

## Marathon County Board of Health

*In addition to attendance in person at the location described below, Board of Health Members and the public are invited to attend by telephone conference.*

*Persons wishing to attend the meeting by phone may call into the telephone conference beginning ten minutes prior to the start time indicated below, using the following number: 715-261-1972.*

**Tuesday, April 2, 2019 at 7:30 AM**

**Meeting Location: 1000 Lake View Drive, Suite 100  
Wausau, WI 54403**

**Committee Members:** John Robinson, Chair; Sandi Cihlar, Vice-Chair; Lori Shepherd, Secretary; Mary Ann Crosby; Dean Danner; Kue Her; Michael McGrail; Laura Scudiere

**Marathon County Mission Statement:** Marathon County Government serves people by leading, coordinating, and providing county, regional, and statewide initiatives. It directly or in cooperation with other public and private partners provides services and creates opportunities that make Marathon County and the surrounding area a preferred place to live, work, visit, and do business. (Last updated: 12-20-05)

**Marathon County Health Department Mission Statement:** To advance a healthy Marathon County community by preventing disease, promoting health, and protecting the public from environmental hazards. (Last updated: 5-7-13)

- 1. Call to Order**
- 2. Public Comment Period**
- 3. Approval of the Minutes of the March 5, 2019 Board of Health Meeting**
- 4. Operational Functions Required by Statute, Ordinance, or Resolution**
  - A. Review the Board of Health membership requirements in relationship to Wisconsin Statute, Chapter 251.03 and determine the merits of broadening background requirements
- 5. Policy Discussion and Possible Action**
  - A. Update on statewide and county discussions regarding the 2019-2021 Biennial State of Wisconsin Budget
  - B. Determine who is interested in attending the 2019 Annual Public Health Conference
  - C. Report from the Health & Human Services Committee March 25, 2019 meeting on policy issues impacting public health

**6. Educational Presentations/Outcome Monitoring Reports**

- A. Highlight information learned to date from Marijuana and Youth Series

**7. Announcements**

- A. Share news of Marathon County Health Department receiving the Prevent Blindness Wisconsin 2019 20/20 Service Award
- B. Other

**8. Next Meeting Date & Time, Location, Future Agenda Items:**

**A. Confirm the May 7, 2019 meeting and tentative agenda items**

- I. Board of Health self-assessment tool
- II. Merits of viewing NALBOH “Leading Change for Public Health 3.0”
- III. Report out on research done on other counties’ policy on the administration of Naloxone

**9. Adjourn**

FAXED TO: Daily Herald, City Pages,  
Marshfield News, Mid-West Radio Group

Signed \_\_\_\_\_

THIS NOTICE POSTED AT THE COURTHOUSE

Date \_\_\_\_\_ Time \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

By \_\_\_\_\_

*Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk’s Office at 715-261-1500 or e-mail [infomarathon@mail.co.marathon.wi.us](mailto:infomarathon@mail.co.marathon.wi.us) one business day before the meeting.*

**MARATHON COUNTY BOARD OF HEALTH**  
**Meeting Minutes**  
March 5, 2019

Present: John Robinson, Mary Ann Crosby, Kue Her, Laura Scudiere, Dean Danner, Lori Shepherd, Michael McGrail

MCHD Staff: Joan Theurer, Dale Grosskurth, Judy Burrows

Guests: Lisa Dodson, Amy Prunuske, and Corrie Norrbom from the Medical College of Wisconsin – Central Wisconsin; Nursing Students

**1. Call to Order**

John Robinson called the meeting to order at 7:32 a.m.

**2. Public Comment Period**

None

**3. Approval of the Minutes of the February 5 and 25, 2019 Board of Health Meeting**

**Motion to approve the minutes of the February 5 and 25, 2019 meetings made by Lori Shepherd. Second by Dean Danner. Motion approved.**

**4. Operational Functions Required by Statute, Ordinance, or Resolution**

A. None

**5. Policy Discussion and Possible Action**

A. Adopt changes to the Marathon County Agent Programs Regulation

Joan Theurer shared that the annual review of the regulation identified clarifying changes to be made. Dale Grosskurth indicated that permit transfers are not allowed for body art establishments, and the term special condition inspection for Inspections for class B or Class C taverns.

John Robinson asked for an editorial review to clean up references to state statutes, and make them consistent.

**Motion to approve the recommended changes with editorial changes requested made by Michael McGrail. Second by Laura Scudiere. Motion Approved.**

B. Highlight the 2019 Health Officer Plan of Work

Joan Theurer provided an overview of the Health Officer Plan of Work, and shared the framework used to develop the plan. The Health Department is lead department on two of the goals for the County's strategic plan, and will be assisting with three others.

The Marathon County Pulse website will be the data platform used for the 2019-2021 LIFE Report.

Work will be done around Health Equity, and brought to the Board of Health to have a better understanding of how to integrate concepts into programs and initiatives. John Robinson asked what opportunities exist for including the environmental justice side of the issue. Judy shared that one of the tools being used looks into the burden on the population.

Discussion on tracking of leverage of money outside of the health department, and the resulting impact of doing so.

**Motion to accept the plan as presented made by Laura Scudiere. Second by Mary Ann Crosby. Motion approved.**

A semi-annual update on progress in the plan will be given to the Board of Health.

- C. Legislative Updates: Follow-up from the Board of Health Legislative Education meeting, discuss the 2019-2021 biennial State of Wisconsin budget, and share 2019-2020 Legislative Session policy proposals impacting public health

John Robinson asked Board members to reflect on the requests made at the Legislative Education meeting, and whether they are addressed in the budget proposal from the Governor.

#### ACEs

Joan shared that under the Health and Human Services section of the Wisconsin Counties Association budget summary, additional dollars are put into the Women's Health. The intent is to restore funding to Planned Parenthood, and create positions to look at infant mortality. Also, expanding postpartum eligibility is being considered, and additional funds for home visiting are being proposed.

#### Behavioral Health/Substance Abuse

Medicaid expansion would include all low income residents, the reimbursement rate for mental health providers would be increased. Additional funding for tobacco cessation activities is proposed. Judy shared that her interpretation is that the funding could be going to the organization that provides quit-line services.

Discussion on the significance of the proposed funding changes for areas related to public health. Joan indicated that the changes have more impact on state wide population issues, versus funding for local health departments.

John Robinson shared that the legislature is still in the process of reviewing the budget proposal, and additional discussion should take place through May.

- D. Share the impact of the government shutdown would have had on food insecurity programs (e.g., Women, Infants and Children) and planning that occurred to lessen the impact on families

Joan Theurer shared information on the potential fiscal impact the federal government shutdown would have been for families in Marathon County for food insecurity, if WIC funding was not received. The total cost for one month of infant formula is \$63,000-\$74,000 per month in Marathon County. Another concern that was being looked at was Food Share.

- E. Report from the Health & Human Services Committee February 14 and 25, 2019 meetings on policy issues impacting public health

Mary Ann Crosby shared that the committee learned about ACEs at an informational meeting. John Robinson shared that the chair of the committee reiterated the importance of the Start Right program, and the value of early intervention services.

- F. Determine components for the Board of Health self-assessment

Joan Theurer shared that the Board discussed at a previous meeting the benefit of holding a self-assessment. In light of time, the Board will take a further look at the May meeting.

**6. Educational Presentations/Outcome Monitoring Reports**

- A. Presentation of the Medical College of Wisconsin 2018 Teaching Award (8:30AM)

Joan Theurer was presented the Medical College of Wisconsin 2018 Teaching Award. Lisa Dodson, Dean of the College shared that Joan has been instrumental in the partnership for the community focused pathway for the students.

Joan recognized staff who contributed to the partnership with MCW, including Amanda Ostrowski, Rebecca Mroczenski, Vicki Chrapkowski, Eileen Eckardt, Tammy Borchardt, and Jenny Juneau.

- B. Present the 2019-2023 Marathon County Health Department Strategic Plan

Board members received copies of the Strategic Plan, and Joan provided an overview of the process of how the four goals of the plan were determined.

**7. Announcements**

- A. Staffing Update
- B. Other

Laura Scudiere requested an agenda item at the next meeting, focused on medical marijuana legalization.

**A quorum was lost at 9:03 a.m., and the meeting adjourned.**

Respectfully submitted,

Lori Shepherd, Secretary  
Chris Weisgram, Recorder

## **Health Officer Notes April 2019**

### **Operational Functions Required by Statute, Ordinance, or Resolution**

- A. **Review the Board of Health membership requirements in relationship to Wisconsin Statute, Chapter 251.03 and determine the merits of broadening background requirements** – Julie Fox, DSS has resigned from the Board of Health. Upon reviewing the Board of Health Bylaws adopted on October 7, 2008, the bylaws are more restrictive than State of Wisconsin Statute 251.03. Enclosed, find Board of Health Bylaws and State of Wisconsin Statute 251.03 documents that outlines membership and appointment process.

### **Policy Discussion and Possible Action**

- A. **Update on statewide and county discussions on the 2019-2021 Biennial State of Wisconsin Budget** – Enclosed find a copy of the 2019-2021 Wisconsin State Budget Initial Analysis for WPHA/WALHDAB and the Wisconsin Counties Association. John Robinson, Chair will share key takeaways from the Wisconsin Counties Association North Central District meeting. In addition, Joan will share highlights from the Department of Health Services webinar and a meeting held with Andrea Palm, Secretary of Health Services at North Central Health Care.
- B. **Determine who is interested in attending the 2019 Annual Public Health Conference** – Enclosed find the conference brochure for the 2019 Annual Public Health Conference. Per County policy, the Health & Human Services Committee needs to approve Board member attendance.
- C. **Report from the Health & Human services Committee March 25, 2019 meeting on policy issues impacting public health** – Mary Ann Crosby, County Board Supervisor will highlight discussion and action taken by the committee impacting public health.

### **Educational Presentations/Outcome Monitoring Reports**

- A. **Highlight information learned to date from Marijuana and Youth Series** – Judy Burrows, Program Director – Chronic Disease will provide an overview of terminology and national policy statements. Board members will share areas they would like to learn more about.

### **Announcements**

- A. Share news of Marathon County Health Department receiving the Prevent Blindness Wisconsin 2019 20/20 Service Award
- B. Other

### **Next Meeting Date & Time, Location, Future Agenda Items: May 7, 2019**

- A. Board of Health self-assessment tool
- B. Merits of viewing NALBOH “Leading Change for Public Health 3.0”
- C. Report out on research done on other counties’ policy on the administration of Naloxone

# Marathon County Board of Health Bylaws

## I. Purpose

The purpose of the Marathon County Board of Health is to provide policy-making guidance to the Health Officer, the County Administrator, and the Marathon County Board of Supervisors to provide an environment in which people can be healthy.

## II. Specific Duties

In addition to those duties and responsibilities set forth in Section 2.05(17) of the General Code of Ordinances, the Marathon County Board of Health fulfills its purpose through the following specific duties:

- Assures the enforcement of public health statutes and rules
- Assures the local health department meets the requirements of a Level III health department as defined in statute
- Adopts local public health regulations to protect and improve the public's health which are no less stringent than, and do not conflict with, state statutes or the rules of the State Department of Public Health.
- Assesses public health needs and advocate for the provision of reasonable and necessary public health services
- Develops policy and provide leadership to meet public health needs
- Assures the local health department collaborates with other public health partners
- Assures accountability of the local health department

## III. Membership

The Marathon County Board of Health shall consist of nine members - at least three of whom are not elected officials. Board of Health members will demonstrate interest or competence in the field of public health or community health. A good faith effort to include at least one physician, one registered nurse, one dentist, and one veterinarian will be made.

A quorum is defined as 51% of the current Board. Board members who cannot attend a meeting are expected to report the absence in advance.

The Medical Director of the Health Department shall serve as an Ex-Officio member of the Board of Health. This position advises the Board, the Health Officer, and the Health Department staff on medical issues. This position shall not vote nor contribute to the quorum requirements of the Board.

## IV. Appointment Process

Board of Health members are appointed by the County Administrator **and confirmed by the Marathon County Board of Supervisors**. Appointments are for five years. There are no term limits.

## **V. Officers**

The Marathon County Board of Health will elect officers in June of even years. Officers include Chairperson, Vice-Chairperson, and Secretary.

The Chairperson shall prepare the agenda (in consultation with the Health Officer) and preside over all meetings of the Board of Health. The Chairperson (or his/her designee) represents the Board of Health during presentations to the County Board of Supervisors and to the media.

The Vice-Chairperson assumes all duties of the Chairperson in his/her absence.

The Secretary reviews and signs all official records and correspondence of the Board of Health.

## **VI. Frequency of Meetings**

The Marathon County Board of Health meets on a monthly basis. Meetings may be cancelled, but the Board must meet a minimum of four times per year. A special meeting may be called by the Chairperson or two or more members of the Board of Health.

## **VII. Relationship with Health & Human Services Committee**

The Board of Health will work with the Marathon County Health & Human Services Standing Committee to develop County-wide policy related to health.

### References:

Wisconsin Statutes, Chapter 251  
Marathon County Rules of Procedure

Adopted 10/07/08





# HOVEN CONSULTING, INC.

*A legislative and regulatory affairs service company*

## **2019-2021 Wisconsin State Budget Initial Analysis for WPHA/WALHDAB**

- Invest an additional \$800,000 in each fiscal year for the well compensation program. Increase the maximum income limit for eligibility from \$64,000 per family to \$100,000 per family and establish a hardship program for families making less than the state median household income. Align contamination eligibility standards under the grant program with federal clean water regulations and create a prioritization list so that the most contaminated wells are remediated first.
- Reduce the incidence of childhood lead poisoning in our state by: (1) increasing blood lead testing; (2) creating a health service initiative to provide funding to abate lead hazards in homes where Children's Health Insurance Program (CHIP) participants reside; (3) providing a grant for lead abatement in non-CHIP eligible homes; and (4) providing 1.14 FTE positions to administer the health service initiative; (5) expanding Birth to 3 services to children that are lead poisoned. Fund these initiatives with \$24,996,000 in fiscal year 2019-20 and \$27,158,700 in fiscal year 2020-21.
- The Governor believes that preventing lead poisoning is a matter of statewide concern; therefore, the budget authorizes \$40.0 million in bonding authority to provide forgivable loans through the Safe Drinking Water Loan Program. The forgivable loans can pay for up to 50 percent of the cost of the replacement of a lead service line. This funding could replace approximately 16,000 lead service lines.
- Invest in a healthy women, healthy babies initiative to improve birth outcomes, including: (1) providing \$426,700 in fiscal year 2020-21 to create a Medical Assistance reimbursement for doula services in certain regions of the state and provide \$192,000 GPR in grants for training doulas in fiscal year 2019-20; (2) increasing funding for the Women's Health Block Grant by \$193,600 GPR and remove the restrictions on which organizations Title V and X funding can be supplied; (3) allocating 5.0 FTE positions to create an Infant Mortality Prevention Program to address disparities in birth outcomes in our state; (4) expanding postpartum eligibility for women in the Medicaid program from 60 days to 12 months by providing \$22,988,000 in fiscal year 2020-21; and (5) providing an additional \$1,012,500 TANF in fiscal year 2019-20 and \$2,175,000 TANF in fiscal year 2020-21 to expand home visiting to support expecting mothers and mothers with infants and small children.
- The Governor recommends providing additional funding for the Well Woman program. The Governor also recommends adjusting statutory language in the Well Woman Program to allow the program to expend up to \$60,000 on multiple sclerosis testing.

- The Governor recommends increasing funding for the Women's Health Block Grant. The Governor also recommends expanding Women's Health Block Grant, Title V and Title X funding to entities that provide abortion services or entities that have an affiliate that provides abortion services. This does not change the prohibition on using state or federal funds for abortion services.
- Provide an additional \$3.3 million GPR annually for tobacco cessation activities.
- E-cigarettes have risen as a popular product among tobacco users as they offer users a less expensive alternative to taxed tobacco products. Many users have made a total or partial transition to the new products. The Department of Health Services found that, in 2018, 20 percent of Wisconsin high school students were using e-cigarettes. Since e-cigarettes are being used as a substitute for cigarettes and other tobacco products, e-cigarettes and related products should be subject to similar excise taxes. Consequently, the Governor recommends imposing on all e-cigarette and vapor products the existing tobacco products tax rate of 71 percent of the manufacturer's list price. This change will provide equal tax treatment to these items as other tobacco products and generate \$34.7 million in tax revenue during the biennium.
- A similar situation exists between regular cigarettes and products that are sold as "little cigars" or "brown cigarettes." Little cigars and brown cigarettes are very similar to ordinary cigarettes – having a similar filter and package size but with a slightly different wrapper. These products currently sell for substantially lower retail prices as these products are outside of the current law definition of "cigarette." Since these products are basically the same as regular cigarettes, these products should be taxed in a similar manner. Consequently, the Governor recommends taxing little cigars and/or brown cigarettes as regular cigarettes. This change is expected to generate additional tax revenue of \$2,900,000 in fiscal year 2019-20 and \$3,900,000 in fiscal year 2020-21.
- The Governor's investment in our workforce is not limited to home care aides. His budget also provides the largest rate increase for nursing homes in over a decade. The 2.5 percent year over year increase included in this budget consists of 1.0 percent for acuity and 1.5 percent which will be required to be used to increase wages for direct care workers. These hands-on front line workers are the lifeblood of nursing homes and care for our state's most vulnerable individuals.
- Create a Bureau of Natural Resources Science with a director that reports directly to the secretary. Provide an additional 5.0 FTE SEG science positions to research water and source of contamination. Of the positions, at least 2.0 FTE must work on PFAS contamination issues.
- Authorize \$40 million in GPR-supported bonding for the replacement of up to 50 percent of the cost to replace lead service lines through the Safe Drinking Water Loan Program. It is estimated that there are 170,000 lead service lines in Wisconsin. The lead service line program would be structured as a forgivable loan.

- Authorize \$4 million in bonding authority in the urban nonpoint source and storm water grant program, and the municipal flood control program.
- Authorize \$3,550,000 in GPR-supported general obligation bonding for the Safe Drinking Water Loan Program.
- Extend the maximum loan period under the Safe Drinking Water Loan Program from 20 years to 30 years. The Governor also recommends the issuance of revenue bonds to fund the state match requirements and additional loans in the Safe Drinking Water Loan Program. This change will result in future increased loan capacity for more drinking water projects and a reduction in general obligation debt service.
- Authorize \$10 million in bonding authority for the Soil and Water Resource Management (SWRM) program at the Department of Agriculture, Trade and Consumer Protection.
- Eliminate the June 30, 2021, sunset date for the Private On-Site Wastewater Treatment System Replacement or Rehabilitation Program. The program will continue to assist residence owners and small commercial establishments meeting certain income and eligibility criteria to repair or replace eligible failing private on-site wastewater treatment systems.
- Increase funding for the following homeless prevention programs, consistent with the recommendations of the Interagency Council on Homelessness: (a) \$500,000 GPR in each fiscal year for the Homelessness Prevention Program and \$300,000 GPR in each year for the creation of a new diversion program; (b) \$500,000 GPR each fiscal year for the State Shelter Subsidy Grant; (c) \$900,000 GPR in each fiscal year for the Housing Assistance Program; (d) \$500,000 TANF in each fiscal year for the Homeless Case Management Services Grant; (e) \$250,000 GPR in each fiscal year for the Skills Enhancement Grant at the Department of Children and Families; (f) \$500,000 GPR in each fiscal year to create a new Housing Quality Standards grant; and (g) \$300,000 GPR in each fiscal year to create a grant for housing navigation. Also, repurpose funding from the Employment Services Grant program to support 1.0 FTE position within the Department of Administration's Division of Energy, Housing and Community Resources to support the expanded programs and convert a 1.0 federal FTE position to program revenue service funded with TANF.
- Increase funding for runaway and homeless youth shelters by \$250,000 GPR in each fiscal year to expand services in rural areas.
- Provide increased funding for caregivers through: (1) providing \$14.8 million in each year to increase the direct care and services portion of the capitation rates the department provides to long-term care managed care organizations in recognition of the direct caregiver workforce challenges facing the state; (2) providing \$3.3 million in fiscal year 2019-20 and \$13.4 million in fiscal year 2020-21 to fund rate increases for personal care direct care services; and (3) providing \$8.7 million in fiscal year 2019-20 and \$17.8 million in fiscal year 2020-21 for a 2.5 percent general rate increase for nursing homes with a 1.5 percent increase targeted to direct care workforce.

- Provide an additional \$1 million GPR in each fiscal year for the Treatment, Alternatives and Diversion (TAD) program. Of the \$1 million, set aside \$500,000 for counties that currently do not have a TAD program.
- The Governor's budget would continue \$250,000 GPR annually in one-time funding for TAD and provide an additional \$750,000 GPR annually, with \$500,000 set aside for counties that currently do not have a TAD program.
- Create two new appropriations to fund costs associated with juvenile justice programming. The first appropriation will be sum-sufficient with a base of \$5 million GPR starting in fiscal year 2020-21 and used to reimburse counties for the increased costs associated with raising the age that a circuit court or municipal court exercises adult court jurisdiction from 17 to 18. The second appropriation will reimburse one-time start-up costs for counties that create secured residential care center for children and youth and have a budget of \$3.5 million GPR in fiscal year 2020-21. Expenses eligible for reimbursement will be determined by the Department of Children and Families in consultation with representatives of the counties.
- Increase treatment capacity and improve mental health treatment services to juveniles who need services by providing 50.5 FTE positions and \$3.1 million in fiscal year 2020-21 for a 14-bed expansion at the Mendota Juvenile Treatment Center.
- Return 17-year olds to the juvenile justice system.
- Provide \$200,000 GPR in each fiscal year to allow the Department of Corrections to update and modernize its current career technical education operations.
- Provide \$240,000 GPR in each fiscal year to properly staff technical training mobile labs at the Department of Corrections.
- The budget would provide \$75,000 GPR in each fiscal year to create four additional job centers at correctional institutions over the biennium.
- The budget calls for "ban the box" on job applications.
- The Governor's budget proposes increases to the general hourly minimum wage to \$8.25 beginning January 1, 2020, and \$9.00 beginning January 1, 2021, with additional increases of 75 cents per year in the following biennium and inflationary increases thereafter.
- The Governor recommends providing position and expenditure authority to expand the Mendota Juvenile Treatment Center in FY21. The Governor also recommends stipulating that only the director of the Mendota Mental Health Institute, or his or her designee, is authorized to make decisions regarding the admission and treatment of juveniles at the center and the release and return of juveniles to the appropriate state or county facility. The Governor further recommends reestimating revenues received from the Department of Corrections for the cost of care for juveniles at the Mendota Juvenile Treatment Center.

- The Governor recommends providing position and expenditure authority for the creation of an admissions medical education unit and additional supervisory staff to oversee evening and overnight shifts at Winnebago Mental Health Institute. The Governor also recommends reducing the overtime reestimate to reflect a projected decrease in overtime costs related to these new positions.
- The Governor recommends providing position and expenditure authority related to the expansion of the Opening Avenues to Reentry Success program.
- As a result, this budget repeals the drug screening and testing requirements for able-bodied adults seeking to participate in the FoodShare program. Additionally, the Governor's budget will take the following actions:
  - Repeal the work requirement placed on able-bodied adults with dependents age 6 to 18.
  - Repeal the FoodShare eligibility requirement that requires individuals be in compliance with child support orders or cooperate in the paternity determination of a child.
  - Repeal the pay for performance incentive for FoodShare Employment and Training program vendors.
- Repealing preemption of local government ordinances regarding family and medical leave, wage claims, employee benefits, hours of work and overtime, and solicitation of prospective employees' salary histories.
- The Governor recommends creating a new grant program to assist districts to install water bottle filling stations with filters that reduce harmful toxins, such as lead and nitrates, in student drinking water. The grants will be funded at \$250,000 per year.
- The Governor recommends creating a new license for dental therapists to increase the number of dental providers and dental services provided across the state especially in regions designated as dental provider shortage areas. The Governor also recommends providing grants to educational institutions for the development of dental therapist training programs to address statewide dental provider shortages and increase dental access under the Medical Assistance program.



## **2019-21 STATE BIENNIAL BUDGET SUMMARY**

Governor Tony Evers introduced the 2019-21 State Biennial Budget on February 28, 2019.

County-related highlights of the Governor's proposed two-year spending plan include:

- **Child Welfare:** The Governor's budget allocates an additional \$15 million annually in the Children and Families Aids allocation beginning in CY20.
- **Juvenile Corrections:** The Governor's budget provides additional funding for SRCCCYs and returns 17-year-olds to the juvenile justice system. The budget creates a sum sufficient appropriation to reimburse counties for costs associated with this policy change.
- **County Transportation:** The Governor's budget increases county general transportation aids and general transit aids by 10 percent. The budget also increases funding for the local road improvement program by 4 percent and allocates an additional \$3 million annually for the seniors and individuals with disabilities specialized transportation aids program.
- **Shared Revenue:** The Governor's budget increases county shared revenue by 2 percent beginning in 2020. This is the first proposed increase in over a decade.
- **Property Taxes:** The Governor's budget allows counties to increase their property tax levies by the greater of the percentage change in equalized value due to net new construction or 2 percent. The budget also amends assessment practices by incorporating language from last session's dark store and *Walgreens v. City of Madison* reversal legislation.
- **County Conservation:** The Governor's budget allocates \$10.4 million annually for county land conservation staffing and cost-sharing grants, the highest funding amount in over a decade.
- **Broadband Expansion:** The Governor's budget increases the broadband expansion grant program to \$39.3 million in each year of the upcoming biennium. This is an increase of nearly five-fold over current funding levels.

The WCA Government Affairs staff has prepared the following summary of county-related provisions in the Governor's budget. Please contact the WCA Government Affairs team with

any questions and please visit the WCA website at [www.wicounties.org](http://www.wicounties.org) as the summary will be updated as additional information is obtained.

## **AGRICULTURE, ENVIRONMENT AND LAND USE**

**Stewardship Reauthorization:** The Governor's budget extends the Warren Knowles-Gaylord Nelson Stewardship 2000 program until fiscal year 2021-22 at current funding levels using authorized unobligated bonding authority. The extension of the program will allow the department and stakeholders to identify future options for the program.

**Water Quality and Environmental Protection:** The Governor's budget recommends increasing position authority to provide 4.0 FTE project positions to facilitate implementation of water quality restoration and improvement plans. The Governor's budget also recommends providing additional conservation fund-supported general obligation bonding authority of \$4 million to provide grants that facilitate implementation of water quality restoration and improvement plans. The Governor's budget further recommends increasing expenditure authority by \$76,600 SEG and position authority by 1.0 FTE SEG position in each fiscal year to implement the water quality grant program. Finally, the Governor recommends increasing expenditure authority by \$1,457,900 SEG in each year of the biennium to fund river and lake protection grants.

**Grants for Local Organizations that Coordinate Grazing:** The Governor's budget proposal requires the Department of Trade Agriculture and Consumer Protection (DATCP) to promote the dairy industry by providing grants to local organizations that coordinate grazing.

**Local Pollution Control Grants (TMDL Watersheds):** The Governor's budget proposal requires the Department of Natural Resources (DNR) to award grants to both municipalities and counties for infrastructure projects related to pollution control that have a Total Maximum Daily Load (TMDL). A TMDL is the maximum amount of pollution allowed while still meeting water quality standards. The Governor's budget provides \$4,000,000 in general obligation bonding for this purpose.

**State Park Funding:** The Governor's budget recommends increasing funding to the state park system to reflect the greater costs associated with increased park system attendance. The total funding increase is approximately \$2.8 million in the biennium.

**Wisconsin Forestry Practices Study:** The Governor's budget provides \$450,000 in funding for the implementation of the recommendations made in the Wisconsin Forestry Practices Study.

**Forest Fire Protection Grants:** The Governor's budget increases funding for the Forest Fire Protection Grant Program to enable the department to provide more grants to local fire departments.

**Targeted Runoff Conservation Activities:** The Governor's budget provides \$6.5 million in environmental fund-supported general obligation bonding authority for nonpoint source pollution abatement-targeted runoff management infrastructure projects. The Governor also recommends providing \$400,000 SEG in each year for nonpoint source pollution abatement -targeted runoff management grants.

**Soil and Water Resource Management Bond Authority and Cost Share Grants:** The Governor's budget provides \$10 million in SEG-supported general obligation bonds for grants to counties for implementation of land and water resource management plans, including cost-share grants to landowners. This funding level is an increase of \$3 million from the previous biennium.

**Urban Nonpoint Storm Water Control:** The Governor's budget provides \$4 million in environmental fund-supported general obligation bonding authority for urban nonpoint source cost-sharing. This is an increase from \$53,600,000 to \$57,600,000 in the biennium. The goal of this program is to provide financial assistance for projects that manage urban storm water and runoff.

**Contaminated Sediment Bonding:** The Governor's budget provides \$25 million in environmental fund-supported general obligation bonding authority for contaminated sediment removal for sites in the Great Lakes or its tributaries that are on Wisconsin's impaired waters list.

**Dam Repair and Removal:** The Governor's budget provides \$4 million in GPR-supported general obligation bonds for grants to be used for dam repair, reconstruction and removal projects.

**Nonpoint Source Pollution Funding Adjustments:** The Governor's budget increases expenditure authority by \$1,500,000 SEG in each year for nutrient management cost-sharing. The Governor also recommends increasing the amount the department may allocate for producer-led watershed grants to \$750,000 in each year

**Permitting of Concentrated Animal Feeding Operations (CAFO):** The Governor's budget provides expenditure and position authority in the amount of \$425,000 in each year of the biennium to oversee the permitting, inspection and enforcement of concentrated animal feeding operations (CAFO) in Wisconsin. The Governor's budget also recommends increasing the annual fee assessed to operators of CAFOs and establishing an application and renewal fee for the operation of a CAFO.

**Bonding for Nonpoint Water Pollution Abatement:** The Governor's budget increases by \$6,500,000, general obligation bonding authority for financial assistance for projects that manage urban storm-water runoff. The total bonding authority is increased from \$44,050,000 to \$50,550,000 in the biennium. The financial assistance will enhance water pollution abatement



projects and assist concentrated animal feeding operations in implementing best management practices.

**County Conservation Staffing and Cost Sharing Grants:** The Governor's budget provides a \$1.4 million annual increase in grant funding to counties for county conservation staff to support land and water conservation activities. The annual base funding allocation for the program will increase from \$8.96 million annually in the 2017-19 biennium to \$10.396 million annually in both years of the 2019-21 biennium.

**Industrial Hemp Program:** The Governor's budget provides expenditure and project position authority to assist in the licensing, registration and testing of industrial hemp.

**Replacement of Lead Service Lines:** The Governor's budget authorizes \$40 million in GPR-supported bonding for the replacement of up to 50 percent of the cost to replace lead service lines through the Safe Drinking Water Loan Program. It is estimated that there are 170,000 lead service lines in Wisconsin. The lead service line program would be structured as a forgivable loan.

**Changes to the Well Compensation Program:** The Governor's budget proposal increases the eligibility income threshold for a family or individual well owner from \$65,000 to \$100,000 annually. In addition, a well owner or renter whose family income is below the state's median income may receive a grant of up to 100 percent of a project's eligible costs, not to exceed \$16,000.

**Private On-site Wastewater Treatment System Replacement or Rehabilitation Program (Wisconsin Fund):** The Governor's budget proposal eliminates the sunset date (June 30, 2021) for the Private On-Site Wastewater Treatment System Replacement or Rehabilitation Program. The program will continue to assist home owners and small commercial establishments meeting certain income and eligibility criteria to repair or replace eligible failing private on-site wastewater treatment systems.

**Bonding Authority for the Clean Water Fund Program:** The Governor's budget proposal increases the general obligation bonding authority for the Clean Water Fund Program from \$646,283,200 to \$659,783,200 or by \$13,500,000. This program provides financial assistance to local governmental units for projects to control water pollution such as sewage treatment plants.

## **COUNTY ORGANIZATION AND PERSONNEL**

**Broadband Expansion:** The Governor's budget includes several initiatives to aid in the expansion of broadband across Wisconsin. First, the Governor's budget recommends an increase in expenditure authority for the Public Service Commission (PSC) broadband expansion grant

program to \$39.3 million in each year of the biennium. This allocation includes a minimum of \$2 million annually from the universal service fund, a transfer of \$6.9 million in FY20 and \$17.3 million in FY21 from the Department of Administration e-rate funds, and an allocation of \$30.4 million in GPR in the first year of the biennium and \$20 million in the second year.

The Governor's budget also recommends the modification of current law to provide a goal for the state to provide all homes and businesses within the state access to high-speed broadband with a minimum download speed of at least 25 megabits per second and a minimum upload speed of at least 3 megabits per second by the year 2025.

The Governor's budget also includes a modification to current law to adjust the definition of broadband "underserved" as an area that lacks access to service of download speeds of at least 25 megabits per second and upload speeds of at least 3 megabits per second and "unserved" as an area that lacks access to service of download speeds of at least 10 megabits per second and upload speeds of at least 1 megabit per second. Finally, the Governor's budget would modify state statutes that in any way discourages municipalities from providing broadband service to residents in broadband "unserved" and "underserved" areas.

**Elections:** The Governor's budget modifies current law regarding voting requirements that were included in 2017 Wisconsin Act 369. Modifications include elimination of the proof of enrollment for a student ID card and allows the use of a card that expires no later than five years after the issuance date. The Governor's budget would also eliminate the requirement that the card have the student's signature. The Governor's budget also extends the expiration date of a receipt from the DOT as a temporary identification card to 180 days.

The Governor's budget requires the Elections Commission to facilitate the registration of all eligible electors of the state and maintain the registration of all eligible electors for as long as they are eligible. The Governor's budget directs the Commission and Department of Transportation (DOT) to work together so that the DOT may transfer information in their records to the commission. Individuals will have the opportunity to "opt out" of the DOT transfer of information when applying for a driver's license or state ID.

The Governor's budget would eliminate the restriction on how soon a person may complete an absentee ballot in person and would further provide that a person must complete such a ballot no later than Friday preceding the election.

**Redistricting:** The Governor's budget directs the Legislative Reference Bureau (LRB) to redraw legislative and congressional redistricting maps and appropriate \$10,000 biennially for that purpose. The Governor's budget also establishes a five-member Redistricting Advisory Commission to oversee the work of the LRB. The members will consist of the speaker and

minority leader of the Assembly, the majority and minority leader of the Senate, and the fifth member will be selected by the four legislative members.

**UW-Extension:** The Governor's budget provides funding of \$1.5 million in each year of the biennium and 20 new county-based UW-Extension agricultural positions.

**Veterans:** The Governor's budget recommends that County Veterans Service Officer Grants appropriations be consolidated into a single appropriation. No additional funds were included in the Governor's budget for this grant program.

**Minimum Wage:** The Governor's budget includes an increase in the state's minimum wage. Minimum wage would be increased by \$1 on January 1, 2020 and by \$0.75 in each year beginning January 1, 2021 for three years. Thereafter, the minimum wage would increase based on the consumer price index yearly.

**Prevailing Wage:** The Governor's budget reinstates Wisconsin's prevailing wage law.

**Project Labor Agreements:** The Governor's budget also repeals 2017 Wisconsin Act 3 which prohibited agreements (collective bargaining, project labor agreements or community workforce agreements) between governments and labor organizations on public works projects.

**Right-to-Work:** The Governor's budget eliminates the state's right-to-work law. Currently, the right-to-work law prohibits a person from requiring, as a condition of obtaining or continuing employment, and individual to refrain or resign from membership in a labor organization, to become or remain a member of a labor organization, to pay dues or other charges to a labor organization, or to pay any other person an amount that is in place of dues or charges required of members of a labor organization.

**State and Local Employment Regulations:** The Governor's budget would repeal the preemption of local governments from enacting or enforcing ordinances related to various employment matters. Currently, local governments may not enact an ordinance regulating wages, overtime pay, employee hours, and benefits (2017 Wisconsin Act 327).

## **HEALTH AND HUMAN SERVICES**

### **Department of Health Services (DHS)**

**Medicaid Expansion:** The Governor's budget changes the family income eligibility level to up to 133 percent of the federal poverty level for parents and caretaker relatives under BadgerCare Plus and for childless adults currently covered under BadgerCare Plus Core, who are incorporated into BadgerCare Plus in the budget. An additional 82,000 Wisconsinites will

receive healthcare coverage through Medicaid. The Governor's budget anticipates \$320 million in GPR savings through this initiative.

**Childless Adult Demonstration Project:** The Governor's budget eliminates the statutory implementation requirement for the BadgerCare Reform waiver, including the deadline and penalties, eliminates the statutory requirement for DHS to seek the waiver, and allows DHS to modify or withdraw the waiver. The waiver called for imposing premiums on, requiring a health risk assessment of, and time-limiting eligibility for recipients of BadgerCare Plus under the childless adult demonstration project waiver.

**Drug Screening and Testing Requirements:** The Governor's budget eliminates provisions under current law that, with certain exceptions, require controlled substance abuse screening and, in some cases, testing and treatment of all of the following: (a) individuals who apply to participate in certain work experience programs administered by DCF and DWD; (b) noncustodial parents who apply for W-2; (c) every adult member of an individual's W-2 group whose income or assets are included in determining the individual's eligibility for a W-2 program.

**Eliminating Child Support Compliance Requirement:** Current law prohibits certain able-bodied adults and able-bodied parents who refuse to cooperate in determining the paternity of a child, establishing or enforcing any support order, or obtaining any other payments or property to which the adult or child has rights, and certain parents who are delinquent in child support payments from being eligible for the MA program. The Governor's budget eliminates these prohibitions and reinstates the requirement that a person seeking MA benefits must cooperate, in accordance with federal law, in good faith with efforts directed at establishing paternity of a nonmarital child and obtaining support payments or any other payments or property to which the person and the dependent child or children may have rights.

**FoodShare Work Requirements:** The Governor's budget repeals the drug screening and testing requirements for able-bodied adults seeking to participate in the FoodShare employment and training program. The Governor's budget eliminates the requirement to implement a drug screening, testing, and treatment policy.

**FSET Requirement:** 2017 Wisconsin Act 264 requires DHS, beginning on October 1, 2019, to require all able-bodied adults, with some limited exceptions, who seek benefits from the FoodShare program to participate in FSET unless they are already employed. The Governor's budget eliminates that requirement for able-bodied adults with dependents but retains the requirement for able-bodied adults without dependents.

**FSET Pay-for-Performance:** 2017 Wisconsin Act 266 requires DHS to create and implement a payment system based on performance for entities that perform administrative functions for the

FoodShare employment and training program. Act 266 specified performance outcomes on which the pay-for-performance system must be based. The Governor's budget eliminates the requirement for DHS to create a pay-for-performance system for FSET vendors.

**FoodShare Paternity and Child Support Compliance:** The Governor's budget eliminates all of the ineligibility provisions in FoodShare for failing to comply with paternity and child support requirements in 2017 Wisconsin Act 59.

**Medicaid Waivers:** The Governor's budget repeals the portion of 2017 Wisconsin Act 370 that requires legislation be enacted in order for DHS to submit a request for a waiver or renewal, modification, withdrawal, suspension, or termination of a waiver of federal law or rules or for authorization to implement a pilot program or demonstration project. The Governor's budget also eliminates the legislative review procedure for requests for waivers, pilot programs, or demonstration projects required by Act 370.

**Medicaid Community Health Benefit:** The Governor's budget creates a Medicaid community health benefit that invests \$45 million for non-medical services to reduce and prevent health disparities that result from economic and social determinants of health. Services include but are not limited to housing referral services, stress management, and nutritional counseling. DHS is required to seek any necessary state plan amendment or request any waiver of federal Medicaid law to provide the benefit but is not required to provide the services as a Medical Assistance benefit if the federal Department of Health and Human Services does not provide federal financial participation for the services.

**Income Maintenance Administration Allocation:** The Governor's budget provides no increase in the income maintenance administration allocation.

**FoodShare Employment and Training:** The Governor's budget reduces funding for the FoodShare Employment and Training program to reflect changes in work requirements.

**Medicaid Dental Access:** The Governor's budget:

- Increases Medicaid reimbursement rates for dental providers who provide services to Medicaid and BadgerCare Plus patients to increase access to dental services under the Medical Assistance program.
- Ends the dental reimbursement pilot project.
- Creates a dental therapist training program.
- Increases the maximum award under the rural provider loan payment program.
- Increases expenditure authority for the Seal-A-Smile program.
- Increases funding for low-income dental clinics to expand services and deliver better access.

- Increases payments to dental providers that serve Medicaid recipients with physical and intellectual disabilities (\$2,000,000 AF in FY20 and \$3,000,000 AF in FY21).

**Childhood Lead Poisoning:** The Governor's budget:

- Increases blood lead testing.
- Creates a health service initiative to provide funding to abate lead hazards in homes where Children's Health Insurance Program (CHIP) participants reside (this initiative will receive federal funds at the enhanced FMAP rate).
- Provides a grant for lead abatement in non-CHIP eligible homes (\$1 million GPR).
- Provides 1.14 FTE positions to administer the health service initiative.
- Expands Birth to 3 services to children that are lead poisoned. Eligibility criteria will be lowered from a blood lead level of 10 mcg/dL to 5 mcg/dL to allow more children to receive services. The Governor also recommends utilizing surplus Community Options Program high-cost funds to provide a funding increase to the Birth-to-3 program (\$1.55 million in FY20 and \$7,600,000 in FY21).

These initiatives are funded with \$24,996,000 in FY20 and \$27,158,700 in FY21.

**Children's Long-Term Care:** The Governor's budget provides additional funding to eliminate the waiting list for the Children's Long-Term Support program. Base funding for the program was \$81.4 million in FY19. The budget increases that amount to \$117.3 million in FY20 and \$119.9 million in FY21. As of July 2018, there were 2,054 children on a waiting list for services. The Governor's budget requires DHS to ensure that any eligible child who applies for the disabled children's long-term support waiver program receives services under that program.

The Governor's budget recommends streamlining the intake, application, and screening functions for children's long-term care programs by implementing a statewide contract to administer all Katie Beckett Medicaid screens and all initial screens for the CLTS program and the Children's Community Options Program.

As part of a statewide contract, the governor recommends providing for children's services navigators (five) and children's disability resource specialists (two) to help direct families towards available community resources, programs, and services. The Governor also recommends providing for children's disability ombudsmen (two) to provide advocacy services for children with long-term support needs (\$2.1 million in FY20 and \$2.4 million in FY21).

**Mental Health Services:**

Crisis Intervention Services: Currently, mental health crisis intervention services are a benefit provided by the Medical Assistance program. Current law specifies that for a county that becomes certified as a Medical Assistance provider, the county pays the nonfederal share of the

Medical Assistance reimbursement and DHS reimburses the county for the federal share of the Medical Assistance reimbursement.

The Governor's budget changes the name of the services to "crisis intervention services" and specifies that those services are for the treatment of mental illness, intellectual disability, substance abuse, and dementia. The budget also specifies that for a county that elects to deliver crisis intervention services under MA on a regional basis, DHS reimburses the service provider both the federal and nonfederal share of the allowable charges for the amount that exceeds a required annual county contribution. After January 1, 2020, the required annual county contribution is equal to 75 percent of the county's expenditures for crisis intervention services in CY17, as determined by DHS.

**Crisis Stabilization Facilities:** The Governor's budget creates a new grant program to establish five regional crisis stabilization facilities. These facilities are designed to help individuals in crisis and reduce involuntary commitments at state-run institutions. DHS will establish the grant criteria.

**Definition of Crisis:** The Governor's budget expands the definition of crisis to include substance abuse and dementia-related crises.

**Crisis Program Enhancement Grant:** The Governor's budget requires DHS to award grants each fiscal biennium to counties or regions comprising multiple counties to establish or *enhance* crisis programs to serve individuals having crises in rural areas. The budget changes the terminology of "mobile crisis teams" to "crisis program enhancement." The total amount of grants awarded remains at \$250,000 in each fiscal biennium.

The Governor's budget funds these mental health initiatives with \$9,210,100 in FY20 and \$30,547,900 in FY21.

**Mental Health Consultation Program:** The Governor's budget requires DHS to convene a statewide group of interested persons, in partnership with the Medical College of Wisconsin, to develop a concept paper, business plan, and standards for a comprehensive mental health consultation program that incorporates general, geriatric, and addiction psychiatry, a perinatal psychiatry consultation program, and the child psychiatry consultation program, which operates under current law (\$66,700 GPR in FY20).

**Definition of Telehealth:** The Governor's budget expands the definition of "telehealth" for the purposes of reimbursement of mental health services provided through telehealth under the Medical Assistance program. Currently, the definition of "telehealth" includes only real-time communications between individuals and health care providers. The Governor's budget includes in the definition real-time communications between providers and, in circumstances determined

by DHS, asynchronous transmissions of digital images or data between providers, known as store-and-forward technology.

**Mental Health Services Under BadgerCare Plus:** The Governor's budget recommends increasing noninstitutional rates for physicians and medical clinics that provide mental health, behavioral health, and psychiatric services. The \$69 million investment will provide more services for Medicaid recipients who seek mental health and behavioral health care.

**Peer Run Respite Centers for Veterans:** The Governor's budget fully funds the peer run respite center for veterans. The facility will provide peer support services and hospital diversion services at no cost to veterans struggling with a mental health or substance abuse disorder.

**Youth Crisis Stabilization Facility:** The Governor's budget fully funds a youth crisis stabilization facility. The facility will provide residential mental health services to children whose needs are greater than what is available in their community but not severe enough to warrant commitment to an institution.

**Substance Use Disorder:** The Governor's budget provides \$898,800 in FY21 to develop a Hub-and-Spoke treatment model utilizing the Medicaid Home Health Benefit to provide care coordination for individuals at three opioid treatment centers across the state. The Governor's budget allows methadone as an appropriate treatment at these clinics. The Hub-and-Spoke model relies on regional hubs to support an individual's initial treatment and spokes to provide maintenance treatment in local communities. DHS plans to pilot the model in two urban communities and one rural community.

**Healthy Women, Healthy Babies Initiative:** The Governor's budget:

- Increases funding for the Women's Health Block Grant by \$193,600 GPR.
- Eliminates the current law requirement that DHS apply for federal Title X grant funds and to distribute any funds to public entities for family planning and related preventive health services.
- Retains the authorization for public entities that receive funding under Title V from DHS to provide some or all of the funding to other public or private entities, but eliminates the restriction (entities cannot provide abortion services, make referrals for abortion services, or have an affiliate that provides abortion services or makes referrals for abortion services) on which public or private entities may receive those funds.
- Allocates 5.0 FTE positions to create an Infant Mortality Prevention Program to address disparities in birth outcomes in our state.
- Expands postpartum eligibility for women in the Medicaid program up to 300 percent of the FPL from 60 days to 12 months by providing \$22,988,000 in FY21 (requires a Medicaid waiver).



- Provides an additional \$1,012,500 TANF in FY20 and \$2,175,000 TANF in FY21 to expand home visiting to support expecting mothers and mothers with infants and small children.
- Requires DHS to request any necessary federal approval to allow MA reimbursement for doula services.
- Requires DHS to award in FY20 grants totaling \$192,000 to public or private entities, American Indian tribes or tribal organizations, or community-based organizations for community-based doulas. The recipients must use the grants to identify and train local community workers to mentor pregnant women.

**WIC:** The Governor's budget makes several changes to the Supplemental Nutrition Program for Women, Infants, and Children:

- Allows DHS to identify an alternate participant, who is someone authorized by a WIC program participant to request benefits and otherwise participate in the WIC program, as the WIC program cardholder for purposes of electronic administration.
- Adds to the criteria to be an authorized vendor or authorized distribution center that the vendor or distribution center has an electronic benefit transfer-capable cash register system or payment device that meets the criteria specified in the budget.
- Specifies that, except for certain mobile stores specially authorized in accordance with federal law, each store is a separate vendor, must have a single, fixed location, and must be separately authorized under the WIC program.
- Adds to the activities prohibited under the WIC program related to trafficking.
- Incorporates infant formula suppliers into the types of entities for which DHS must promulgate rules regarding standards for authorization.
- Adds civil monetary penalty, warning letter, and implementation of a corrective action plan to the list of consequences for violating a rule promulgated by DHS relating to the WIC program.
- Specifies that information about an applicant for, participant in, or vendor in the WIC program is confidential and then specifies who may access that confidential information and for what purpose.
- Makes some additional changes to the language of the WIC program statutes.

**Tobacco Cessation:** The Governor's budget provides an additional \$3.3 million GPR annually for tobacco cessation activities:

- \$2,300,000 for the Wisconsin Tobacco Quit Line
- \$500,000 in the Wisconsin Nicotine Integration Project
- \$500,000 to improve outreach and cessation resources for individuals with adverse childhood experiences

**Healthy Aging Programs:** The Governor's budget requires DHS to award in each fiscal year a \$250,000 GPR grant to an entity that conducts healthy aging programs (falls prevention and chronic disease management).

**Dementia Care Specialists:** The Governor's budget provides \$2.8 million annually to expand the dementia care specialists program to all aging and disability resource centers in the state. That equates to 27 positions for non-tribal ADRCs and 3 tribal positions.

**Nursing Home Rate Increases:** The Governor's budget provides \$8.7 million in FY20 and \$17.8 million in FY21 for a 2.5 percent general rate increase for nursing homes with a 1.5 percent increase targeted to direct care workforce and 1.0 percent for acuity.

**Workforce Shortages:** The Governor's budget:

- Provides \$14.8 million in each year to increase the direct care and services portion of the capitation rates DHS provides to long-term care managed care organizations in recognition of the direct caregiver workforce challenges facing the state.
- Provides \$3.3 million in FY20 and \$13.4 million in FY21 to fund rate increases for personal care direct care services (1.5 percent increase year over year).

**Assisted Living Reporting and Fees:** The Governor's budget requires certain assisted living facilities, specifically adult day centers, community-based residential facilities, and residential care apartment complexes, to submit biennial reports to DHS through an online system prescribed by DHS.

#### Department of Children and Families (DCF)

**Children and Family Aids:** The Governor's budget increases funding for Children and Family Aids by \$15 million GPR beginning in CY20, as well as funding the costs related to the 2.5 percent foster care rate increase included in the 2017-19 biennial budget. The budget increases the maximum amount DCF must distribute to counties for these services to \$78,708,100 in FY20 and \$90,478,400 in FY21.

**Child Support:** The Governor's budget increases funding for county child support agencies by \$750,000 GPR in FY20 and \$1,500,000 in FY21.

**Birth Cost Recovery:** The Governor's budget eliminates the requirement that a court include in a judgment or order relating to paternity an order for a father to pay for a portion of pregnancy and birth expenses. The budget also eliminates orders relating to pregnancy and birth expenses, and expressly prohibits the state from seeking recovery of birth expenses.

**Child Support Custodial Parent Fee:** The Governor's budget changes the annual fee collected from every individual receiving child support or family support payments from \$25 to \$35 in order to conform to applicable federal law.

**Children First:** The Governor's budget provides \$1,140,000 TANF in each fiscal year to increase the capitated payment from \$400 to \$800 in the Children First program to ensure noncustodial parents who are in arrears in meeting their child support are receiving adequate services to help them meet their child support obligations.

**Foster Care Rate Increase:** The Governor's budget provides \$258,300 GPR/FED in FY20 and \$777,900 GPR/FED in FY21 for a 2 percent increase in foster care rates in each calendar year (2% increase in CY20 and an additional 2% in CY21).

**Kinship Care Rate Increase:** The Governor's budget provides \$247,200 TANF in FY20 and \$770,500 TANF in FY21 for a 2 percent increase in kinship care rates.

**Driver's Licenses for Foster Care Youth:** The Governor's budget requires DCF to establish or contract for a driver education program for individuals who are 15 years of age or older and in out-of-home care. The budget requires the program to provide assistance with identifying and enrolling in an appropriate driver education course, obtaining an operator's license, and obtaining motor vehicle liability insurance. The budget authorizes DCF to pay, for any individual in the program, any fees required to enroll in a driver education course or to obtain an operator's license and the cost of motor vehicle liability insurance on the vehicle owned or used by the individual during the program and after the individual obtains an operator's license. The program is allocated \$89,700 GPR in FY20 and \$289,200 GPR in FY21.

**Runaway and Homeless Youth Shelters:** The Governor's budget increases funding for runaway and homeless youth shelters by \$250,000 GPR in each fiscal year to expand services in rural areas.

**Family First Prevention Services:** The Governor's budget makes changes to child welfare laws to allow foster care payments to be made on behalf of a child who is placed with his or her parent in a licensed family-based residential alcohol or drug abuse treatment facility under a voluntary agreement or under an order of the court assigned to exercise jurisdiction under the Children's Code in order to claim federal funding under Title IV-E of the federal Social Security Act. The Governor's budget requires DCF to prepare a permanency plan for such a child, and allows DCF to place the child with the parent at the treatment program under a voluntary agreement or by an order of the juvenile court if the parent consents and if such a placement is recommended by the permanency plan. If the child is placed with his or her parent under such a voluntary agreement or an order of the juvenile court, the budget authorizes DCF to provide foster care funding for the placement.

**Background Checks for Congregate Care Workers:** The Governor's budget requires a licensing entity to perform a fingerprint-based background check for all workers at a congregate care facility, as required under federal law. The budget defines a congregate care facility to be a group home, shelter care facility, or residential care center for children and youth.

### Juvenile Justice

**17-Year-Olds:** The Governor's budget reverts jurisdiction of 17-year-old offenders from adult court to juvenile court for acts committed on or after January 1, 2021 and provides sum sufficient funding to Wisconsin counties to cover eligible costs associated with returning these youth to the juvenile justice system. The sum-sufficient appropriation will start with a base of \$5 million GPR in FY21 and will be used to reimburse counties for the increased costs associated with raising the age. Expenses eligible for reimbursement will be determined by the Department of Children and Families in consultation with representatives of the counties. The change applies to violations under the criminal code, as well as violations of civil law or municipal ordinances.

**Lincoln Hills/Copper Lake:** The Governor's budget removes the January 1, 2021 closure date for Lincoln Hills/Copper Lake and commits to transferring youth out of the facilities as soon as a Type 1 or SRCCCY facility that meets the needs of the youth is available. The intention is to close Lincoln Hills as soon as it is possible to ensure a safe and appropriate placement for all youth. The date change also applies to the construction of SRCCCYs.

The Governor's budget includes funding for building up to three new Type 1 facilities at a total cost of \$115 million.

**SRCCCYs:** The Governor's budget provides \$100 million for SRCCCY grants to counties and allows counties to apply for Youth Aids for start-up costs.

The Governor's budget changes the deadline for counties to submit SRCCCY grants from March 31, 2019 to July 1, 2019 and changes the date that the Juvenile Corrections Grant Committee must submit SRCCCY recommendations to JCF from July 1, 2019 to October 1, 2019. The budget also allows counties to submit grants prior to the deadline and allows the committee to forward early applicants to the JCF prior to the deadline under 14-day passive review to ensure that counties that are ready to move forward are able to do so without delay.

The budget also requires legislative minority representation on the Juvenile Corrections Grant Committee – one member appointed from each house of the legislature. Appointments from each house by the majority party drops from three members under current law to two members.

The Governor's budget provides \$3.5 million GPR in FY21 to reimburse one-time start-up costs for counties that create SRCCCYs. Expenses eligible for reimbursement will be determined by the Department of Children and Families in consultation with representatives of the counties.

**MJTC:** The Governor's budget increases treatment capacity and improves mental health treatment services to juveniles who need services by providing 50.5 FTE positions and \$3.1 million in FY21 for a 14-bed expansion at the Mendota Juvenile Treatment Center.

Under the Governor's budget a court may place a juvenile under the supervision of a county at MJTC only if DHS approves. In addition, only the Mendota Mental Health Institute director or his or her designee may make decisions regarding the admission of juveniles to and the treatment of juveniles at MJTC and the release and return of juveniles to the appropriate state or county facility. Juveniles placed in MJTC remain under the supervision of the county, and DHS may directly charge the county a rate that DHS sets for care provided to juveniles at MJTC.

The Governor's budget eliminates JCF approval of the MJTC expansion included in 2017 Wisconsin Act 185. Under Act 185, DHS is required to construct an expansion of MJTC to accommodate no fewer than 29 additional juveniles, subject to the approval of the JCF.

**Youth Aids:** The Governor's budget proposes nonstatutory language directing the Department of Children and Families and counties to examine potential modifications to the overall youth aids formula.

The Governor's budget appropriates to DCF a sum sufficient for youth-aids related purposes but only to reimburse counties, beginning on January 1, 2021, for costs associated with juveniles who were alleged to have violated a state or federal criminal law or any civil law or municipal ordinance at age 17. The Governor's budget also provides funding and requires DCF to reimburse counties for one-time start-up costs incurred for youth aids-related purposes in establishing, alone or jointly with one or more counties, a secured residential care center for children and youth. The Governor's budget requires DCF to consult with county representatives to determine those expenses that are eligible for reimbursement.

Youth aids funding amounts under the budget are \$45,572,100 for the last six months of 2019; \$91,150,200 for 2020; and \$45,578,100 for the first six months of 2021.

**Youth Justice System:** The Governor's budget recommends adding an additional position and increasing expenditure authority to provide training, performance monitoring, data collection and analysis to set standards of practice for the youth justice system.

**JCI Rates:** The Governor's budget increases the daily rates for placements at Lincoln Hills/Copper Lake: \$501 FY20  
\$513 July 1, 2020 to December 2020  
\$588 January 1, 2021 – June 30, 2021

Other

**Homelessness:** The Governor's budget increases funding for the following homeless prevention programs:

- \$500,000 GPR in each year for the Homelessness Prevention Program and \$300,000 GPR in each year for the creation of a new diversion program.
- \$500,000 GPR in each year for the State Shelter Subsidy Grant.
- \$900,000 GPR in each year for the Housing Assistance Program.
- \$500,000 TANF in each year for the Homeless Case Management Services Grant.
- \$250,000 GPR in each year for the Skills Enhancement Grant at DCF.
- \$500,000 GPR in each year to create a new Housing Quality Standards grant.
- \$300,000 GPR in each year to create a grant for housing navigation.

The Governor's budget repurposes funding from the Employment Services Grant program to support 1.0 FTE position within DOA's Division of Energy, Housing and Community Resources to support the expanded programs and convert 1.0 federal FTE position to program revenue service funded with TANF.

**Elderly and Disabled Transportation Aids:** The Governor's budget increases elderly and disabled transportation aids by \$6 million over the biennium (\$3 million in each year of the budget).

**Special Education Funding:** The Governor's budget increases the amount DPI pays to school boards, cooperative educational services agencies, county children with disabilities education boards, and operators of independent charter schools for costs incurred to provide special education and related services to a child with a disability that exceeds \$30,000 in one school year from 90 percent of the costs that exceed \$30,000 to 100 percent of the costs that exceed \$30,000 (additional special education aid). Under current law, if the amount appropriated for additional special education aid is insufficient to pay the full amount to the eligible entities, DPI must prorate payments among all eligible entities. The Governor's budget converts the appropriation for the aid to a sum sufficient, eliminating the need to prorate aid due to an insufficient appropriation.

**JUDICIAL AND PUBLIC SAFETY**

**Decriminalization of Marijuana:** The Governor's budget recommends the decriminalization of marijuana in amounts of 25 grams or fewer. Further, the Governor recommends creating an

expungement process for those convicted of possessing, manufacturing, or distributing less than 25 grams of marijuana and have completed their sentence or probation. Finally, the Governor is recommending a process be established for individuals to petition for the dismissal of their conviction for small amounts of marijuana.

The Governor's budget retains current law for distributing or delivering any amount of marijuana to a minor who is no more than 17 years old by a person who is at least three years older than the minor. The Governor's budget would also limit local governments ability to enact ordinances prohibiting only the possession of more than 25 grams of marijuana.

**State Public Defender:** The Governor's budget recommends that the private bar rate be increased to \$70 per hour (currently rate is set statutorily at \$40 per hour) by January 1, 2020 by providing \$8.6 million in FY20 and \$16.6 million in FY21. The Governor's budget does not provide any additional funds to counties to offset the Supreme Court Rule to increase the county court appointed attorney rate from \$70 per hour to \$100 per hour starting January 1, 2020.

**Treatment Alternatives and Diversion (TAD) Program Expansion:** The Governor's budget provides \$1 million in both years of the biennium as a one-time increase for TAD. Of the \$1 million, \$500,000 would be used for expansion of existing programs and the other \$500,000 for new programs.

**Opening Avenues to Reentry Success (OARS):** The Governor's budget provides one position and expenditure authority for the expansion of the OARS program. OARS is currently available in 44 counties and supports the prison to community transition of inmates living with a serious and persistent mental illness who are medium-to-high-risk of reoffending.

**Dispatcher Assisted Cardiopulmonary Resuscitation (CPR):** The Governor's budget provides additional monies to support the ongoing cost of the Dispatcher Assisted CPR program established in 2017 Wisconsin Act 296.

**Office of Emergency Communications:** The Governor's budget recommends transferring the Interoperability Council, the Wisconsin Interoperable System for Communications program, the 9-1-1 Subcommittee, the Next Generation 9-1-1 program, the public safety broadband program and the land mobile radio program to the Department of Transportation from the Department of Military Affairs. The 2017-19 state budget moved the aforementioned programs from multiple state departments to be housed under one department, the Department of Military Affairs within the Office of Emergency Communications.

**District Attorneys:** The Governor's budget recommends 19.6 new assistant district attorney positions, as well as funding and position authority to increase part-time assistant district attorney positions to full-time (6.90 positions). The Governor's budget also recommends one-

time funding (\$307,300 in FY20 and \$918,000 in FY21) for pay progression for assistant district attorneys and deputy district attorneys.

## **TAXATION AND FINANCE**

**Shared Revenue:** The Governor's budget increases funding for the County and Municipal Aid Program (shared revenue) by 2 percent starting in 2020.

**Levy Limits:** The Governor's budget modifies the current levy limit program by allowing county property tax levies to increase by the greater of the percentage change in equalized value due to net new constructions or 2 percent beginning with levies set in 2019.

**Levy Limits – Covered Services:** The Governor's budget eliminates the requirement that local governments make a negative levy adjustment based on fees generated from certain municipal services.

**Levy Limits – Transit Services:** The Governor's budget creates a levy limit exemption for cross-municipality transit routes where the counties and municipalities meet a number of criteria. The criteria includes that the counties and municipalities claiming the exclusion must be adjacent, must have entered an intergovernmental cooperation agreement to provide new or enhanced transit services across county boundaries, and that each participating county or municipality must pass a referendum approving the agreement.

**Dark Stores / Property Assessments:** The Governor's budget amends assessment practices by incorporating the statutory language from last legislative session's dark store and *Walgreens v. City of Madison* reversal legislation (2017 Assembly Bills 386 and 387).

**Property Tax Transparency:** The Governor's budget requires local property tax bills to include information containing the gross reduction in state aid as a result of private school choice programs.

**Property Tax Credits:** The Governor's budget repeals the school levy tax credit and the first dollar credit. The Governor's budget converts the school levy and first dollar credits into general equalization aids to schools beginning in fiscal year 2021.

**General Fund Transfer:** The Governor's budget repeals the 0.25 percent general fund tax transfer to the transportation fund.

**Homestead Tax Credit:** The Governor's budget restores indexing for the Homestead Credit beginning in tax year 2020.



**Tax Incremental Financing (TIF):** The Governor's budget limits the percentage of a TIF district's project costs that can go toward cash grants for developers to 20 percent. The Governor's budget also requires TIF project plans to contain "stress tests" in their financial projections so that local governments better understand the risks of TIF utilization.

**Sales and Use Tax:** The Governor's budget includes language explicitly requiring internet marketplace providers to collect and remit sales and use tax on taxable sales that they facilitate on their websites on behalf of third parties.

**Sales Tax Exemptions:** The Governor's budget eliminates the sales tax exemptions for the sale of live game birds and clay pigeons and eliminates the sales tax exemption for the sale of farm-raised deer.

**Real Estate Transfer Fee Exemption:** The Governor's budget modifies two current law exemptions to the real estate transfer fee. The first change clarifies that the exemption for transfers from a subsidiary corporation to its parent corporation does not apply in cases where a noncorporate entity owns a majority of shares in the corporation. The second change would modify the exemption to transfers for the purposes of providing security for debt or other obligations to specify that the exemption does not apply to conveyances between different owners.

## **TRANSPORTATION AND PUBLIC WORKS**

**Segregated Transportation Fund:** The Governor's budget funds the state's infrastructure with approximately \$6.6 billion, up from \$6.1 billion in the current biennium. New transportation revenues are generated by an eight-cent increase in the gas tax (\$485 million), elimination of the minimum markup on motor fuel, an increase in the heavy vehicle registration fee (\$36 million), an increase in the title fee (\$36 million) and by a proposed activation of the hybrid vehicle surcharge fee (\$9.7 million). In total, the increase in revenue for the Segregated Transportation Fund is approximately \$566 million in the biennium. The budget also reinstates indexing of the gas tax rate to the consumer price index.

**Transportation Project Requirements:** The Governor's budget repeals requirements passed in the 2018 Extraordinary Session requiring that any project with federal dollars in the Majors, Southeast Mega and Highway Rehabilitation Programs to be composed at least 70 percent federal dollars. The Governor's budget proposal also repeals language passed in the 2018 Extraordinary Session requiring the Wisconsin Department of Transportation (WisDOT) to notify a political subdivision receiving aid for local project whether the aid includes federal monies and how that money must be spent. Finally, the Governor's budget repeals 2018 Extraordinary Session language stating that WisDOT may not require political subdivisions to

comply with any portion of the agency's Facility Development Manual, other than requirements related to design standards.

**General Transportation Aids:** The Governor's budget increases county general transportation aids (GTA) from \$111,093,800 in the 2017-19 budget cycle to \$122,203,200 by calendar year 2020.

**Routine Maintenance Agreements:** The Governor's budget maintains funding and preserves recent increases for Routine Maintenance of the State Trunk Highway System (STH) performed by counties.

**General Transit Aids:** The Governor's budget increases annual funding for General Transit Aids by 10 percent or \$11,073,800 by the second year of the biennium: Mass Transit Systems with operating expenses of:

- Greater than \$80,000,000: Funding is increased in the second year of the biennium from \$64,193,900 to \$70,613,300
- Between \$20,000,000 and \$80,000,000: Funding is increased from \$16,868,000 to \$18,554,800
- Less than \$20,000,000 and a serving population of at least 50,000: Funding is increased from \$24,486,700 to \$26,935,400.
- Mass Transit Systems serving an area with a population of less than 50,000: Funding is increased from \$5,188,900 to \$5,707,800.

**Transit Capital Assistance:** The Governor's budget establishes a Transit Capital Assistance Program to aid in the replacement of buses for eligible applicants. A total of \$10 million is allocated in the second year of the biennium to establish the program.

**Paratransit Aids:** The Governor's budget increases funding for Paratransit Aids by 10 percent or by \$275,000 in FY 2020 and again in FY 2021. This is a total funding increase of \$550,000 over the biennium.

**Local Bridge Improvement Assistance:** The Governor's budget maintains level funding for the Local Bridge Improvement Program, resulting in \$22.9 million in both years of the biennium.

**Local Road Improvement Program (LRIP):** The Governor's budget increases the funding for the Local Road Improvement Program (LRIP) by 4 percent in the 2019-21 biennium. A total of \$1,288,000 will be added to the overall program. Funding for the county component of LRIP, the

County Highway Improvement Program (CHIP), (Discretionary Program funding) will be \$5,569,400 in FY 2020 and \$5,688,400 in FY 2021.

**Majors Projects:** The Governor's budget provides \$558 million in total funding for the Major Highway Development Program in the 2019-21 biennium. The total funding level for the program was \$669 million in the 2017-19 biennium. This is a funding decrease for the program of approximately \$111 million.

**Southeast Mega Projects Program:** The Governor's budget increases funding for the Southeast Mega Projects Program from \$122 million in the 2017-19 biennium to \$332 million in the program. This is a proposed funding increase of approximately \$210 million for the upcoming budget cycle.

**State Highway Rehabilitation Funding:** The Governor's budget provides an increase in the program from approximately \$1.7 billion in 2017-19 to \$1.9 billion. This is a funding increase of approximately \$176 million over the previous budget cycle.

**Seniors and Individuals with Disabilities Specialized Transportation Aids:** The Governor's budget increases funding for the program by \$3 million in each year of the biennium. This amounts to a \$6 million, or approximately 24% increase, in funding in the 2019-21 biennium.

**Passenger Rail Bonding:** The Governor's budget provides \$45,000,000 in general fund supported general obligation bonding for passenger rail improvements for travel between Milwaukee and Chicago. The Governor's budget also earmarks track or rail passenger station improvements related to an Amtrak service extension route, or the establishment of commuter rail service, between the City of Milwaukee and Waukesha County.

**Harbor Assistance Program:** The Governor's budget increases funding for the Harbor Assistance Program by \$13,200,000 in FY20. In addition, the Governor's budget recommends giving priority to municipalities in which a shipbuilder in the state is conducting operations. Finally, the Governor's budget recommends providing \$39,000,000 in transportation fund-supported general obligation bonding for the program.

**Freight Rail Preservation Program:** The Governor's budget provides \$30,000,000 in transportation fund supported general obligation bonding for the freight rail preservation program.

**Volkswagen Settlement:** The Governor's budget allocates 60 percent of the remaining \$25 million in Volkswagen emissions settlement funds to be dedicated to the replacement of public transit vehicles and 40 percent towards electric vehicle charging stations. Additionally, the budget modifies current law by reducing the percentage of the total grant award returned to the

state through a shared revenue reduction by the Milwaukee County and city of Madison public transit systems from 75 to 20 percent.

**Railroad Crossing and Repair:** The Governor's budget increases funding for railroad crossing and repair by \$465,000 in each year of the biennium to address a backlog of projects. The total funding increase for the program in the 2019-21 biennium is \$930,000.

**Next Generation Air Traffic Control Systems:** The Governor's budget increases state funding by \$1 million in each year of the biennium to aid local airports in the conversion to Next Generation Air Traffic Control System.

**Project Labor Agreements (PLA):** The Governor's budget restores a local unit of government's ability to require that a bidder enter into a Project Labor Agreement (PLA).

**State Prevailing Wage Requirements:** The Governor's budget restores Prevailing Wage requirements for projects using state dollars.

**Local Government Use of Eminent Domain Authority for Bicycle and Pedestrian Facilities:** The Governor's budget restores the ability of local governments to use eminent domain authority for the installation of bike and pedestrian paths.



**WALHDAB**

Public Health In Action

Wisconsin Association of Local Health Departments and Boards



## 2019-2020 LEGISLATIVE PRIORITIES

Heading into the 2019-2020 legislative session, WPHA and WALHDAB decided that three overarching themes should be incorporated in all of our efforts:

1. Building and retaining public health infrastructure through public health funding.
2. Infusing health and equity in all policies.
3. Improving public health workforce succession planning to support consistent and efficient delivery of services.



Along with these overarching themes, WPHA and WALHDAB decided to detail specific priorities and will actively engage in policy next legislative session that will focus on four social determinants of health.

### JUSTICE REFORM

- **Increase treatment alternatives and diversion program (TAD) funding for mental health and substance abuse issues.**  
*There has been bipartisan interest in this issue the past few sessions, particularly with the HOPE (Heroin, Opioid Prevention and Education) Agenda. Last session, there were several bills introduced (and some that became law) which provided funding for mental health and substance abuse.*
- **Increase funding allocated to counties for juvenile justice services to fund all costs associated with bringing 17-year-old first time juvenile offenders back to the juvenile justice system.**  
*Juvenile justice reform has been identified as an important issue to several active members of WPHA and WALHDAB. Corrections, particularly involving juveniles, has been a bipartisan topic of discussion recently in Wisconsin politics.*

### EARLY CHILDHOOD EDUCATION

- **Fully fund School Breakfast Program.**  
*State statute asks the state to fund school breakfast at 15 cents per each breakfast served. However, due to the popularity of the program, state funding only allows for an 8 cent reimbursement. We are seeking additional dollars to ensure the program is fully funded.*

### HOUSING

- **Expand low income housing tax credits for developers and rental assistance vouchers for renters.**  
*Near the end of last session, Wisconsin Act 176 earned bipartisan support and became law. The bill is just one example of a tax credit that helps encourage the development of low-income housing. WHEDA oversees many types of tax credits that support low-income housing developments, which focus on assisting developers as well as renters. Essentially, the tax credits lower construction and labor costs for developers and monthly rent for renters. With an aging population, low income senior housing tax credits are becoming more common in municipalities.*
- **Funding for programs to eliminate / abate lead paint, soil and pipes, including but not limited to a statutory provision requiring that lead remediation dollars be used for that dedicated purpose.**  
*Lead abatement garnered significant bipartisan support last session, including Wisconsin Act 137, which provides financial assistance to replace lead service lines. There is also a dedicated fund in the DHS portion of the state budget meant to address lead poisoning lead exposure service. However, state statute does not explicitly limit the ability of the fund to be used for other purposes.*

## INCOME STABILITY & EMPLOYMENT

- **Supporting and expanding Paid Family Leave.**  
*Last session, there were bipartisan efforts to address paid family leave initiatives. Republican legislators explored opportunities to create paid family leave savings accounts. Democrats proposed ways for companies and municipalities to provide paid family leave. WPHA and WALHDAB support efforts to maintain financial stability for individuals on family leave.*
- **Increase Earned Income Tax Credit and move from one-time to monthly payments.**  
*In the last state budget, Governor Walker increased funding for this program from \$30,100,000 in 2017-2018 to \$35,000,000 during the 2018-2019 fiscal year. Tax credits are a popular legislative idea and it is one that we believe will continue to be of bipartisan interest.*
- **Establish tax credit for family caregivers.**  
*A new tax credit can potentially save health care associated costs because it will provide financial assistance to families who care for family members at home.*
- **Increase workforce training/transitional jobs.**  
*This issue has drawn bipartisan support, and we believe, will continue to do so into the next session. Wisconsin has low unemployment. However, there is a major labor shortage in some sectors due to a lack of workers with the necessary and required skills to perform certain jobs in an evolving economy.*

## ABOUT PUBLIC HEALTH

Public health is a broad science with a focused goal of protecting and improving the health of Wisconsin citizens. Over the last century, public health has dramatically increased life expectancy through such scientific advancements as vaccination, infectious disease control and chronic disease prevention. It has become increasingly clear that health outcomes are primarily driven by the social and economic conditions in which we live, work, play, pray, grow up, and grow old. That's why public health is increasing its emphasis on education, income and employment, housing, and other "social determinants of health."

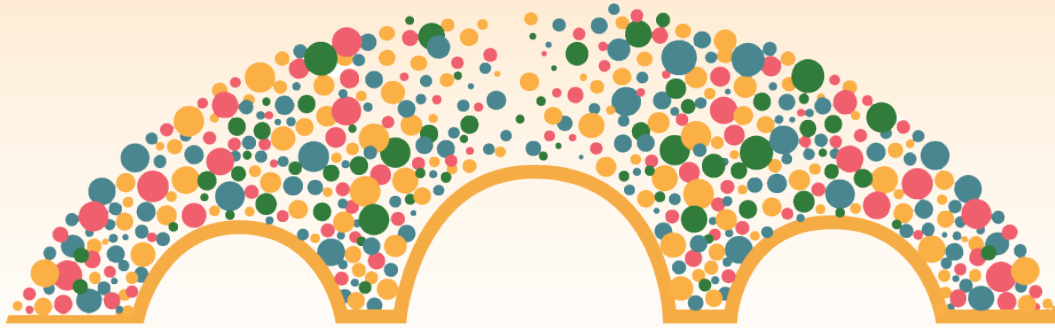
***Together, WPHA and WALHDAB represent over 1,200 public health professionals in communities across Wisconsin, striving to prevent, promote, and protect the citizens of the state.***

### **About WPHA:**

The Wisconsin Public Health Association is the largest statewide association of public health professionals in Wisconsin. Established in 1948, WPHA exists to improve, promote and protect health in Wisconsin. WPHA strives to be diverse in its constituency, rich in partnerships and valued for its policy recommendations and best practices. WPHA is the collective voice for public health in Wisconsin.

### **About WALHDAB:**

The Wisconsin Association of Local Health Departments and Boards is the statewide leader and voice for local governmental public health. WALHDAB was founded in 1991 to serve local health departments and boards of health.



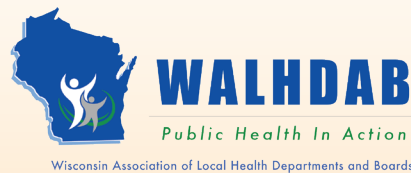
# BUILDING BRIDGES

● Policy ● Systems ● Environment  
***Changes in Action***

## 2019 Annual Public Health Conference

May 21-23, 2019  
Glacier Canyon Lodge, Wilderness Resort  
Wisconsin Dells, WI

Register by March 29 to save!





# 2019 WPHA-WALHDAB Annual Conference

## *Building Bridges: Policy, Systems and Environmental Change in Action*

Today in Wisconsin and across the country, so much seems to be dividing us, from political parties to institutional racism to generational differences to geography. In public health, we also see a gap between direct services and the policies, systems, and environments that profoundly impact our ability to deliver effective programs and engage in evidence-based as well as innovative practices to optimize health. Without addressing the broader structural and systemic barriers to health, we risk leaving opportunities on the table to better serve our local communities, our state, and beyond. By building bridges among ourselves as public health professionals and across our work at all levels and throughout all sectors that impact health, we will increase our capacity to create sustainable and systematic changes to further improve health outcomes now and for years to come.

- Determine our role in changing policies at multiple levels to eliminate barriers and create opportunities for optimal health.
- Analyze how systems affect health and examine our role in fostering system changes to achieve health equity.
- Expand our role in advancing changes to the economic, social and physical environment to promote health.

### Intended Audience

The program is designed for all public health professionals and students of public health, including nursing, administration, health education, environmental health, preparedness, epidemiology, and other fields from the local, state and national levels. Attendees from a variety of audiences including state and local health departments, boards of health, community-based organizations, advocacy organizations, health care organizations, colleges, and universities are welcome.

### More Information

For additional details regarding the conference, please visit the WPHA website at [www.wpha.org](http://www.wpha.org).

### CHES Credits

Application has been made to the National Commission for Health Education Credentialing, Inc. (NCHEC) for CHES Category 1 continuing education contact hours (CECH).

### Certified Public Health Credits

12.25 CPH continuing education credits are available for this conference.

## Lodging & Registration Information

### Glacier Canyon Lodge – Wilderness Resort – Wisconsin Dells, WI

Book early as the hotel is projecting to sell out! Rooms are available at the Glacier Canyon Lodge at the special group rate of \$99 (State Per Diem Rate). To guarantee this rate, and ensure rooms will be available, reservations must be made by April 19, 2019. To make a reservation, please call 800-867-WILD. When making your reservation, tell the reservation agent that you are booking a room under WI Public Health Association - reservation #649971.

### Registration Policies

Registration fee includes plenary and breakout sessions, reception, conference materials, breaks, breakfast and lunch on both days of the conference. Only one registration per form. You may copy the form as needed, or download from the WPHA website at [www.wpha.org](http://www.wpha.org). **Registration must be received by April 19, 2019**, to be guaranteed conference materials. Please keep a copy of your registration form for your records.

### Cancellation Policy

All cancellations must be received by April 19, 2019. A \$25 administrative fee will be deducted from your refund. No refunds will be made for cancellations received after April 19, 2019. Refunds will not be given for no-shows.

### Tax Identification Number

WPHA's Tax ID number is 39-6084243.





## Conference Special Events and Activities

### Early Career Professional Section – Welcome Event – Tuesday, May 21 · 9:30 a.m. -12:00 p.m.

#### Who should attend?

- Public health professionals who have worked in public health for less than ten years.
- Early career professionals looking to make lasting connections with peers.
- Early career professionals looking to become more involved in WPHA.

### Business Meetings

#### WPHA, Tuesday, May 21 · 12:00-1:00 p.m. / WALHDAB, Wednesday, May 22 · 4:00-4:45 p.m.

Please make plans to join us to learn more about current Association activities. Lunch will be provided at the WPHA Business Meeting complimentary for members and \$15 for non-members that would like to join.

### Student Meet and Greet

#### Wednesday, May 22 · 4:00-5:00 p.m.

The Annual Public Health Conference can be a busy time and amid the constant rush of sessions and snacks getting to know other students can be difficult. The WPHA Student Section is pleased to take some time to welcome our student members for a brief, informal **Meet and Greet** prior to the Poster Gallery and Reception. Meet with other students to network and get to know your future public health colleagues. Use this time to get to make some connections and even try out your talking points for your poster presentation prior to sharing details with other conference attendees.

### Public Health Poster Gallery and Reception

#### Wednesday, May 22 · 5:00-7:00 p.m.

Poster presenters will be available to discuss their posters as well as answer questions during the reception May 22.

### Friends of Public Health Bucket Raffle

#### Tuesday, May 21 & Wednesday, May 22

We are looking for donations from all members as well as anyone else who may be interested in making a donation. Our goal is to raise \$1500 for Friends of Public Health. Donations should be in the \$25-\$100 range. Donations can be brought to the conference. Past donations have included gift baskets of chocolates, wine, various beers, etc.

#### Please provide the WPHA office with the following by April 19, 2019:

1. A short description of what you will donate
2. The total value of your donation
3. Contact name and information

# Conference Schedule At-A-Glance

*\*Schedule is subject to change.*

## Tuesday, May 21

9:00 a.m.–7:00 p.m.	Conference Registration
9:30 a.m. –12:00 p.m.	Early Career Professionals Welcome Event
11:30 a.m.–1:00 p.m.	Lunch and WPHA Business Meeting - Lunch will be available starting at 11:30 a.m.
1:30–5:00 p.m.	Pre-Conference Sessions

## Wednesday, May 22

7:00–8:30 a.m.	Continental Breakfast & Exhibits
8:30–9:00 a.m.	Conference Welcome & Award Presentations
9:00–10:00 a.m.	Keynote
10:00–10:15 a.m.	Break to Visit Exhibits
10:15–10:45 a.m.	Breakout Presentations - Block 1
10:45–11:00 a.m.	Break to Visit Exhibits
11:00–11:45 a.m.	Breakout Presentations - Block 2
11:45 a.m.–12:00 p.m.	Grab and Go Lunch Available
12:00–1:00 p.m.	Section and Committee Meetings
1:00–1:15 p.m.	Break to Visit Exhibits
1:15–2:15 p.m.	Breakout Presentations - Block 3
2:15–2:45 p.m.	Break to Visit Exhibits
2:45–3:45 p.m.	Breakout Presentations - Block 4
4:00–4:45 p.m.	WALHDAB Business Meeting
4:00–5:00 p.m.	Student Meet and Greet
5:00–7:00 p.m.	Poster Reception

***Not a member of a section or committee, don't worry.*** You are welcome to attend a meeting as a new section member or you use this time to network with vendors and other attendees.

## Thursday, May 23

7:00–8:00 a.m.	Continental Breakfast, Exhibits and Poster Gallery
8:00–8:30 a.m.	Morning Welcome & Award Presentations
8:30–9:30 a.m.	Keynote
9:30–10:00 a.m.	Break to Visit Exhibits
10:00–11:00 a.m.	Breakout Presentations - Block 5
11:00–11:15 a.m.	Break to Visit Exhibits
11:15 a.m.–12:15 p.m.	Breakout Presentations - Block 6
12:15–1:00 p.m.	Lunch and Award Presentations
1:00–2:00 p.m.	Keynote
2:00 p.m.	Closing Announcements and Final Awards

## Keynote Speakers

More information available at [www.wpha.org](http://www.wpha.org).

May 22 | 9:00-10:00 a.m.



**JACQUELINE PATTERSON** | *NAACP Environmental and Climate Justice Program*

Jacqueline Patterson is the Director of the NAACP Environmental and Climate Justice Program. Since 2007 Patterson has served as coordinator co-founder of Women of Color United. Jacqui Patterson has worked as a researcher, program manager, coordinator, advocate and activist working on women's rights, violence against women, HIV&AIDS, racial justice, economic justice, and environmental and climate justice. Patterson served as a Senior Women's Rights Policy Analyst for ActionAid where she integrated a women's rights lens for the issues of food rights, macroeconomics, and climate change as well as the intersection of violence against women and HIV AIDS. Previously, she served as Assistant Vice-President of HIV/AIDS Programs for IMA World Health providing management and technical assistance to medical facilities and programs in 23 countries in Africa and the Caribbean. Patterson served as the Outreach Project Associate for the Center on Budget and Policy Priorities, and Research Coordinator for Johns Hopkins University. She also served as a U.S. Peace Corps Volunteer in Jamaica, West Indies.

Patterson holds a master's degree in social work from the University of Maryland and a master's degree in public health from Johns Hopkins University. She currently serves on the International Committee of the US Social Forum, the Steering Committee for Interfaith Moral Action on Climate, Advisory Board for Center for Earth Ethics as well as on the Boards of Directors for the Institute of the Black World, Center for Story Based Strategy and the US Climate Action Network.

May 23 | 8:30-9:30 a.m.



**GLYNIS SHEA** | *University of Minnesota, Medical School, Department of Pediatrics*

Glynis Shea is the Communications Director for the Konopka Institute for Best Practices in Adolescent Health and the Healthy Youth Development • Prevention Research Center at the University of Minnesota.

As a former Vice President at Saatchi & Saatchi Advertising San Francisco, Ms. Shea crafted communication plans and advertising strategies, fielded national market research efforts, and managed the production of TV, print, and radio advertising. Her client list included Hewlett-Packard, US West, and the Blue Diamond Almond Growers.

At the University of Minnesota, Ms. Shea collaborates with a host of youth-serving professionals and students. Her expertise is used to translate scholarly literature, develop communications strategies, and create publications, reports, web sites, newsletters, and fact sheets. She is a nationally recognized speaker and trainer. Her workshops focus on effectively communicating about young people and the resources required to support their well-being and health.

May 23 | 1:00-2:00 p.m.



**KIRK HARRIS** | *Urban Planning, University of Wisconsin – Milwaukee*

Dr. Kirk E. Harris is a faculty member in the Department of Urban Planning, in the School of Architecture and Urban Planning at the University of Wisconsin at Milwaukee. Dr. Harris' academic interests are focused on racial and economic equity, the pedagogy of social justice, constitutional issues in planning law and mediation and negotiation. Dr. Harris leads a research, practice and policy initiative in Chicago, Fathers, Families and Healthy Communities (FFHC). This family strengthening and community development initiative seeks to support and promote the engagement of low-income African-American fathers in the lives of their children, families and communities.

Over the course of his career, Dr. Harris has sought to aggressively advance policies that more effectively support vulnerable families and communities. For four years, Dr. Harris served as the national facilitator for the National Fatherhood Leaders Group, a consortium of the country's leading fatherhood organizations. In addition to that role, Dr. Harris worked closely with White House staff of the Obama administration and other national leaders on issues related to fathers and family strengthening. Dr. Harris has also testified before Congress on the intersecting issues of poverty, family strengthening and community development. Dr. Harris is a proponent of youth development. For his leadership in that area, The Wisconsin Daily Reporter named Dr. Harris Architectural Leader and Newsmaker of the Year for his groundbreaking work related to the development of a charter public high school focused on serving vulnerable urban youth.

Dr. Harris possesses a Bachelor's of Arts degree from Rutgers University, a Master of Public Administration degree from the Martin School of Public Policy and Public Administration at the University of Kentucky, a Juris Doctor degree from Thomas Jefferson Law School and a Ph.D. from Cornell University. Dr. Harris is also a member of the Georgia, Washington, DC and US Supreme Court Bars.

# Pre-Conference Sessions - Tuesday, May 21 • 1:30-5:00 p.m.

More details available at [www.wpha.org](http://www.wpha.org).

## Pre-Conference 1: Systems Thinking to Foster System Changes and Address Health Equity

*Maureen Busalacchi-Advancing a Healthier Wisconsin Endowment | Tracy Wilson-Advancing a Healthier Wisconsin Endowment  
Christina Ellis-Advancing a Healthier Wisconsin Endowment*

### Presentation Summary:

To successfully improve population-level health and health equity, many in public health have turned to policy, systems and environmental (PSE) change approaches as a sustainable way to effectively improve health and achieve greater impact. PSE change efforts make healthy choices practical and available to all community members, break down silos to make our work more efficient and effective, and allow us to look upstream to address root causes to improve the environments where our community members live, work, learn, play and receive health care. However, implementing an effective PSE change effort is challenging.

During this session, participants will learn about a systems thinking framework and a diverse set of tools to apply systems thinking skills to create change and improve community health. The session will include interactive activities to gain hands-on experience with a variety of tools and resources and discussion time to engage in peer-learning with other attendees. Participants can expect to leave the session having built on their existing systems change experience and skills and access to resources and tools to share with colleagues and partners to enhance their systems change efforts to improve the health of their communities.

### Objectives:

1. Build confidence to apply systems thinking to community health improvement and community change efforts.
2. Explore tools and resources to incorporate systems thinking into collaborative community health work.
3. Obtain models, examples, resources, and interactive activities to share with colleagues, partners, and coalitions to collectively engage in systems thinking and systems change work.

## Pre-Conference 2: Coalition Building Strategies for Policy Change

*Darcie Warren-American Lung Association | Carleigh Olson-UW-Population Health Institute | Amanda Dederich-Wisconsin Department of Health Services | Sandy Bernier-Fond du Lac County Health Department*

### Presentation Summary:

A team of Wisconsin-based tobacco control partners will share coalition-building tools that have built the foundation for policy change in local municipalities and statewide. Some of these coalition-building tools include community organizing strategies that are crosscutting competencies valuable to many tobacco control professionals who may not have experience or education in this area. Presenters will detail strategic planning and implementation steps to strengthen a coalition. Specifically, presenters will address: assessing and auditing current membership (engagement pyramid), mapping coalition members' networks in relation to decision makers (circles of influence), identifying opportunities to grow, prioritizing secondary targets to build the coalition, the 1-on-1 recruitment or engagement meeting, and developing tracking systems for volunteer engagement. The audience will leave ready to put these community organizing tools into practice and build their capacity for policy change.

### Objectives:

1. Recognize lobbying communication. Classify activities and communications as direct lobbying or grassroots lobbying, and identify effective, non-lobbying activities effective in coalition recruitment and engagement that influence policymakers.
2. Identify and explain concrete coalition building strategies and processes.
3. Execute strategic plan to strengthen your coalition to lead to strong policy.

## Pre-Conference 3: Bridging the Gap: Quality Improvement in Perinatal Public Health

*Kyle Mounts-Wisconsin Association for Perinatal Care | Nina Menda-(1) UnityPoint Health-Meriter NICU and (2) University of Wisconsin School of Medicine and Public Health, Department of Pediatrics, Division of Neonatology | Sue Kannenberg-Wisconsin Association for Perinatal Care/Perinatal Foundation*

### Presentation Summary:

How do you know when things could be better? How do you plan for improvement? How do you bridge the gap between reality and the ideal? In answering these questions, this interactive session will provide a foundation for understanding and applying quality improvement principles and strategies in perinatal public health. The process of quality improvement can serve as a bridge between stakeholders through a process of collaboration, systematic analysis of existing practices and outcomes, and identification and implementation of evidence-informed strategies focused on achieving ideal outcomes and equity.

*continued on next page...*



## Pre-Conference Sessions - Tuesday, May 21 • 1:30-5:00 p.m.

*More details available at [www.wpha.org](http://www.wpha.org).*

### *Pre-Conference 3: continued from previous page*

The speakers will describe tools and strategies for planning and applying a quality improvement framework to public health during the perinatal period, provide examples of successful approaches, and outline opportunities in Wisconsin to participate in collaborative quality improvement initiatives. In addition, participants will practice what they learn by applying quality improvement strategies with each other and the instructors. Finally, participants will hear about existing perinatal quality improvement efforts already underway in Wisconsin.

#### **Objectives:**

1. Describe a strategy for applying quality improvement in practice.
2. Describe the use of the PDSA cycle in quality improvement.



# Breakout Presentations – Block 1

## Wednesday, May 22 • 10:15-10:45 a.m.

### 1.1 Health in Planning: Considering Land Use Decisions on Social Isolation in contrast to Social Loneliness

*Sarah Reed-Winnebago County Public Health Department*

**Objectives:**

1. Describe the relationship between housing, land use, policy, and social/mental wellbeing in terms of social loneliness and social isolation.
2. Identify how land use decisions impact the quality and quantity/accessibility of individual social relationships regarding family, friends, and neighborhood ties.
3. Explain the role of public health organizations to create preventative measures through a multi-level response.

### 1.2 Client Discomfort with an Adverse Childhood Experiences Questionnaire

*Ross Gilbert-University of Wisconsin School of Medicine and Public Health, University of Wisconsin-Milwaukee*

**Objectives:**

1. Discuss the public health implications of childhood adversity.
2. Describe a gap between principles of trauma-informed care and their application into direct care settings.
3. Identify evidence in support of asking sensitive questions regarding childhood adversity in health and human service settings.
4. Describe the general implications of this research and describe an example of its application to a universal home visiting program in Racine County.

### 1.3 Communicating Nitrate Risks in Rock County: Making GIS Modeling Data Usable and Understandable

*Nick Zupan-Rock County Public Health*

**Objectives:**

1. Identify the methods used to construct the nitrate risk assessment tool in Rock County.
2. Describe strategies for creating a publicly accessible data platform like ArcGIS online.
3. Discuss communication techniques for communicating environmental health risks.

### 1.4 Stressful-life Events Among African-American Breast Cancer Survivors and Their Influence on Weight Loss During a Behavioral Intervention

*Jamila Kwarteng-Medical College of Wisconsin*

**Objectives:**

1. Describe the influence of stressful life events on weight-loss during a weight-loss intervention for African American Breast Cancer Survivors.
2. Explain differences in weight-loss for intervention participants by the number of stressful life events.

### 1.5 Bike Day - Community Health in Motion

*Holly Nannis-Sixteenth Street Community Health Centers*

**Objectives:**

1. Discuss the timeline and stages to plan, collaborate, coordinate and implement a community event that complements the social change and community engagement model supporting healthy lifestyles.
2. Describe the results of a Sixteenth Street Bike Day evaluation survey informing the impact of such an event on the commitment to lifestyle changes.
3. Identify partnership enhancements to participation in the Sixteenth Street Bike Day event.

### 1.6 Public Affairs Legislative Priority Session - Early Childhood Education

More details coming soon!





## Breakout Presentations – Block 2

### Wednesday, May 22 • 11:00-11:45 a.m.

#### 2.1 Working Across Government to Create Local PSE Change: Conducting a Rapid Health Impact Assessment (HIA) on a Low-Income Senior Housing Development

*Niki Euhardy-Wood County Health Department | Madelin Petz-City of Wisconsin Rapids*

**Objectives:**

1. Review the Rapid Health Impact Assessment process.
2. Identify how to plan and implement a community input workshop to support community participation, enhance transparency in government processes, and ensure plans, policies, and projects have diverse perspectives involved in the decision-making process.
3. Discuss how the City of Wisconsin Rapids and Wood County Health Department partnered to create an HIA matrix tool to ensure health is systematically considered in future policies, plans, and projects.

#### 2.2 Public Health 3.0: Do You Have What it Takes to be a Chief Health Strategist?

*Terry Brandenburg-Medical College of Wisconsin | Barbara Duerst-University of Wisconsin - Madison | Kim Contardi-Medical College of Wisconsin*

**Objectives:**

1. Describe the role and function of the Chief Health Strategist.
2. Identify competencies, tools, and methodologies for self-assessment of capacity to perform as a Chief Health Strategist.
3. Learn and apply strategies from peers toward becoming an effective Chief Health Strategist within their jurisdiction.

#### 2.3 One Wisconsin City's Exploration of Community Health Worker Impact on Chronic Disease Prevention

*Morgan Krhin-Wisconsin Population Health Institute | Lena Swander-Wisconsin Division of Public Health*

**Objectives:**

1. Identify successful elements of CHW-engaged interventions to improve social determinants of health and health outcomes.
2. Discuss the Pathways Community HUB Model and the ways in which Community Health Workers collect data to track and measure the social determinants of health that impact health outcomes.
3. Explore ways in which CHW-led interventions impact policy, systems change, and environmental levels that contribute to health outcomes in Wisconsin.

#### 2.4 Building Bridges: Growing Children's Health through Youth Gardens and Wellness Policies

*Stefanie Bugasch Scopoline-Community GroundWorks and the Wisconsin School Garden Network*

**Objectives:**

1. Learn the importance of gardening-based education, how it connects to children's health, and can lead to better nutrition education.
2. Discuss the importance of wellness policies in school districts and how including school garden language can increase the access to school gardens and nutrition education across the district.

#### 2.5 Building a School-Based Mental Health Consortium in Marathon County

*Hannah Schommer-Marathon County Health Department*

**Objectives:**

1. Describe how the Marathon County School-Based Counseling Consortium was developed, organized, and is implementing onsite mental health counseling services in schools.
2. Learn how onsite mental health counseling in schools is being evaluated.
3. Identify opportunities, resources, and barriers to developing a county-wide school-based mental health counseling initiative.

#### 2.6 Public Affairs Legislative Priority Session - Housing

More details coming soon!



## Breakout Presentations – Block 3

### Wednesday, May 22 • 1:15-2:15 p.m.

#### 3.1 Beyond Translation: Adapting Public Health Messages for Spanish-Speaking Audiences

*Dominic Ledesma-UW-Extension | Erin Agesen-UW-Extension*

**Objectives:**

1. List three reasons for ensuring that public health materials and campaigns designed for Limited English Proficiency (LEP) audiences are culturally responsive and linguistically appropriate.
2. List three strategies for adapting English language materials and campaigns for Spanish-speaking audiences.
3. Describe the process used by the FNV campaign in Wisconsin to ensure that the FNV campaign provided equal benefit to Spanish-speaking audiences.

#### 3.2 Using Partnerships to Increase Extreme Heat Preparedness in Milwaukee

*Colleen Moran-Wisconsin Department of Health Services | Megan Christenson-Wisconsin Department of Health Services | Bria Grant-UniteMKE | Nick Tomaro-City of Milwaukee Health Department*

**Objectives:**

1. Recognize how CASPER data can inform changes to policies, procedures and communication practices.
2. Assess how building partnerships with community partners can bridge the divide between state-level public health programs and local needs.
3. Understand how the CASPER methodology can be used to assess household vulnerabilities.

#### 3.3 The Wisconsin Health Atlas: Local Data for Action

*Hilary Joyner-UW-Madison Obesity Prevention Initiative | Lisa Charron-UW-Madison Obesity Prevention Initiative*

**Objectives:**

1. Access and utilize resources available through the Wisconsin Health Atlas, including local data and guides for creating change in policies, systems, and environments.
2. Identify at least one way they can use the current features of the Wisconsin Health Atlas in their work.
3. Identify future directions for the Wisconsin Health Atlas, including data needs and user features.

#### 3.4 Improved Public Health Service Delivery Through Collaboration: The Story of Greenfield, Wisconsin

*Darren Rausch-Greenfield Health Department | Megan Noggle-Greenfield Health Department | Daniel Weber-Greenfield Fire Department*

**Objectives:**

1. Outline the current scope of public health practice, including Public Health 3.0.
2. Describe bridges built within the City of Greenfield to increase cooperation and public health service delivery within the community.
3. Identify opportunities for collaborative engagement within your community for public health service delivery.

#### 3.5 Taking the Temperature of Sexual Violence Prevention Efforts in Wisconsin: Results of the RPE Needs Assessment

*Kara Mathewson-Wisconsin Department of Health Services | Mariah Geiger-Wisconsin Department of Health Services*

**Objectives:**

1. Learn about the cultural environment surrounding sexual violence and prevention in Wisconsin.
2. Discuss how economic, social, and physical environmental factors influence sexual violence prevention.
3. Share best practices and lessons learned for involving community voice, especially youth, in the RPE grant planning process.

#### 3.6 Public Affairs Legislative Priority Session - Income Stability

More details coming soon!



# Breakout Presentations – Block 4

## Wednesday, May 22 • 2:45-3:45 p.m.

### 4.1 Understanding Injection Drug Use in Rural Wisconsin: Early Experiences from a Multi-site National Study

*Sarah Krechel-AIDS Resource Center of Wisconsin | Ryan Westergaard-University of Wisconsin-Madison, Department of Medicine*

#### Objectives:

1. Describe demographics associated with injection drug use in our sample.
2. Describe the risk of Hepatitis C, HIV, and syphilis in this subpopulation.
3. Identify the barriers to essential services for people who inject drugs in rural WI using survey and qualitative data.
4. Identify community partners to engage in change to improve the healthcare and service access for PWID in rural WI.
5. Describe evidence-based models for prevention services for PWID in rural WI.

### 4.2 Poverty, Food Insecurity and Health: Indicators of Health and Social Needs at Friedens Food Pantry

*Geeta Wadhvani-Children's Health Alliance of Wisconsin | Catherine Draeger-Peterson-Friedens Community Ministries | Matthew Weber-Medical College of Wisconsin | David Nelson-Medical College of Wisconsin*

#### Objectives:

1. Describe a qualitative methodology to evaluate the feasibility of data collection in a community-based food pantry setting.
2. Describe the indicators identified and methods utilized to develop a survey tool that can assess the health status of populations seeking food assistance.
3. Discuss Frieden's role in assessing the health of the populations they serve.

### 4.3 Building Bridges Between Data and Action: A Look at Local Strategies for Addressing Environmental Health Topics

*Christy Vogt-Wisconsin Department of Health Services | Jenny Camponeschi-Wisconsin Department of Health Services | Megan Christenson-Wisconsin Department of Health Services | Meredith Mueller-Wisconsin Department of Health Services*

#### Objectives:

1. List three lessons learned from panelists for bridging the gap between environmental public health data and public health action.
2. Describe two ways to incorporate recommendations from panelists into their own community projects.
3. List three resources for developing and implementing local environmental health projects.

### 4.4 Using a Customer Relationship Management (CRM) System as a Tool For Data Collection, Demonstrating Value of Partnerships, and Equitable Outreach

*Martin Brubaker-University of Wisconsin-Madison | Robert Fontella-healthTIDE | Jari Xiong-healthTIDE | Charles Rojas-Population Health Institute*

#### Objectives:

1. Identify the potential uses of customer relationship management tools.
2. Gain understanding on the process of implementation and barriers to using a CRM as a small public health team.
3. Understand how a CRM can be used to document outreach, illustrate progress toward evaluation goals, and be used as a tool for equitable outreach.

### 4.5 A Contextual Model of Suicide for Suicide Prevention

*Sara Kohlbeck-Comprehensive Injury Center at the Medical College of Wisconsin*

#### Objectives:

1. Discuss the biopsychosocial aspects of suicide.
2. Understand how suicide is an embodiment of injustice.
3. Articulate a context-based model for suicide.
4. Consider policy, systems, and environment-based strategies for suicide prevention.

### 4.6 Public Affairs Legislative Priority Session - Criminal Justice Reform

More details coming soon!

# Breakout Presentations – Block 5

Thursday, May 23 • 10:00-11:00 a.m.

## 5.1 Practitioner Tools for Pursuing Policy Change that Addresses the Social and Economic Factors Influencing Health

*Justin Rivas-County Health Rankings & Roadmaps | Karen Odegaard-County Health Rankings & Roadmaps*

### Objectives:

1. Discuss new County Health Rankings action resources and evidence products for pursuing policy, systems and environment change.
2. Gain policy change fundamentals through a skills-building workshop that utilizes the new CHR&R policy change module product.
3. Learn specific guidance and strategies for local application that use systems and environment approaches for improving social and economic opportunities.

## 5.2 Building Bridges Between Services, Sectors, and Families: A Strengths-Based Approach to Preventing Child Maltreatment

*Sandra Bogar-Medical College of Wisconsin | Ron Rogers-Kenosha County | Rebecca Mather-Wisconsin Child Abuse and Neglect Prevention Board | Alison Zinnen-Prevention Services Network*

### Objectives:

1. Illustrate how a multi-sector collaboration is working towards systems change by embedding a strengths-based approach to addressing child maltreatment in their public health workforce.
2. Evaluate compliance to the strength-based framework through discussion of County contracts, pre and post knowledge and intentions surveys, and website transformations.

## 5.3 Bringing the Immunization Neighborhood Together, Showcasing Evaluation Plans of a Project to Decrease Barriers to Immunization Provision in Community Pharmacies

*Sarah Sorum-Pharmacy Society of Wisconsin | Rebecca Bernstein-Medical College of Wisconsin | Kenneth Schellhase, Children's Community Health Plan | Paul Hunter-City of Milwaukee Health Department*

### Objectives:

1. Describe the evaluation plan of a statewide effort, funded by Advancing a Healthier Wisconsin, to expand immunization provision in Wisconsin community pharmacies.
2. Discuss baseline data on immunization location from the Wisconsin Immunization Registry (WIR), including factors that drive pharmacy or non-pharmacy immunization location.
3. Share survey data on pharmacist-identified barriers/attitudes towards immunization and healthcare provider perceptions about pharmacists' roles in vaccination.

## 5.4 Building Power and Trust: Youth-Led Dialogues to Learn from Youth of Color

*Lynnsey Erickson-Winnebago County Health Department | Corey Sagehorn-Winnebago County Health Department | Marijke van Roojen-Fit Oshkosh, Inc., Because Race Matters | Caprice Swanks-Oshkosh West High School*

### Objectives:

1. Explore how to build trust and meaningful relationships with people and groups directly impacted by health policy.
2. Articulate the importance of authentic stakeholder engagement in research design and development.
3. Identify the benefits and challenges of holding community conversations that are led by and centered around Youth of Color.

## 5.5 Perceptions About Cigarettes Among Disparate Populations in Wisconsin

*Jeffrey Engelmann-Medical College of Wisconsin | Lorraine Lathen-Wisconsin African American Tobacco Prevention Network | Anneke Mohr-City of Milwaukee Tobacco-Free Alliance*

### Objectives:

1. Discuss the history behind targeted marketing of mentholated cigarettes to African Americans, Hispanics, youth, and the LGBT community.
2. Identify perceptions of menthol tobacco use among African Americans, Hispanics, youth and the LGBT community living in greater Milwaukee.

## Breakout Presentations – Block 5 continued...

### 5.5 Perceptions About Cigarettes Among Disparate Populations in Wisconsin continued...

**Objectives:**

3. Learn how the tobacco industry has applied the 4 Ps of social marketing to capture low income persons of color and how they have extended these same practices to appeal to the LGBT community and youth populations.
4. Explore policy options and initiatives to reduce Milwaukee's tobacco burden in disparate populations.

### 5.6 Community-Led Systems Change Approaches to Support Health Outcomes for Formerly Incarcerated Populations

Geoffrey R. Swain, MD, MPH, Department of Family Medicine & Community Health, University of Wisconsin School of Medicine and Public Health | Courtney Saxler, MPH-Wisconsin Partnership Program | Andrea Dearlove-University of Wisconsin Population Health Institute | David Liners-WISDOM | Catoya Roberts-WISDOM | Sarah Ferber-WISDOM | Victoria Faust-University of Wisconsin Population Health Institute | Melissa Ludin-WISDOM | Jerome Dillard-WISDOM

**Objectives:**

1. Discuss how the collaborations among the community-led organizations and a statewide health equity funder seek to impact the broader structural and systemic barriers to health.
2. Identify how these groups are looking to engage local health departments and what local health departments can do to engage in this work.
3. Recognize how these initiatives, led by the communities most impacted and supported by public health funders, researchers, and practitioners, are both addressing policies that affect health and addressing systems that impact health.

## Breakout Presentations – Block 6

Thursday, May 23 • 11:15 a.m.-12:15 p.m.

### 6.1 Shifting the Power: How Public Health Madison & Dane County is making their CHA/CHIP a Truly Community-Owned Process

*Nina Gregerson-Public Health Madison & Dane County | Sarah Hughes-Public Health Madison & Dane County | Brittany Grogan-Public Health Madison & Dane County*

**Objectives:**

1. Describe how to use the CHA/CHIP and MAPP framework in a holistic way to identify and prioritize health issues.
2. Understand the utility of recruiting steering committee members who will elevate the voices of communities most affected by health inequities.
3. Apply health equity principles to CHA/CHIP processes.
4. Learn unique ways to engage community.
5. Use quantitative data in innovative ways to prioritize root causes.

### 6.2 Supporting a Healthy School Community through Direct Education and PSE Change

*Danielle Nabak-UW-Extension Milwaukee County | Francie Dekker-UW-Extension Milwaukee County*

**Objectives:**

1. Discuss the role of UW-Extension Milwaukee County FoodWise in supporting healthy schools.
2. Identify how direct nutrition education programming and PSE change can complement each other in a school setting.
3. Describe how to build a strong school wellness policy through assessment and community engagement.
4. Identify what resources exist to assist schools in developing healthy environments.



## Breakout Presentations – Block 6 continued...

### 6.3 Alcohol Policy for Public Health Professionals

*Julia Sherman-Wisconsin Alcohol Policy Project*

**Objectives:**

1. Discuss how to move beyond drunk driving, and why alcohol issues are public health issues.
2. Identify how to view alcohol policy as a system with local health and safety consequences.
3. Recognize the specific factors that create our hostile alcohol environment.
4. Distinguish how public health professionals identify alcohol-related problems and select evidence-based placing alcohol policy within the community health and safety system.
5. Characterize the role of the alcohol industry in alcohol policy development or change.

### 6.4 Using PRAMS Data to Measure Social Determinants of Health and Evaluate Policy Effects

*Fiona Weeks-Wisconsin Department of Health Services | Kara Mathewson-Wisconsin Department of Health Services*

**Objectives:**

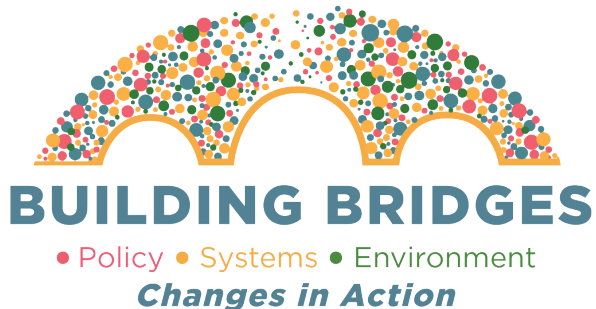
1. Discuss prevalence estimates of social risk and protective factors among Wisconsin mothers of infants.
2. Learn how PRAMS data highlights the importance of social determinants and how this data can be leveraged to inform policies and programs.

### 6.5 Engaging Residents in Tactical Urbanism to make a Crosswalk “Pop”

*Paige Swanson-HealthCorps member serving with re:TH!NK | Tyler DeBruin-East Central WI Regional Planning Commission*

**Objectives:**

1. Identify what a pop-up demonstration project is and what resources are needed to conduct a pop-up demonstration in your community.
2. Discuss why getting community members involved in the planning and implementing is crucial to a pop-up demonstration project's success.
3. Determine how a pop-up demonstration project can lead to improvements in the built environment.



# 2019 Annual Public Health Conference

May 21-23, 2019  
 Glacier Canyon Lodge, Wilderness Resort  
 Wisconsin Dells, WI

## WPHA-WALHDAB 2019 Annual Conference Registration

Name (preferred for badge): \_\_\_\_\_  
 Employer/School: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a first-time attendee? We will follow-up with extra event details.

### Session Selections:

Please circle your preferred session(s). Session information is available at [www.wpha.org](http://www.wpha.org).

<b>Welcome Event</b>	May 21	9:30am-12:00 p.m.	<input type="checkbox"/> Check here if you will be attending the ECP Welcome Event					
<b>Lunch</b>		11:30-1:00 p.m.	<input type="checkbox"/> Check here if you will be attending the Lunch Business Meeting <small>Note: \$15 non-member lunch ticket applies.</small>					
<b>Pre-Conference</b>		1:30-5:00 p.m.	1. Systems Thinking		3. Coalition Building		2. Quality Improvement	
<b>Breakouts</b>	May 22	10:15 a.m.	1.1	1.2	1.3	1.4	1.5	1.6
		11:00 a.m.	2.1	2.2	2.3	2.4	2.5	2.6
		1:15 p.m.	3.1	3.2	3.3	3.4	3.5	3.6
		2:45 p.m.	4.1	4.2	4.3	4.4	4.5	4.6
	May 23	10:00 a.m.	5.1	5.2	5.3	5.4	5.5	
		11:15 a.m.	6.1	6.2	6.3	6.4	6.5	

*Attendees are not required to attend based on their selections, nor will attendees be guaranteed space based on the information provided.*

Additional options and payment information on next page.

# WPHA-WALHDAB 2019 Annual Conference Registration

Glacier Canyon Lodge, Wilderness Resort • Wisconsin Dells, WI - May 21-23, 2019

Early bird deadline March 29, 2019.

<b>REGISTRATION FEES</b> Check all the appropriate registration fees.	<b>Pre-Conference ONLY</b> May 21 • 1:30-5:00 p.m.	<b>Full Conference</b> (Pre-Conference included) May 22-23 Early Bird Pricing/Regular Pricing	<b>One-Day Conference Pass</b> <input type="checkbox"/> May 22 or <input type="checkbox"/> May 23 Regular Pricing
<b>Member</b> Are you a <input type="checkbox"/> WPHA Member or <input type="checkbox"/> WALHDAB Member?	\$50	\$250/\$300	\$175
<b>Non-member</b> <input type="checkbox"/> Check here to add \$15 Tuesday Business Meeting Lunch Ticket.	\$100	\$400/\$450	\$325
<b>Retired/Student Member</b> <input type="checkbox"/> I am registering as a <input type="checkbox"/> Retired Member or <input type="checkbox"/> Student Member	\$25	\$75/\$125	\$75

Check here if you require a vegetarian lunch or have another dietary restriction.

Please explain: \_\_\_\_\_

Check here if you have special needs (i.e. physical). WPHA will contact you.

## Method Of Payment

(Payment or purchase order must be included at the time of registration.)

Total \$ \_\_\_\_\_

Check (made payable to WPHA or WALHDAB depending on membership status)

Check #: \_\_\_\_\_ for \$ \_\_\_\_\_ Purchase Order # \_\_\_\_\_ for \$ \_\_\_\_\_

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Return this form with payment by April 19, 2019 to:

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# Glossary of Terms for Marijuana, Concentrates, and THC Extractions

Definitions written by Officer Jermaine Galloway, [www.tallcopsaystop.com](http://www.tallcopsaystop.com)

Modified by Judy Burrows, March 20, 2019

## **Basic terms:**

**Marijuana:** a greenishgray mixture of the dried leaves, flowers, stems, and/or seeds of the hemp plant, *Cannabis sativa*, *cannabis indica*, and *cannabis ruderalis*. Marijuana is used by smoking, eating, drinking, inhaling the vapors and applying to the skin. Also known as *weed*, *pot*, *herb*, *pot*, *grass*, *bud*, *ganga*, *MaryJane*, *chronic*, *dope*, and *hydym* among many other slang terms.

**Cannabinoids:** The chemical compounds unique to cannabis. There are over 200 known cannabinoids, THC being the primary and most wellknown.

**THC (Delta9tetrahydrocannabinol):** the mindaltering chemical contained in the cannabis sativa plant. This is the chemical that gets users high.

**CBD (Cannabidiol):** A cannabinoid associated with the medical marijuana community. It is less popular for recreational users because it is not intoxicating. CBD is currently being researched to learn more about its properties.

**Potency:** The percentage of THC in a given sample of marijuana. It is widely acknowledged that potency is difficult to calculate due many variations of the cannabis sativa plant as well as how it is grown and harvested varies greatly. Most experts agree that THC potency has risen over the last few decades, now approaching up to 30%. Marijuana concentrates contain even higher levels of THC that could range from 40% to 80%.

**Flower/Bud:** The actual flower of the marijuana plant that is harvested and used for the creation of marijuana products. *Flower* has also been referred to as the "old fashioned" way of smoking marijuana as opposed to use of concentrates.

## **Other forms of marijuana**

**Marijuana concentrates:** a highly potent THS concentrated mass that is extracted from the marijuana plant, most commonly similar in appearance to honey or butter. (It is known on the street as *honey oil* or *budder*. Also known as *THC Extractions* or *Marijuana Extracts*.)

**Butane Hash Oil (BHO):** a highly potent concentrate of cannabinoids made by dissolving marijuana in plant form in a solvent (usually butane). The resulting product is also referred to as *budder*, *honey oil dabs*, or *shatter*, depending on how it is manufactured. BHO has a very high THC potency. The use of butane in extraction of BHO is cause for safety concerns as it is highly flammable and has resulted in violent explosions.

**Wax:** A common name for marijuana concentrates. It is a softer, opaque oil that has lost its transparency through the extraction process. Depending on the method used to extract it waxes may take on varying consistencies. Waxes tend to be harder, nontransparent oils. *Budder* and *honeycomb* are considered version of wax.

**Budder/Honey/Honey Oil:** Slang terms used to describe marijuana extracts using butane. It is waxy in appearance, like honey or butter.

**Shatter:** A brittle form of BHO. It has the look of transparent amber glass and has a reputation for being the purest and cleanest type of extract.

**Edibles:** The term for marijuana that is ingested by mouth. Any edible food or drink that has been infused with cannabis extracts. Baked goods are the most common form of edible, but additional forms include flavored coffee drinks, breads, and candies, among others. Marijuana infused butters or oils are also sold for individuals to make their own edibles.

**Medibles:** A term for edibles that are sold as "medical", though the product is the same thing as edibles.

#### **Methods of use:**

**Dabbing:** The practice of smoking the THCrich extracts of the marijuana plant, in the form of oils, waxes, or shatter, all of which contain extremely large amounts of THC. The extracts are usually prepared with butane (lighter fluid).

**Tincture:** A liquid preparation of marijuana (extract or plantbased) made with alcohol and usually dispensed using a dropper under the tongue.

**Topical:** A preparation of cannabis that has been added to a product, such as lotion or a cream and applied to the skin.

**Vaporizer:** A smoking device used to consume marijuana or tobacco products by heating the oils and creating a vapor for the user to inhale. There are three components to vaporizers: the cartridge which holds the concentrate, a heating device, and a power source (usually a battery). Vaporizers can be used to disguise marijuana use, as it is more difficult to detect. Users believe this method to be safer than smoking, though there has not been research to support that belief.



# NATIONAL MEDICAL ASSOCIATIONS - POSITIONS ON MEDICAL MARIJUANA

REVISED 3-22-2019

## WHAT IS THE POSITION OF ON MEDICAL MARIJUANA?

- **The American Academy of Pediatrics (AAP)** the Academy reaffirms its position against the legalization of marijuana, states its opposition to “medical marijuana” outside the FDA regulatory process, and presents recommendations to protect children in states that have legalized marijuana for medical or recreational purposes. (January 2015)
- **The American Medical Association (AMA)** “Our AMA urges that marijuana’s status as a federal Schedule I controlled substance be reviewed with the goal of facilitating the conduct of clinical research and development of cannabinoid-based medicines, and alternate delivery methods. This should not be viewed as an endorsement of state-based medical cannabis programs, the legalization of marijuana, or that scientific evidence on the therapeutic use of cannabis meets the current standards for a prescription drug product.” (House of Delegates, November 2013)
- **American Academy of Family Physicians (AAFP):** “The AAFP recognizes that there is support for the medical use of marijuana but advocates that usage be based on high quality, patient-centered, evidence-based research and advocates for further studies into the use of medical marijuana and related compounds. The AAFP requests that the Food and Drug Administration change marijuana’s classification for the purpose of facilitating clinical research. This process should also ensure that funding be available for such research. The AAFP also recognizes that some states have passed laws approving the medical use of marijuana; the AAFP does not endorse such laws. The AAFP encourages its members to be knowledgeable of the laws of their states and consult with their state medical boards for guidance regarding the use of medical marijuana.” (2016)
- **American Academy of Neurology (AAN):** “The AAN findings state that smoked cannabis research studies have not produced enough evidence to assess its safety or effectiveness for treating MS symptoms including spasticity, pain, balance, posture and cognition changes.” (2014)
- **National Multiple Sclerosis Society:** The Society supports the rights of people with MS to work with their MS health care providers to access marijuana for medical purposes in accordance with legal regulations in those states where such use has been approved. In addition, the Society supports advancing research to better understand the benefits and potential risks of marijuana and its derivatives as a treatment for MS (Retrieved on June 4, 2018)
- **American Epilepsy Society (AES):** “AES calls on government, private funders, and manufacturers to support and develop well-designed, controlled, scientifically rigorous research for any cannabis-based products that have potential to have positive effects in the treatment of resistant epilepsy. The standard of this type of research is necessary to optimally evaluate the safety, efficacy, and drug-drug interactions of any potential anti-epileptic drug. To increase clinical research in this regard, AES urges that cannabis’ status as a Federal DEA Schedule 1 controlled substance be reviewed. AES’s call for rescheduling is not an endorsement of the legalization of cannabis, but is a recognition that the current restrictions on the use of cannabis products for research continue to stand in the way of scientifically rigorous research into the development of cannabis-based treatments. We also encourage USP to continue its efforts to establish recognized guidance for cannabis as well as individual, therapeutically promising cannabinoids.” (March 20, 2018)

- **American Cancer Society (ACS):**

The American Cancer Society supports the need for more scientific research on cannabinoids for cancer patients, and recognizes the need for better and more effective therapies that can overcome the often debilitating side effects of cancer and its treatment. The Society also believes that the classification of marijuana as a Schedule I controlled substance by the US Drug Enforcement Administration imposes numerous conditions on researchers and deters scientific study of cannabinoids. Federal officials should examine options consistent with federal law for enabling more scientific study on marijuana.

Medical decisions about pain and symptom management should be made between the patient and his or her doctor, balancing evidence of benefit and harm to the patient, the patient's preferences and values, and any laws and regulations that may apply.

The American Cancer Society Cancer Action Network (ACS CAN), the Society's advocacy affiliate, has not taken a position on legalization of marijuana for medical purposes because of the need for more scientific research on marijuana's potential benefits and harms. However, ACS CAN opposes the smoking or vaping of marijuana and other cannabinoids in public places because the carcinogens in marijuana smoke pose numerous health hazards to the patient and others in the patient's presence. (Retrieved on March 22, 2019)

- **American Lung Association (ALA):** Position approved on Oct 3, 2015

**Marijuana**

- Since marijuana smoke harms lung health, the American Lung Association opposes the inhalation of smoke or aerosol of marijuana.
- The American Lung Association supports measures to require totally smokefree environments, including marijuana.

**Medical Marijuana**

- Medical marijuana should be subjected to the same Food and Drug Administration standards of efficacy and safety as any pharmaceutical agent promoted for purposes of alleviating the symptoms of disease.
- The American Lung Association supports research into the health effects of marijuana use, including the risks and any potential benefits of medical marijuana use.

## BACKGROUND: WHAT IS "MEDICAL MARIJUANA"?

- The term *medical marijuana* refers to using the whole, unprocessed marijuana plant or its basic extracts to treat symptoms of illness and other conditions.
- The FDA has not approved marijuana as a safe and effective drug for any indication.
- There is considerable interest in its use to attempt to treat a number of medical conditions, including, for example, glaucoma, AIDS wasting syndrome, neuropathic pain, cancer, multiple sclerosis, chemotherapy-induced nausea, and certain seizure disorders.
- Scientific study of the chemicals in marijuana called *cannabinoids* has led to two FDA-approved medications in pill form, dronabinol and nabilone, used to treat nausea and boost appetite.
- The FDA requires carefully conducted studies (clinical trials) in hundreds to thousands of human subjects to determine the benefits and risks of a possible medication. So far, researchers haven't conducted enough large-scale clinical trials that show that the benefits of the marijuana plant (as opposed to its cannabinoid ingredients) outweigh its risks in patients it's meant to treat.
- At the federal level, marijuana remains classified as a Schedule I substance under the Controlled Substances Act, where Schedule I substances are considered to have a high potential for dependency and no accepted medical use, making distribution of marijuana a federal offense.

<https://www.fda.gov/NewsEvents/PublicHealthFocus/ucm421163.htm>

<https://www.drugabuse.gov/drugs-abuse/marijuana>

<http://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx>

## WHAT HAS HAPPENED IN OTHER STATES?

- Thirty three states and the District of Columbia currently have laws broadly legalizing marijuana in some form.
- The District of Columbia and 10 states -- Alaska, California, Colorado, Maine, Massachusetts, Michigan, Nevada, Oregon, Vermont and Washington -- have adopted the most expansive laws legalizing marijuana for recreational use. Most recently, Michigan voters approved a ballot measure permitting adults age 21 and over to purchase and possess recreational-use marijuana. Vermont became the first state earlier this year to legalize marijuana for recreational use through the legislative process, rather than via a ballot measure. Vermont's law allows for adults age 21 and over to grow and possess small amounts of cannabis. However, it does not permit the sale of nonmedical cannabis. Some other state laws similarly decriminalized marijuana, but did not initially legalize retail sales.
- Most other states allow for limited use of medical marijuana under certain circumstances. Some medical marijuana laws are broader than others, with types of medical conditions that allow for treatment varying from state to state. Louisiana, West Virginia and a few other states allow only for cannabis-infused products, such as oils or pills. Other states have passed narrow laws allowing residents to possess cannabis only if they suffer from select medical illnesses.
- A number of states have also decriminalized the possession of small amounts of marijuana.

Information is current as of Nov 7, 2018.

<http://www.governing.com/gov-data/state-marijuana-laws-map-medical-recreational.html>

*[Modified 2019-03-22](#)*

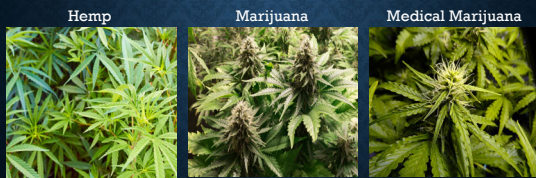
# OVERVIEW: MARIJUANA AND YOUTH SERIES

April 2, 2019

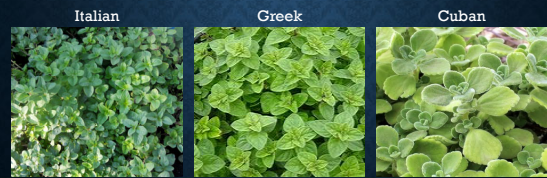
## CANNABIS THE HERB KNOWN AS MARIJUANA OR HEMP



## WHAT'S THE DIFFERENCE?



## OREGANO

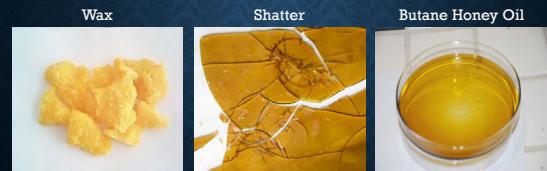


## MARIJUANA AS MEDICINE

Marijuana may contain medical components, like opium does. But we don't smoke opium to get the effects of morphine. Similarly we don't need to smoke marijuana to get its potential medical benefit. We need more research.

<https://learnaboutsam.org/science/>

## EXTRACTS FROM MARIJUANA)



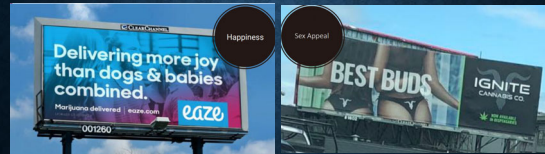
### MARIJUANA: SOLD AS "EDIBLES"

WWW.FDA.GOV/NEWSEVENTS/PUBLICHEALTHFOCUS/UCM421168.HTM



### IT'S NOT WOODSTOCK WEED...

HTTPS://LEARNABOUTSAM.ORG/WP-CONTENT/UPLOADS/2019/03/SLIDES-PDF-2019-FEB.PDF



### REPEATING HISTORY?

<https://youtu.be/brn14ftruUM>

### LEARN MORE...

#### Marijuana & Youth Series

Monday, April 1st 8:30-11:30AM  
Northcentral Technical Conference Center

#### AOD Partnership Meeting

Tuesday, April 2nd, 11:30am-1:00pm Northcentral  
Technical College (Room E101/102)

#### What Works in Marijuana Prevention

Joe Eberstein, from the Center for Community  
Research, California

#### The Industry - How alcohol, tobacco, & marijuana companies are targeting youth.

Joe Eberstein, from the Center for Community  
Research, California

### QUESTIONS AND CLOSING

#### Resources:

- LearnaboutSAM.org
- MarijuanaReport.org
- Drugabuse.gov
- www.fda.gov/NewsEvents/PublicHealthFocus/ucm421163.htm

### THANK YOU





# MARIJUANA & YOUTH SERIES

**Part 4 of 4 Continues on Monday, May 6th!**

Hosted by the Marathon County AOD Partnership & Ascension St. Clare's Hospital, with the support of Marathon County Health Department Staff & Northcentral Technical College

## The Teen Brain & Marijuana

On Monday, May 6th from 8:30-11:30AM in the Northcentral Technical College (Wausau Campus) Conference Center — Dr. Sion Kim Harris, from Harvard University & Boston Children's Hospital (MA), will break down the impact drugs can have on the developing teen brain, & how to talk to youth about marijuana.

### Presented by Dr. Sion Kim Harris

Dr. Sion Kim Harris is an Associate Professor of Pediatrics at Harvard Medical School, and faculty in the Divisions of Adolescent/Young Adult Medicine and Developmental Medicine at Boston Children's Hospital. She is the Director of the Center for Adolescent Substance Use and Addiction Research at Boston Children's Hospital. Her research focuses on adolescent substance use disorder prevention, screening, and treatment in the primary care setting, as well as on the effects of alcohol and drug policy on adolescents and young adults. In addition, she is involved in adolescent brain imaging research aimed at identifying risk factors for, and consequences of, adolescent substance use on brain development. She has published over 70 original scientific publications and has received numerous awards, including the Young Professional Award from the Maternal and Child Health Section of the American Public Health Association, and the T. Berry Brazelton Innovation Award. She received her doctorate from the Johns Hopkins Bloomberg School of Public Health.



Sion.Harris@childrens.harvard.edu  
857-218-4304



[www.ntc.edu/calendar/2019/02/28/marijuana-and-youth-4-part-series](http://www.ntc.edu/calendar/2019/02/28/marijuana-and-youth-4-part-series)

Disclaimer: The views or opinions expressed by the presenters in this series do not necessarily reflect those of the sponsors & supporters, nor do they reflect any official policy or position.

**Cost: \$18/  
Session**  
(Materials,  
Breakfast & 3  
CEUs included)

Attendees did  
not need to  
attend all four  
sessions!

Note: Room Change for the April  
2<sup>nd</sup> AOD Partnership Meeting –  
It is now in the Center for  
Business Industry Rm CBI-110

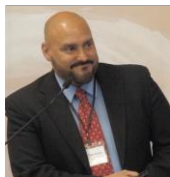
Updated on April 1, 2019

### Want to hear more Joe?

Attend our next AOD Partnership Meeting  
Tuesday, April 2nd from 11:30am-1:00pm at  
Northcentral Technical College  
(CBI 110) where we will be welcoming back Joe  
Eberstein to talk about *The Industry – How alcohol, tobacco, & marijuana  
companies are targeting youth.*



No registration required for this free event.  
1 free CEU offered. All are welcome!



**About our Speaker:** Joe Eberstein works for the Center for Community Research Inc, and is the Program Manager for the San Diego County (MPI) Marijuana Prevention Initiative. Featured speaker and subject matter expert regarding youth marijuana use, his role includes raising awareness regarding the effects of marijuana on youth and developing regional prevention strategies to reduce youth use and access. Joe also serves as an Advisory Board Member for SAMSHA region 9 PTTC technology transfer center.

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**Wisconsin Department of Health Services  
Division of Public Health  
PHAVER - WEDSS**

**YTD Disease Incidents by Episode Date**

**Incidents for MMWR Weeks 1 - 11 (Through Week of March 16, 2019)**

**Jurisdiction: Marathon County**

Disease Group	2019					Total
	Week 7	Week 8	Week 9	Week 10	Week 11	
Blastomycosis	0	0	0	0	0	1
Campylobacteriosis (Campylobacter Infection)	2	0	0	0	1	6
Carbapenem-Resistant Enterobacteriaceae	0	0	1	0	0	1
Chlamydia Trachomatis Infection	13	9	6	5	1	85
Cryptosporidiosis	0	0	1	0	2	4
Gonorrhea	5	8	2	3	0	28
Haemophilus Influenzae Invasive Disease	0	0	0	0	0	1
Hepatitis B	0	0	0	0	0	2
Hepatitis C	0	0	0	1	0	2
Influenza	2	3	8	7	4	28
Invasive Streptococcal Disease (Groups A And B)	0	0	0	0	0	3
Mycobacterial Disease (Nontuberculous)	0	0	0	0	0	3
Pathogenic E.coli	1	0	0	0	0	1
Pertussis (Whooping Cough)	0	0	0	0	0	2
Salmonellosis	0	0	0	0	0	1
Streptococcus Pneumoniae Invasive Disease	0	0	1	0	0	5
Syphilis	0	0	1	0	0	1
Tuberculosis, Latent Infection (LTBI)	0	0	0	0	0	2
	23	20	20	16	8	176