. 49.45 (23b) (b) 2. and (c).

(b) Suspend the requirement to comply with the health risk assessment requirement under s. 49.45 (23b) (b) 3.

(c) Delay implementation of the community engagement requirement under s. 49.45 (23b) (b) 1. until the date

that is 30 days after either the day the federal government has approved the community engagement implementation plan or the last day of the calendar quarter in which the last day of the emergency period under 42 USC 1320b–5 (g) (1) that is declared due to the novel coronavirus pandemic occurs, whichever is later.

(d) Notwithstanding any requirement under subch. IV of ch. 49 to disenroll an individual to the contrary, maintain continuous enrollment in compliance with section 6008 (b) (3) of the federal Families First Coronavirus Response Act, P.L. 116–127.

(2) LIABILITY INSURANCE FOR PHYSICIANS AND NURSE ANESTHETISTS. During the public health emergency declared on March 12, 2020, by executive order 72, all of the following apply to a physician or nurse anesthetist for whom this state is not a principal place of practice but who is authorized to practice in this state on a temporary basis:

(a) The physician or nurse anesthetist may fulfill the requirements of s. 655.23 (3) (a) by filing with the commissioner of insurance a certificate of insurance for a policy of health care liability insurance issued by an insurer that is authorized in a jurisdiction accredited by the National Association of Insurance Commissioners.

(b) The physician or nurse anesthetist may elect, in the manner designated by the commissioner of insurance by rule under s. 655.004, to be subject to ch. 655.

(3) VIRTUAL INSTRUCTION; REPORTS AND GUIDANCE.

(a) *Definitions.* In this subsection:

1. “Department” means the department of public instruction.

2. “Public health emergency” means the period during the 2019–20 school year when schools are closed by the department of health services under s. 252.02 (3).

3. “Virtual instruction” means instruction provided through means of the Internet if the pupils participating in and instructional staff providing the instruction are geographically remote from each other.

(b) *School board reports.* By November 1, 2020, each school board shall report to the department all of the following:

1. Whether or not virtual instruction was implemented in the school district during the public health emergency and, if implemented, in which grades it was implemented.

2. If virtual instruction was implemented in the school district during the public health emergency, the process for implementing the virtual instruction.

3. For each grade level, the average percentage of the 2019–20 school year curriculum provided to pupils, including curriculum provided in–person and virtually.

4. Whether anything was provided to pupils during the 2020 summer to help pupils learn content that pupils missed because of the public health emergency and, if so, what was provided to pupils.

5. Recommendations for best practices for transitioning to and providing virtual instruction when schools are closed.

6. Any challenges or barriers the school board faced related to implementing virtual instruction during the public health emergency.

7. By position type, the number of staff members who were laid off during the public health emergency.

8. The number of lunches the school board provided during the public health emergency.

9. The total amount by which the school board reduced expenditures during, or because of, the public health emergency in each of the following categories:

a. Utilities.

b. Transportation.

c. Food service.

d. Personnel. This category includes expenditure reductions that result from layoffs.

e. Contract terminations.

(c) *Report to the legislature.* By January 1, 2021, the department shall compile and submit the information it received under par. (b) to the appropriate standing committees of the legislature in the manner provided under s. 13.172 (3).

(d) *DPI guidance on returning to in–person instruction.* By June 30, 2020, the department shall post on its Internet site guidance to schools on best practices related to transitioning from virtual instruction to in–person instruction.

(4) TEMPORARY CREDENTIALS FOR FORMER HEALTH CARE PROVIDERS DURING EMERGENCY.

(a) *Definitions.* In this subsection:

1. “Health care provider” means an individual who was at any time within the past 5 years, but is not currently, any of the following, if the individual’s credential was never revoked, limited, suspended, or denied renewal:

a. A nurse licensed under ch. 441.

b. A chiropractor licensed under ch. 446.

c. A dentist licensed under ch. 447.

d. A physician, physician assistant, perfusionist, or respiratory care practitioner licensed or certified under subch. II of ch. 448.

e. A physical therapist or physical therapist assistant licensed under subch. III of ch. 448 or who holds a compact privilege under subch. IX of ch. 448.

f. A podiatrist licensed under subch. IV of ch. 448.

g. A dietitian certified under subch. V of ch. 448.

h. An athletic trainer licensed under subch. VI of ch. 448.

i. An occupational therapist or occupational therapy assistant licensed under subch. VII of ch. 448.

j. An optometrist licensed under ch. 449.

k. A pharmacist licensed under ch. 450.

L. An acupuncturist certified under ch. 451.



- m. A psychologist licensed under ch. 455.
  - n. A social worker, marriage and family therapist, or professional counselor certified or licensed under ch. 457.
  - o. A speech–language pathologist or audiologist licensed under subch. II of ch. 459.
  - p. A massage therapist or bodywork therapist licensed under ch. 460.
2. “Health care facility” means a system, care clinic, care provider, long–term care facility, or any other health care facility where health care services are provided.
  3. “Temporary credential” mean a visiting, locum tenens, temporary, or similar non–permanent license or certificate.
    - (b) *Temporary practice; emergency.*
      1. Notwithstanding ss. 440.982 (1), 441.06 (4), 441.15 (2), 446.02 (1), 447.03 (1), 448.03 (1) (a), (b), and (c) and (1m), 448.51 (1), 448.61, 448.76, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 455.02 (1m), 457.04 (4), (5), (6), and (7), 459.02 (1), 459.24 (1), and 460.02, a health care provider may provide services within the scope of the credential that the health care provider previously held if all of the following apply:
        - a. Practice by the health care provider is necessary for an identified health care facility to ensure the continued and safe delivery of health care services.
        - b. The identified health care facility’s needs reasonably prevented the health care provider from obtaining a credential before beginning to provide health care services at the facility.
        - c. The health care provider applies for a temporary credential or permanent credential within 10 days of first providing health care services at a health care facility.
        - d. The health care facility notifies the department of safety and professional services within 5 days of the date on which the health care provider begins providing health care services at the facility.
      2. A health care provider who provides services authorized under this subsection shall maintain malpractice insurance that satisfies the requirements of the profession for which the health care provider has been licensed or certified.
      3. This subsection does not apply 30 days after the conclusion of the period covered by the public health emergency declared on March 12, 2020, by executive order 72.
- (5) **AUTHORITY TO WAIVE FEES.** Notwithstanding s. 440.05 and the applicable fee provisions in chs. 440 to 480, during the period covered by the public health emergency declared on March 12, 2020, by executive order 72, the department of safety and professional services may waive fees for applications for an initial credential and renewal of a credential for registered nurses, licensed practical nurses, nurse–midwives, dentists, physicians, physician assistants, perfusionists, respiratory care practitioners, pharmacists, psychologists, clinical social

- workers, independent social workers, social workers, marriage and family therapists, professional counselors, and clinical substance abuse counselors.
- (6) **TEMPORARY CREDENTIALS FOR HEALTH CARE PROVIDERS FROM OTHER STATES DURING EMERGENCY.**
- (a) *Definitions.* In this subsection:
1. “Health care provider” means an individual who holds a valid, unexpired license, certificate, or registration granted by another state or territory that authorizes or qualifies the individual to perform acts that are substantially the same as the acts that any of the following are licensed or certified to perform:
    - a. A nurse licensed under ch. 441.
    - b. A chiropractor licensed under ch. 446.
    - c. A dentist licensed under ch. 447.
    - d. A physician, physician assistant, perfusionist, or respiratory care practitioner licensed or certified under subch. II of ch. 448.
    - e. A physical therapist or physical therapist assistant licensed under subch. III of ch. 448 or who holds a compact privilege under subch. IX of ch. 448.
    - f. A podiatrist licensed under subch. IV of ch. 448.
    - g. A dietitian certified under subch. V of ch. 448.
    - h. An athletic trainer licensed under subch. VI of ch. 448.
    - i. An occupational therapist or occupational therapy assistant licensed under subch. VII of ch. 448.
    - j. An optometrist licensed under ch. 449.
    - k. A pharmacist licensed under ch. 450.
    - L. An acupuncturist certified under ch. 451.
    - m. A psychologist licensed under ch. 455.
    - n. A social worker, marriage and family therapist, or professional counselor certified or licensed under ch. 457.
    - o. A speech–language pathologist or audiologist licensed under subch. II of ch. 459.
    - p. A massage therapist or bodywork therapist licensed under ch. 460.
  2. “Health care facility” means a system, care clinic, care provider, long–term care facility, or any other health care facility where health care services are provided.
  3. “Temporary credential” mean a visiting, locum tenens, temporary, or similar non–permanent license or certificate.
    - (b) *Temporary practice; emergency.*
      1. Notwithstanding ss. 440.982 (1), 441.06 (4), 441.15 (2), 446.02 (1), 447.03 (1), 448.03 (1) (a), (b), and (c) and (1m), 448.51 (1), 448.61, 448.76, 448.961 (1) and (2), 449.02 (1), 450.03 (1), 451.04 (1), 455.02 (1m), 457.04 (4), (5), (6), and (7), 459.02 (1), 459.24 (1), and 460.02, a health care provider may provide services within the scope of the credential that the health care provider holds if all of the following apply:
        - a. Practice by the health care provider is necessary for an identified health care facility to ensure the continued and safe delivery of health care services.

b. The identified health care facility’s needs reasonably prevented the health care provider from obtaining a credential before beginning to provide health care services at the facility.

c. The health care provider applies for a temporary credential or permanent credential within 10 days of beginning to provide health care services at a health care facility.

d. The health care facility notifies the department of safety and professional services within 5 days of the date on which the health care provider begins providing health care services at the facility.

2. A health care provider who provides services authorized under this subsection shall maintain malpractice insurance that satisfies the requirements of the profession for which the health care provider has been licensed or certified.

3. This subsection does not apply 30 days after the conclusion of the period covered by the public health emergency declared on March 12, 2020, by executive order 72.

(8) POSITION TRANSFERS.

(a) In this subsection:

1. “Emergency period” means the period covered by the public health emergency declared on March 12, 2020, by executive order 72.

2. “State agency” means any office, commission, board, department, or independent agency in the executive branch of state government.

(b) During the emergency period, the secretary of administration may transfer any employee from one state agency to another state agency to provide services for the receiving state agency. The receiving state agency shall pay all salary and fringe benefit costs of the employee during the time he or she is providing services for the receiving state agency. Any action by the secretary under this paragraph shall remain in effect until rescinded by the secretary or 90 days after the public health emergency is terminated, whichever is earliest.

(c) If an employee is transferred under par. (b), the receiving agency may not increase the employee’s salary at the time of transfer or during the time he or she is providing services for the receiving agency and the transferring agency may not increase the employee’s salary at the time the employee returns to the transferring agency.

(d) The secretary of administration shall submit a report to the joint committee on finance no later than June 1, 2020, and on the first day of each subsequent month during the emergency period, that provides information on all employee transfers under par. (b). The report shall specify the number of employees transferred, the title of each employee transferred, the title the employee assumed at the receiving agency, and the reasons for each employee transfer.

(9) LOANS TO MUNICIPAL UTILITIES.

(a) *Definitions.* In this subsection:

1. “Board” means the board of commissioners of public lands.

2. “COVID–19 public health emergency” means the public health emergency declared on March 12, 2020, by executive order 72.

3. “Emergency period” means the period covered by the COVID–19 public health emergency, plus 60 days.

4. “Municipal utility” has the meaning given in s. 196.377 (2) (a) 3.

(b) *Loans.*

1. The board may loan moneys under its control or belonging to the trust funds to a municipal utility to ensure that the municipal utility is able to maintain liquidity during the emergency period. The loan shall be for the sum of money, for the time, and upon the conditions as may be agreed upon between the board and the borrower.

2. The legislature finds and determines that the loans authorized under this subsection serve a public purpose.

(10) LEGISLATIVE OVERSIGHT OF THE MEDICAL ASSISTANCE PROGRAM.

(a) Section 20.940 does not apply to a request for a waiver, amendment to a waiver, or other federal approval from the department of health services submitted to the federal department of health and human services during the public health emergency declared under 42 USC 247d by the secretary of the federal department of health and human services on January 31, 2020, in response to the 2019 novel coronavirus, only if the request is any of the following, relating to the Medical Assistance program:

1. Allowing providers to receive payments for services provided in alternative settings to recipients affected by 2019 novel coronavirus.

2. Waiving preadmission screening and annual resident review requirements when recipients are transferred.

3. Allowing hospitals who hold a state license but have not yet received accreditation from the Joint Commission to bill the Medical Assistance program during the 2019 novel coronavirus public health emergency.

4. Waiving payment of the application fee to temporarily enroll a provider for 90 days or until the termination of the 2019 novel coronavirus public health emergency, whichever is longer.

5. Waiving pre–enrollment criminal background checks for providers that are enrolled in the Medicare program to temporarily enroll the provider in the Medical Assistance program for 90 days or until the termination of the 2019 novel coronavirus public health emergency, whichever is longer.

6. Waiving site visit requirements to temporarily enroll a provider for 90 days or until the termination of 2019 novel coronavirus public health emergency, whichever is longer.

7. Ceasing revalidation of providers who are enrolled in the Medical Assistance program or otherwise directly impacted by the 2019 novel coronavirus public health emergency for 90 days or until termination of the public health emergency, whichever is longer.

8. Waiving the requirement that physicians and other health care professionals be licensed in the state in which they are providing services if they have equivalent licensure in another state or are enrolled in the federal Medicare program.

9. Waiving prior authorization requirements for access to covered state plan or waiver benefits.

10. Expanding the authority under Section 1905 (a) of the federal Social Security Act regarding non-emergency transportation to allow for reimbursement of any eligible individual under the Medical Assistance program, additional vendors, transportation for caregivers going to provide services to recipients, and meal delivery to Medical Assistance recipients.

11. Waiving public notice requirements that would otherwise be applicable to state plan and waiver changes.

12. Modifying the tribal consultation timelines specified in the Medical Assistance state plan to allow for consultation at the next future tribal health director meeting.

13. Modifying the requirement under 42 CFR 430.20 to submit the state plan amendment by March 31, 2020, to obtain an effective date during the first calendar quarter of 2020. The department of health services shall comply with s. 49.45 (2t) for any item included in the state plan amendment that is not specifically described in this subsection.

14. Simplifying program administration by allowing for temporary state plan flexibilities rather than requiring states to go through the state plan amendment submission and approval process.

15. Waiving timely filing requirements for billing under 42 USC 1395cc and 1396a (a) (54) and 42 CFR 424.44 to allow time for providers to implement changes.

16. Expanding hospital presumptive eligibility to include the population over age 65 and disabled.

17. Allowing flexibility for submission of electronic signatures on behalf of a Medical Assistance recipient by application assistants if a signature cannot be captured in person.

18. Waiving requirements for managed care organizations to complete initial and periodic recredentialing of network providers if the providers meet Medical Assistance provider enrollment requirements during the 2019 novel coronavirus public health emergency.

19. Requiring managed care organizations to extend preexisting authorizations through which a Medical Assistance recipient has received prior authorization until the termination of the 2019 novel coronavirus public health emergency.

20. Waiving sanctions under Section 1877 (g) of the Social Security Act relating to limitations on physician referral.

21. Allowing flexibility in how a teaching physician is present with the patient and resident including real-time audio and video or access through a window.

22. Waiving certain equipment requirements in hospital equipment maintenance requirement guidance issued on December 20, 2013, to maintain the health and safety of the hospitals' patients and providers.

23. Creating provisions allowing for additional flexibilities to allow for the use in nursing homes of physician extenders in place of medical directors and attending physicians and telehealth options.

24. Waiving notice of transfers within a nursing home due to medically necessary protection from the 2019 novel coronavirus.

25. Waiving requirements to document sufficient preparation and orientation to residents to ensure a safer and orderly intrafacility nursing home transfer.

26. Waiving requirements for a nursing home bed-hold policy.

27. Waiving the requirements for nursing home in-service education under 42 CFR 483.35 (d) (7).

28. Waiving nurse staffing information and posting of that information for nursing homes.

29. Suspending the requirement that a pharmacist go monthly to the nursing home to do record review.

30. Waiving or lessening requirements for a paid feeding assistant program in nursing homes and setting guidelines for training to assist with the 2019 novel coronavirus pandemic.

31. Waiving the annual and quarterly screening of fire extinguishers and any other annual maintenance review for nursing homes.

32. Allowing all clinical hours required under 42 CFR 483.152 (a) (3) to be online simulation.

33. Waiving under 42 CFR 483.151 (b) (2) the loss of the Nurse Aide Training and Competency Evaluation Program.

34. Waiving the requirements under 42 CFR 483.160 for training of paid feeding assistants.

35. Allowing home health agencies to perform certifications, initial assessments, and determine homebound status remotely or by record review.

36. Waiving life safety codes for intermediate care facilities for individuals with intellectual disabilities under 42 CFR 483.70 and for hospitals, hospices, nursing homes, critical access hospitals and intermediate care facilities for individuals with intellectual disabilities relating to fire alarm system maintenance and testing, automatic sprinkler and standpipe system inspection, testing, and maintenance, and inspection and maintenance of portable fire extinguishers.

37. Relating to the home and community-based waiver programs of Family Care, IRIS, and Children's Long-Term Supports, any of the following:

a. Allowing all waiver services and administrative requirements that that can be provided with the same functional equivalency of face-to-face services to occur remotely.

b. Removing the requirement to complete a 6-month progress report to reauthorize prevocational service.

c. Removing the limitation that quotes from at least 3 providers must be obtained and submitted for home modifications.

d. Removing the limitation preventing supportive home care from being provided in adult family homes and residential care apartment complexes.

e. Removing the limitation preventing personal or nursing services for recipients in residential care apartment complexes.

f. Removing the limitation that participants cannot receive other waiver services on the same day as receiving respite care.

g. Allowing adult day service providers, prevocational providers, and supported employment providers to provide services in alternate settings.

h. Allowing up to 3 meals per day for home delivered meals for Family Care and IRIS program enrollees and adding home delivered meals as a benefit in the Children's Long-Term Supports waiver.

i. Removing the limitation on using moneys to relocate individuals from an institution or family home to an independent living arrangement.

j. Allowing any individual with an intellectual or developmental disability to reside in a community-based residential facility with greater than 8 beds.

k. Modifying the scope of the child care benefit to allow for the provision of child care payments for children under the age of 12 in the program for direct care workers and medical workers who need access to child care during the emergency.

l. Allowing for all home and community-based waiver services to be provided in temporary settings.

m. Allowing home and community-based waiver services to be provided temporarily in an acute care hospital or in a short-term institutional stay.

n. Allowing payment for home and community-based waiver services provided in settings outside this state.

o. Allowing general retailers to provide assistive technology or communication aids.

p. Allowing providers certified or licensed in other states or enrolled in the Medicare program to perform the same or comparable services in this state.

q. Delaying provider licensing or certification reviews.

r. Allowing the department of health services to waive provider qualifications as necessary to increase the pool of available providers.

s. Allowing 4-year background checks to be delayed.

t. Expanding transportation providers to include individual and transportation network companies.

u. Allowing noncertified individuals to provide home delivered meals.

v. Allowing nursing students to provide allowable nursing services.

w. Allowing parents to be paid caregivers for their minor children in the Children's Long-Term Supports program when providing a service that would otherwise have been performed and paid for by a provider.

x. Allowing for qualified individuals to provide training to unpaid caregivers.

y. Waiving choice of provider requirements.

z. Waiving the managed care network adequacy requirements under 42 CFR 438.68 and 438.207.

za. Waiving requirements to complete initial and required periodic credentialing of network providers.

zb. Adding a verbal and electronic method to signing required documents.

zc. Allowing the option to conduct evaluations, assessments, and person-centered service planning meetings virtually or remotely in lieu of face-to-face meetings.

zd. Allowing the lessening of prior approval or authorization requirements.

ze. Allowing for data entry of incidents into the incident reporting system outside of typical timeframes.

zf. Waiving the requirement to distribute member-centered plans to essential providers.

zg. Allowing the department of health services to draw federal financing match for payments, such as hardship or supplemental payments, to stabilize and retain providers who suffer extreme disruptions to their standard business model or revenue streams as a result of the 2019 novel coronavirus.

zh. Allowing the department of health services to waive participant liability for room and board when temporarily sheltered at noncertified facilities.

zi. Allowing payment for home and community-based waiver services that are not documented in the recipient's plan.

zj. Allowing managed care enrollees to proceed almost immediately to a state fair hearing without having a managed care plan resolve the appeal first by permitting the department of health services to modify the timeline for managed care plans to resolve appeals to one day so the impacted appeals satisfy the exhaustion requirements and give enrollees more time to request a fair hearing.

zk. Waiving public notice requirements that would otherwise be applicable to waiver changes.

zl. Modifying the tribal consultation timelines to allow for consultation at the next future tribal health directors meeting.

zm. Waiving timelines for reports, required surveys, and notifications.

zn. Allowing the extension of the certification period of level-of-care screeners.

zo. Allowing the waiver of requirements related to home and community-based settings on a case by case basis in order to ensure the health, safety and welfare of affected beneficiaries under 42 CFR 441.301 (c) (4).

zp. Applying any provisions under this paragraph automatically to the concurrent 1915 (b) waiver.

zq. Allowing the waiver enrollment or eligibility changes based on a completed functional screen resulting in a change in level-of-care.

zr. Allowing for continued enrollment in the Children's Long-Term Supports program past the ages of 18 and 21.

zs. Allowing the suspension of involuntary disenrollment.

(b) The department of health services may implement any of the items specified in par. (a) only on a temporary basis to address the 2019 novel coronavirus pandemic for which the public health emergency described in par. (a) is declared, and any extension or renewal of the items in par. (a) shall comply with s. 20.940 and, if applicable, s. 49.45 (2t).

(11) AUDIT OF PROGRAMS AND EXPENDITURES. Beginning July 1, 2020, and ending June 30, 2021, the legislative audit bureau shall use risk-based criteria to review selected programs affected by this act and selected expenditures made with funds authorized by this act and report the results of its reviews at least quarterly to the chief clerk of each house of the legislature and to the joint legislative audit committee.

(13) COMMUNICATIONS LIMITATIONS UNDER CAMPAIGN FINANCE LAW. Section 11.1205 (1) does not apply to communications made during, or within 30 days after termination of, the public health emergency declared on March 12, 2020, by executive order 72, if the communications relate to the public health emergency.

(14) AUTHORITY TO WAIVE INTEREST AND PENALTIES FOR GENERAL FUND AND TRANSPORTATION FUND TAXES. For any person who fails to remit a covered tax or fee by the date required by law, the secretary of revenue may waive, on a case-by-case basis, any penalty or interest that accrues during the applicable period if the date required by law for the remittance is during the applicable period and the secretary determines that the person's failure is due to the effects of the COVID-19 pandemic. For purposes of this subsection, "applicable period" means the period covered by the public health emergency declared on March 12, 2020, by executive order 72, and "covered tax or fee" means a tax that is deposited or expected to be deposited into the general fund or a tax or fee that is

deposited or expected to be deposited into the transportation fund.

(15) AUTOPSIES AND CREMATION OF BODIES OF PERSONS WHO DIED OF COVID-19.

(a) *Definition.* In this subsection, "COVID-19" means an infection caused by the SARS-CoV-2 coronavirus.

(b) *Viewing of a corpse to be cremated following death from COVID-19.* Notwithstanding s. 979.10 (1) (b), for the duration of the public health emergency declared on March 12, 2020, by executive order 72, if any physician, coroner, or medical examiner has signed the death certificate of a deceased person and listed COVID-19 as the underlying cause of death, a coroner or medical examiner shall issue a cremation permit to cremate the corpse of that deceased person without viewing the corpse.

(c) *Time for cremation of a person who has died of COVID-19.* Notwithstanding s. 979.10 (1) (a) (intro.), for the duration of the public health emergency declared on March 12, 2020, by executive order 72, if a physician, coroner, or medical examiner has signed the death certificate of a deceased person and listed COVID-19 as the underlying cause of death, a coroner or medical examiner shall issue, within 48 hours after the time of death, a cremation permit for the cremation of a corpse of a deceased person.

(d) *Examination of the body of an inmate who has died of COVID-19.* Notwithstanding s. 979.025, for the duration of the public health emergency declared on March 12, 2020, by executive order 72, if an individual who has been diagnosed with COVID-19 dies while he or she is in the legal custody of the department of corrections and confined to a correctional facility located in this state, the coroner or medical examiner may perform a limited examination of the deceased individual instead of a full autopsy, which may include an external examination of the body of the deceased individual, a review of the deceased individual's medical records, or a review of the deceased individual's radiographs.

(e) *Requiring electronic signature on death certificates with 48 hours if death is caused by COVID-19.* Notwithstanding s. 69.18 or any other requirements to the contrary, during the public health emergency declared on March 12, 2020, by executive order 72, if the underlying cause of a death is determined to be COVID-19, the person required to sign the death certificate shall provide an electronic signature on the death certificate within 48 hours after the death occurs.

(16) CREDENTIAL RENEWAL DURING COVID-19 EMERGENCY.

(a) *Definition.* In this subsection, "emergency period" means the period covered by the state of emergency related to public health declared by the governor on March 12, 2020, by executive order 72, and for the 60

days following the date that the state of emergency is terminated.

(b) *Emergency medical services renewals.* Notwithstanding s. 256.15 (6) (b) and (c), (8) (c) and (cm), and (10), during the emergency period, the department of health services may not require an ambulance service provider, emergency medical services practitioner, or emergency medical responder that holds a license, training permit, or certificate under s. 256.15 that has not been suspended or revoked to renew that license, training permit, or certificate or impose renewal requirements, such as continuing education, on an ambulance service provider, emergency medical services practitioner, or emergency medical responder that holds a license, training permit, or certificate under s. 256.15. A renewal that occurs after the emergency period is not considered a late renewal if the application to renew the credential is received before the next applicable renewal date. The department of health services may, for that next applicable renewal date, provide an exemption from or reduction of continuing education or other conditions for renewal.

(17) CHILD CARE AND DEVELOPMENT FUND BLOCK GRANT FUNDS. The federal Child Care and Development Fund block grant funds received under the federal Coronavirus Aid, Relief, and Economic Security Act, P.L. 116-136, shall be credited to the appropriations under s. 20.437 (1) (mc) and (md). No moneys credited under this subsection may be encumbered or expended except as provided under s. 16.54 (2) (a) 2.

(18) ELIGIBILITY FOR LOCAL FAIR AIDS. Notwithstanding s. 93.23 (1) (c), each agricultural society, board, or association that received aid under s. 93.23 in 1950 shall continue to remain eligible for aid if a fair operated by the society, board, or association is not held during 2020 because of the public health emergency declared on March 12, 2020, by executive order 72.

(19) APPLICATIONS FOR HEATING ASSISTANCE. Households may apply for heating assistance under s. 16.27 (4) (a) at any time during calendar year 2020.

(20) PAY-FOR-PERFORMANCE; HEALTH INFORMATION EXCHANGE. The department of health services shall develop for the Medical Assistance program a payment system based on performance to incentivize participation in health information data sharing to facilitate better patient care, reduced costs, and easier access to patient information. The department shall establish performance metrics for the payment system under this subsection that satisfy all of the following:

(a) The metric shall include participation by providers in a health information exchange at a minimum level of patient record access.

(b) The payment under the payment system shall increase as the participation level in the health information exchange increases.

(c) The payment system shall begin in the 2021 rate year.

(d) For purposes of this payment system, the department shall seek any available federal moneys, including any moneys available for this purpose under the the federal Coronavirus Aid, Relief, and Economic Security Act, P.L. 116-136, to assist small, rural providers with the costs of information technology setup to participate in the health information exchange.

(21) PUPIL ASSESSMENTS; PUBLIC HEALTH EMERGENCY EXCEPTION FOR THE 2019-20 SCHOOL YEAR. Sections 115.7915 (5) (b) and (6) (j), 118.30 (1m), (1r), (1s), and (1t), 118.40 (2r) (d) 2. and (2x) (d) 2., 118.60 (7) (b) 1., 119.23 (7) (b) 1., and 121.02 (1) (r) and (s) do not apply in the 2019-20 school year.

(22) DIRECT HOURS OF INSTRUCTION; WAIVER FOR PRIVATE SCHOOLS. In the 2019-20 school year, the governing body of a private school may request the department to waive any requirement related to providing hours of instruction in chs. 115 to 121, including the requirements in ss. 118.165 (1) (c), 118.60 (2) (a) 8., and 119.23 (2) (a) 8., or in administrative rules promulgated by the department under the authority of those chapters.

(23) STATEWIDE PARENTAL CHOICE PROGRAM; APPLICATIONS FOR THE 2020-21 SCHOOL YEAR.

(a) Notwithstanding s. 118.60 (3) (ar) 1., a private school that submitted a notice of intent to participate under s. 118.60 (2) (a) 3. a. by January 10, 2020, may accept applications for the 2020-21 school year until May 14, 2020, from pupils who reside in a school district, other than an eligible school district, as defined in s. 118.60 (1) (am), or a 1st class city school district.

(b) Notwithstanding s. 118.60 (3) (ar) 2., each private school that receives applications under s. 118.60 (3) (ar) 1. for the 2020-21 school year by the deadline under par. (a), shall report the information required under s. 118.60 (3) (ar) 2. to the department of public instruction by May 29, 2020.

(24) FULL-TIME OPEN ENROLLMENT; APPLICATIONS FOR THE 2020-21 SCHOOL YEAR. Notwithstanding s. 118.51 (3) (a) and (b), (8), and (14) (b), all of the following apply to applications to attend a public school in a nonresident school district under s. 118.51 in the 2020-21 school year:

(a) The deadline for a parent of a pupil to submit an application to a nonresident school district under s. 118.51 (3) (a) 1. is May 29, 2020.

(b) The deadline for a nonresident school board to send a copy of an application to a pupil's resident school board and the department under s. 118.51 (3) (a) 1. is by the end of the day on June 1, 2020.

(c) The deadline for a resident school board to send a copy of a pupil's individualized education program to a nonresident school district under s. 118.51 (3) (a) 1m. is June 8, 2020.

(d) A nonresident school board may not act on any application received under s. 118.51 (3) (a) 1. before June 1, 2020.

(e) The deadline under s. 118.51 (3) (a) 3. by which a nonresident school board must notify an applicant of whether the applicant's application has been accepted is July 2, 2020.

(f) The deadline under s. 118.51 (3) (a) 4. by which a resident school board must notify an applicant and the nonresident school board that an application has been denied is July 9, 2020.

(g) The deadline under s. 118.51 (3) (a) 6. for a pupil's parent to notify a nonresident school board of the pupil's intent to attend school in the nonresident school district in the 2020–21 school year is July 31, 2020, or within 10 days of receiving a notice of acceptance if a pupil is selected from a waiting list under s. 118.51 (5) (d).

(h) By August 7, 2020, each nonresident school board that has accepted a pupil under s. 118.51 for attendance in the 2020–21 school year shall report the name of the pupil to the pupil's resident school board.

(i) The deadline for a resident school board to provide the information under s. 118.51 (8) to a nonresident school board to which a pupil has applied to attend in the 2020–21 school year is June 5, 2020.

(j) The deadline under s. 118.51 (14) (b) for the department to provide parents requesting reimbursement under s. 118.51 (14) (b) an estimate of the amount of reimbursement that the parent will receive if the pupil attends public school in the nonresident school district in the 2020–21 school year is June 12, 2020.

(25) INTEREST ON LATE PROPERTY TAX PAYMENTS. Notwithstanding ss. 74.11, 74.12, and 74.87, for property taxes payable in 2020, after making a general or case-by-case finding of hardship, a taxation district may provide that an installment payment that is due and payable after April 1, 2020, and is received after its due date shall not accrue interest or penalties if the total amount due and payable in 2020 is paid on or before October 1, 2020. Interest and penalties shall accrue from October 1, 2020, for any property taxes payable in 2020 that are delinquent after October 1, 2020. A taxation district may not waive interest and penalties as provided in this subsection unless the county board of the county where the taxation

district is located first adopts a resolution authorizing such waiver and establishing criteria for determining hardship, and the taxation district subsequently adopts a similar resolution. A county that has adopted a resolution authorizing the waiver of interest and penalties under this subsection shall settle any taxes, interest, and penalties collected on or before July 31, 2020, on August 20, 2020, as provided under s. 74.29 (1), and settle the remaining unpaid taxes, interest, and penalties on September 20, 2020. The August 20, 2020, settlement shall be distributed proportionally to the underlying taxing jurisdictions.

(26m) PLAN TO ASSIST MAJOR INDUSTRIES. No later than June 30, 2020, the Wisconsin Economic Development Corporation shall submit to the legislature in the manner provided under s. 13.172 (2), and to the governor, a report that includes a plan for providing support to the major industries in this state that have been adversely affected by the COVID–19 public health emergency, including tourism, manufacturing, agriculture, forest products, construction, retail, and services.

(27m) UNEMPLOYMENT INSURANCE; FEDERAL ADVANCES. The secretary of workforce development shall, to the extent permitted under federal law, seek advances to the unemployment reserve fund established in s. 108.16 from the federal government, so as to allow Schedule D under s. 108.18 (4) to remain in effect through the end of calendar year 2021.

**SECTION 106. Initial applicability.**

(1) UNEMPLOYMENT INSURANCE; CHARGING OF BENEFITS. The amendment of s. 108.16 (6m) (a) and the creation of ss. 108.04 (2) (d) and 108.07 (5) (bm) first apply retroactively to weeks of benefits described in s. 108.07 (5) (bm).

(2) DEADLINES AND TRAINING REQUIREMENTS FALLING DURING A PUBLIC HEALTH EMERGENCY. The treatment of s. 323.265 first applies retroactively to a deadline, as defined in s. 323.265 (1) (b), or training requirement falling during the public health emergency declared on March 12, 2020, by executive order 72.