



WISCONSIN LEGISLATIVE COUNCIL RULES CLEARINGHOUSE

Ronald Sklansky
Clearinghouse Director

Richard Sweet
Clearinghouse Assistant Director

Terry C. Anderson
Legislative Council Director

Laura D. Rose
Legislative Council Deputy Director

CLEARINGHOUSE RULE 05-047

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated January 2005.]

2. Form, Style and Placement in Administrative Code

In s. HFS 119.07 (6) (c) 1., the title following par. (c) (that is, “*Base rates for calculating premium reductions*”) should be shown. [s. 1.05 (3) (c), Manual.]

4. Adequacy of References to Related Statutes, Rules and Forms

a. In the “Statutes interpreted,” “Statutory authority,” and “Related statute or rule” provisions preceding the analysis, it appears that reference should be added to s. 149.144, Stats. A similar comment applies to the statutory references in the second paragraph of the “Summary of factual data and analytical methodologies” provision.

b. In the “Statutory authority” and “Related statute or rule” provisions preceding the analysis, it appears that s. 149.143 (2) (b), Stats., also is pertinent. Therefore, it appears that the references to “s. 149.143 (2) (a) 2., 3., and 4.” should be changed to the more inclusive reference of “s. 149.143 (2).” A similar comment applies to the statutory reference in the first paragraph of the “Summary of factual data and analytical methodologies” provision.

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. The first paragraph of the analysis indicates that HIRSP policyholder premium rates must fund 60% of plan costs, except for costs associated with premium and deductible reductions. However, s. 149.143 (1) (am) 4., Stats., provides another exception. It would be

more accurate to qualify the statement in the analysis by specifically identifying this exception or by indicating that the policyholder premium rates “generally” must fund 60% of plan costs.

b. The first paragraph of the analysis explains that insurer assessments and adjustments to provider payment rates are in “co-equal” amounts to provide the remaining funding for HIRSP after the policyholder premiums. Therefore, the reader is unprepared for the difference for July 1, 2005 to June 30, 2006 in insurer assessments of \$38,879,512 versus provider contributions of \$43,830,996, as listed in the “Anticipated costs incurred by private sector” provision and specified in s. HFS 119.15 (2) and (3). It would be useful if the analysis very briefly explained why these numbers are, nonetheless, accurate.

c. The “Analysis and supporting documents used to determine effect on small business or in preparation of economic impact report” provision indicates that no assessed insurer is a small business. However, the second sentence of the “Effect on small business” provision indicates that “The rule changes do not affect health insurers who are small businesses....” This suggests that some insurers are small businesses but are, nonetheless, not affected.

Assuming that the first statement above is correct, it appears that it would be more accurate to change the second sentence of the “Effect on small business” provision to indicate that “The rule changes do not affect health insurers as none are small businesses as defined in s. 227.114 (1) (a), Stats.”

d. In the titles to the charts under s. HFS 119.07 (6) (d), a dash should be shown between “PLAN” and “Males” and a dash should be shown between “PLAN” and “Females” to reflect what is in the current rules.