



CHIROPRACTIC EXAMINING BOARD
Room N208, 4822 Madison Yards Way, 2nd Floor, Madison
Contact: Yolanda Y. McGowan (608) 266-2112
April 4th, 2019

The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a description of the actions of the Board.

AGENDA

8:30 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda (1-4)**
- B. Approval of Minutes of November 29, 2018 (5-8)**
- C. Conflicts of Interest**
- D. Administrative Matters – Discussion and Consideration (9-16)**
 - 1. Election of Officers
 - 2. Appointment of Liaisons and Alternates
 - 3. Delegation of Authorities
 - 4. Staff Updates
 - 5. Board Member – Term Expiration Date
 - a. Scott Bautch – 7/1/2021
 - b. Bryan Gerondale – 7/1/2021
 - c. Jeffrey King – 7/1/2019
 - d. Juli McNeely – 7/1/2021
 - e. Patricia Schumacher – 7/1/2019
 - f. Public Member – Vacant
- E. 8:30 A.M. PUBLIC HEARING: CR 18-105 – Chir 1, 4, 10, and 11, Relating to Delegation of Services to Health Care Professionals (17-27)**
 - 1. Review and Respond to Public Comments and Clearinghouse Report
- F. 8:30 A.M. PUBLIC HEARING: CR 18-103 – Chir 9, Relating to Chiropractic Preceptorship (28-36)**
 - 1. Review and Respond to Public Comments and Clearinghouse Report
- G. Legislative and Administrative Rules Matters – Discussion and Consideration (37-60)**
 - 1. Review and Respond to Public Comments Concerning CR 18-071 – Chir 4, Relating to Chiropractic Practice

2. Review of Draft Rules for Chir 5, Relating to Continuing Education
3. Scope Statement for Chir 5, Relating to Approval of Continuing Education Programs
4. Proposals for Chir 6, Relating to Standards of Conduct, and Chir 12, Relating to Nutritional Counseling Certification
5. Updates on Legislation and Pending or Possible Rulemaking Projects

H. Board Review of the Wisconsin Occupational Licensing Study Legislative Report (61-145)

I. Speaking Engagements, Travel, or Public Relation Requests, and Reports (146-155)

1. Consider Attendance at the Federation of Chiropractic Licensing Boards (FCLB) 93rd Annual Education Congress, May 1-5, 2019, Mission Bay, CA

J. Education and Examination Matters – Discussion and Consideration (156-173)

1. Wisconsin Chiropractic Association (WCA) Request for Approval of Chiropractic Technician Course of Study

K. Continuing Education Approval – Discussion and Consideration

1. Providers of Approved Continuing Education (PACE) Pre-Approval

L. Liaison Reports

M. Deliberation on Items Added After Preparation of Agenda

1. Introductions, Announcements and Recognition
2. Nominations, Elections, and Appointments
3. Administrative Matters
4. Election of Officers
5. Appointment of Liaisons and Alternates
6. Delegation of Authorities
7. Education and Examination Matters
8. Credentialing Matters
9. Practice Matters
10. Legislative and Administrative Rule Matters
11. Preceptor Approvals
12. Liaison Reports
13. Board Liaison Training and Appointment of Mentors
14. Informational Items
15. Division of Legal Services and Compliance (DLSC) Matters
16. Presentations of Petitions for Summary Suspension
17. Petitions for Designation of Hearing Examiner
18. Presentation of Stipulations, Final Decisions and Orders
19. Presentation of Proposed Final Decisions and Orders
20. Presentation of Interim Orders
21. Petitions for Re-Hearing
22. Petitions for Assessments
23. Petitions to Vacate Orders
24. Requests for Disciplinary Proceeding Presentations
25. Motions
26. Petitions
27. Appearances from Requests Received or Renewed

- 28. Speaking Engagements, Travel, or Public Relation Requests, and Reports
- N. Future Agenda Items
- O. Public Comments

CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85 (1)(b), and 440.205, Stats.); to consider individual histories or disciplinary data (s. 19.85 (1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

P. Deliberation on Credentialing Matters

- 1. Review Renewal Application File for Tyler Schneekloth, Lic. No. 3425-12 **(174-196)**

Q. Deliberation on Division of Legal Services and Compliance Matters

1. Administrative Warnings

- a. 18 CHI 022 – D.T.B. **(197-198)**

2. Proposed Stipulations, Final Decisions and Orders

- a. 17 CHI 024 – Shaun M. Dorothy, D.C. **(199-204)**

3. Case Closings

- a. 17 CHI 023 – J.M.W. **(205-210)**
- b. 17 CHI 017 – C.J.S. **(211-213)**

R. Deliberation of Items Added After Preparation of the Agenda

- 1. Education and Examination Matters
- 2. Credentialing Matters
- 3. DLSC Matters
- 4. Monitoring Matters
- 5. Professional Assistance Procedure (PAP) Matters
- 6. Petitions for Summary Suspensions
- 7. Petitions for Designation of Hearing Examiner
- 8. Proposed Stipulations, Final Decisions and Orders
- 9. Proposed Interim Orders
- 10. Administrative Warnings
- 11. Review of Administrative Warnings
- 12. Proposed Final Decisions and Orders
- 13. Matters Relating to Costs/Orders Fixing Costs
- 14. Case Closings
- 15. Board Liaison Training
- 16. Petitions for Assessments and Evaluations
- 17. Petitions to Vacate Orders
- 18. Remedial Education Cases
- 19. Motions
- 20. Petitions for Re-Hearing
- 21. Appearances from Requests Received or Renewed

S. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

T. Vote on Items Considered or Deliberated Upon in Closed Session, if Voting is Appropriate

U. Open Session Items Noticed Above Not Completed in the Initial Open Session

V. Delegation of Ratification of Examination Results and Ratification of Licenses and Certificates

ADJOURNMENT

NEXT SCHEDULED MEETING: JUNE 27, 2019

MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Interpreters for the hearing impaired provided upon request by contacting the Affirmative Action Officer, 608-266-2112.

**CHIROPRACTIC EXAMINING BOARD
MEETING MINUTES
NOVEMBER 29, 2018**

PRESENT: Scott Bautch, D.C.; Bryan Gerondale, D.C.; Jeffrey King, D.C.; Juli McNeely; Patricia Schumacher, D.C.

STAFF: Tom Ryan, Executive Director; Dale Kleven, Administrative Rules Coordinator; Maximilian Turner, Bureau Assistant; and other Department Staff

CALL TO ORDER

Patricia Schumacher, Chair, called the meeting to order at 8:31 a.m. A quorum of five (5) members was confirmed.

ADOPTION OF AGENDA

MOTION: Scott Bautch moved, seconded by Bryan Gerondale, to adopt the agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES

Amendments to the Minutes:

- Page 1 of the Minutes:
 - Correct the following header: “Speaking Engagements, Travel or Public Relation Requests and Reports”
 - Correct the heading “Federation of Chiropractic Licensing Boards (FCLB) District II Meeting on October 11-14, 2018 in Fort Walton Beach, FL” and the corresponding motion as follows:
 - **MOTION:** Bryan Gerondale moved, seconded by Juli McNeely, to ~~to~~ designate Scott Bautch to attend the FCLB District II Meeting on October 11-14, 2018 in Fort Walton Beach, FL and to authorize travel. Motion carried unanimously.
- Page 2 of the Minutes:
 - Correct the following header: “Education and Examination Matters”
 - Correct the motion for “Moraine Park Request for Approval of Chiropractic Technician (CT) Course of Study” as follows:
 - **MOTION:** Scott Bautch moved, seconded by Bryan Gerondale, to approve ~~the request of~~ Moraine Park’s Chiropractic Technician (CT) Course of Study. Motion carried unanimously.

MOTION: Bryan Gerondale moved, seconded by Juli McNeely, to approve the minutes of August 30, 2018 as amended. Motion carried unanimously.

LEGISLATION AND ADMINISTRATIVE RULE MATTERS

Review of Draft Rules for Chir 1, 4, 10, and 11, Relating to Delegation of Health Care Services to Health Care Professionals

MOTION: Scott Bautch moved, seconded by Bryan Gerondale, to approve the preliminary rule draft of Chir 1, 4, 10, and 11, relating to delegation of health care services to health care professionals, for posting for economic impact comments and submission to the Clearinghouse. Motion carried unanimously.

Review of Draft Rules for Chir 9, Relating to Chiropractic Preceptorship

MOTION: Jeffrey King moved, seconded by Scott Bautch, to authorize Bryan Gerondale to approve the preliminary rule draft of Chir 9, relating to chiropractic preceptorship, for posting for economic impact comments and submission to the Clearinghouse. Motion carried unanimously.

EDUCATION AND EXAMINATION MATTERS

International Chiropractic Pediatric Association (ICPA) Request for Review of Continuing Education Course Denial

MOTION: Juli McNeely moved, seconded by Jeffrey King, to affirm the denial of the continuing education course submitted by the ICPA. Motion carried unanimously.

Wisconsin Chiropractic Association (WCA) Request for Approval of Chiropractic Technician Course of Study

MOTION: Bryan Gerondale moved, seconded by Scott Bautch, to approve the chiropractic technician course of study proposed by the WCA. Motion carried unanimously.

CLOSED SESSION

MOTION: Jeffrey King moved, seconded by Scott Bautch, to convene to Closed Session to deliberate on cases following hearing (§ 19.85(1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats. and § 440.205, Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Patricia Schumacher, Chair, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: Scott Bautch-yes; Bryan Gerondale-yes; Jeffrey King-yes; Juli McNeely-yes; and Patricia Schumacher-yes. Motion carried unanimously.

The Board convened into Closed Session at 12:24 p.m.

RECONVENE TO OPEN SESSION

MOTION: Juli McNeely moved, seconded by Scott Bautch, to reconvene in Open Session. Motion carried unanimously.

The Board reconvened to Open Session at 1:12 p.m.

**VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION,
IF VOTING IS APPROPRIATE**

MOTION: Bryan Gerondale moved, seconded by Jeffrey King, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

(Be advised that any recusals or abstentions reflected in the closed session motions stand for the purposes of the affirmation vote.)

**DELIBERATION ON DIVISION OF LEGAL SERVICES AND COMPLIANCE (DLSC)
MATTERS**

Review of Administrative Warnings

**10:00 A.M. APPEARANCE: DLSC ATTORNEY LESLEY MCKINNEY, J.M.W., AND
ATTORNEY MICHAEL RUSSART – 17 CHI 023 – J.M.W.**

MOTION: Bryan Gerondale moved, seconded by Jeffrey King, to rescind the Administrative Warning in the matter of DLSC Case Number 17 CHI 023 – J.M.W. Motion carried. Abstained from the vote: Scott Bautch, Opposed: Patricia Schumacher

MOTION: Juli McNeely moved, seconded by Jeffrey King, to refer DLSC Case Number 17 CHI 023 to DLSC for further investigation. Motion carried unanimously.

Case Closings

16 CHI 010 – C.V.W.

MOTION: Bryan Gerondale moved, seconded by Scott Bautch, to close the DLSC Case Number 16 CHI 010, against C.V.W., for Insufficient Evidence (IE). Motion carried unanimously.

17 CHI 013 – L.J.C.

MOTION: Bryan Gerondale moved, seconded by Jeffrey King, to close the DLSC Case Number 17 CHI 013, against L.J.C., for No Violation. Motion carried unanimously.

18 CHI 012 – R.R.M.

MOTION: Juli McNeely moved, seconded by Scott Bautch, to close the DLSC Case Number 18 CHI 012, against R.R.M., for No Violation. Motion carried unanimously.

**DELEGATION OF RATIFICATION OF EXAMINATION RESULTS AND RATIFICATION
OF LICENSES AND CERTIFICATES**

MOTION: Scott Bautch moved, seconded by Juli McNeely, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

ADJOURNMENT

MOTION: Bryan Gerondale, seconded by Juli McNeely, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 1:14 p.m.

DRAFT

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Maximilian Turner, Bureau Assistant		2) Date When Request Submitted: 1/25/19 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 1/31/2019	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Matters: 1) Election of Officers 2) Appointment of Liaisons and Alternates 3) Delegation of Authorities	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: 1) The Board should conduct Election of its Officers for 2019 2) The new Chairperson should review and appoint/reappoint Liaisons and Alternates as appropriate 3) The Board should review and then consider continuation or modification of previously delegated authorities			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			
Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

CHIROPRACTIC EXAMINING BOARD

2018 Elections and Liaison Appointments

2018 ELECTION RESULTS	
Board Chair	Patricia Schumacher
Vice Chair	Jeffrey King
Secretary	Bryan Gerondale
2018 LIAISON APPOINTMENTS	
Credentialing Liaison	Jeffrey King <i>Alternate: Bryan Gerondale</i>
Exams, Education and Continuing Education Liaison	Patricia Schumacher <i>Alternate: Jeffrey King</i>
Monitoring Liaison	Jeffrey King <i>Alternate: Bryan Gerondale</i>
Professional Assistance Procedure (PAP) Liaison	Juli McNeely <i>Alternate: Bryan Gerondale</i>
Legislative Liaison	Patricia Schumacher
Travel Liaison	Patricia Schumacher <i>Alternate: Bryan Gerondale</i>
Preceptor Liaison	Bryan Gerondale <i>Alternate: Jeffrey King</i>
Rules Liaison	John Church Scott Bautch (4/5/18) <i>Alternate: Jeffrey King</i>
Occupational Licensure Study Liaison	Chair (or chief presiding officer, or longest serving member of the Board, by order of succession)
2018 SCREENING PANEL APPOINTMENTS	
Screening Panel	Jeffrey King, Juli McNeely, Patricia Schumacher <i>Alternate: Bryan Gerondale</i>

DELEGATION MOTIONS

Delegated Authority for Urgent Matters

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, that, in order to facilitate the completion of assignments between meetings, the Board delegates its authority by order of succession to the Chair, highest ranking officer, or longest serving member of the Board, to appoint liaisons to the Department to act in urgent matters, make appointments to vacant liaison, panel and committee positions, and to act when knowledge or experience in the profession is required to carry out the duties of the Board in accordance with the law. Motion carried unanimously.

Document Signature Delegation

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the Chair or chief presiding officer, or longest serving member of the Board, by order of succession, to sign documents on behalf of the Board. In order to carry out duties of the Board, the Chair, chief presiding officer, or longest serving member of the Board, has the ability to delegate this signature authority for purposes of facilitating the completion of assignments during or between meetings. The Chair, chief presiding officer, or longest serving member of the Board delegates the authority to Executive Director or designee to sign the name of any Board member on documents as necessary and appropriate. Motion carried unanimously.

Delegated Authority for Application Denial Reviews

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, that the Board counsel or another department attorney is formally authorized to serve as the Board's designee for purposes of Wis. Admin Code § SPS 1.08(1). Motion carried unanimously.

Credentialing Authority Delegations

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the Credentialing Liaisons to address all issues related to credentialing matters except potential denial decisions should be referred to the full Board for final determination. Motion carried unanimously.

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate credentialing authority to DSPS to act upon applications that meet the criteria of Rule and Statute and thereby would not need further Board or Board liaison review. Motion carried unanimously.

Monitoring Delegations

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to adopt the “Roles and Authorities Delegated to the Monitoring Liaison and Department Monitor” as presented. Motion carried unanimously.

Travel Delegation

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the Travel Liaison to approve any Board Member travel. Motion carried unanimously.

Voluntary Surrenders

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the assigned case advisor to accept or refuse a request for voluntary surrender of a license by a licensee who has a pending complaint or disciplinary matter per Wis. Stat. § 440.19. Motion carried unanimously.

Continuing Education Delegation or Education Delegations

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the Office of Education and Examination Liaison(s) to address all issues related to CE, education and examinations. Motion carried unanimously.

Authorization for DSPS to Provide Board Member Contact Information to National Regulatory Bodies

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to authorize Department staff to provide national regulatory bodies with all Board/Council member contact information that the Department retains on file. Motion carried unanimously.

Optional Renewal Notice Insert Delegation

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to designate the Chair or chief presiding officer, or longest serving member of the Board, by order of succession, to provide a brief statement or link relating to board-related business within the license renewal notice at the Board’s or Board designee’s request. Motion carried unanimously.

Rules Liaison Delegation

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to grant the Rules Liaison the ability to address all rule-making language. Motion carried unanimously.

Legislative Liaison Delegation

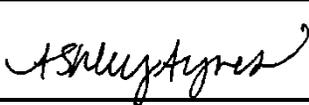
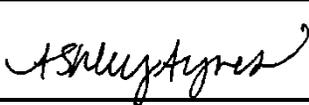
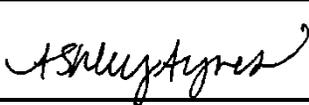
MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to delegate authority to the Legislative Liaisons to speak on behalf of the Board regarding legislative matters. Motion carried unanimously.

Occupational Licensure Study Liaison

MOTION: Juli McNeely moved, seconded by Bryan Gerondale, to designate the Chair or chief presiding officer, or longest serving member of the Board, by order of succession as the Board's liaison to represent and speak on behalf of the Board regarding occupational license review and related matters. Motion carried unanimously.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Ashley Ayres Monitoring and Intake Supervisor Division of Legal Services and Compliance		2) Date When Request Submitted: December 20, 2018																
		Items will be considered late if submitted after 4:30 p.m. and less than: <ul style="list-style-type: none"> ▪ 10 work days before the meeting for Medical Board ▪ 14 work days before the meeting for all others 																
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board																		
4) Meeting Date: January 31, 2019	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Appointment of Monitoring Liaison and Delegated Authority Motion																
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:																
10) Describe the issue and action that should be addressed: Adopt or reject the Roles and Authorities Delegated to the Monitoring Liaison and Department Monitor document as presented in today's agenda packet.																		
<table style="width: 100%; border: none;"> <tr> <td style="width: 10%; border: none;">11)</td> <td style="width: 60%; border: none; text-align: center;">Authorization</td> <td style="width: 30%; border: none;"></td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;"></td> <td style="border: none; text-align: center;">December 20, 2018</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Signature of person making this request</td> <td style="border: none; text-align: center;">Date</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Supervisor (if required)</td> <td style="border: none; text-align: center;">Date</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none; text-align: center;">Executive Director signature (indicates approval to add post agenda deadline item to agenda)</td> <td style="border: none; text-align: center;">Date</td> </tr> </table>				11)	Authorization				December 20, 2018		Signature of person making this request	Date		Supervisor (if required)	Date		Executive Director signature (indicates approval to add post agenda deadline item to agenda)	Date
11)	Authorization																	
		December 20, 2018																
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Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.																		

Roles and Authorities Delegated to the Monitoring Liaison and Department Monitor

The Monitoring Liaison (“Liaison”) is a Board/Section designee who works with department monitors to enforce Board/Section orders as explained below.

Current Authorities Delegated to the Monitoring Liaison

The Liaison may take the following actions on behalf of the Board/Section:

1. Grant a temporary reduction in random drug screen frequency upon Respondent’s request if he/she is unemployed and is otherwise compliant with Board/Section order. The temporary reduction will be in effect until Respondent secures employment in the profession. The Department Monitor (“Monitor”) will draft an order and sign on behalf of the Liaison.
2. Grant a stay of suspension if Respondent is eligible per the Board/Section order. The Monitor will draft an order and sign on behalf of the Liaison.
3. Remove the stay of suspension if there are repeated violations or a substantial violation of the Board/Section order. In conjunction with removal of any stay of suspension, the Liaison may prohibit Respondent from seeking reinstatement of the stay for a specified period of time. The Monitor will draft an order and sign on behalf of the Liaison.
4. Grant or deny approval when Respondent proposes continuing/remedial education courses, treatment providers, mentors, supervisors, change of employment, etc. unless the order specifically requires full-Board/Section approval.
5. Grant a maximum of one 90-day extension, if warranted and requested in writing by Respondent, to complete Board/Section-ordered continuing education.
6. Grant a maximum of one extension or payment plan for proceeding costs and/or forfeitures if warranted and requested in writing by Respondent.
7. Grant full reinstatement of licensure if Respondent has fully complied with all terms of the order without deviation. The Monitor will draft an order and obtain the signature or written authorization from the Liaison.
8. Grant or deny a request to appear before the Board/Section in closed session.
9. Board Monitoring Liaison may determine whether Respondent’s petition is eligible for consideration by the full Board/Section.
10. (*Except Pharmacy*) Accept Respondent’s written request to surrender credential. If accepted by the Liaison, Monitor will consult with Board Counsel to determine if a stipulation is necessary. If a stipulation is not necessary, Monitor will draft an order and sign on behalf of the Liaison. If denied by the Liaison, the request to surrender credential will go to the full Board for review.
11. (*Except Pharmacy*) Grant Respondent’s petition for a reduction in drug screens per the standard schedule, below. If approved, Monitor will draft an order and sign on behalf of the Liaison.
 - a. Year 1: 49 screens (including 1 hair test, if required by original order)
 - b. Year 2: 36 screens (plus 1 hair test, if required by original order)
 - c. Year 3: 28 screens plus 1 hair test
 - d. Year 4: 28 screens plus 1 hair test
 - e. Year 5: 14 screens plus 1 hair test

12. (*Dentistry only*) – Ability to approve or deny all requests from a respondent.
13. (*Except Nursing*) – Board Monitoring Liaison may approve or deny Respondent's request to be excused from drug and alcohol testing for work, travel, etc.

Current Authorities Delegated to the Department Monitor

The Monitor may take the following actions on behalf of the Board/Section, draft an order and sign:

1. Grant full reinstatement of licensure if CE is the sole condition of the limitation and Respondent has submitted the required proof of completion for approved courses.
 2. Suspend the license if Respondent has not completed Board/Section-ordered CE and/or paid costs and forfeitures within the time specified by the Board/Section order. The Monitor may remove the suspension and issue an order when proof completion and/or payment have been received.
 3. Suspend the license (or remove stay of suspension) if Respondent fails to enroll and participate in an Approved Program for drug and alcohol testing within 30 days of the order, or if Respondent ceases participation in the Approved Program without Board approval. This delegated authority only pertains to respondents who must comply with drug and/or alcohol testing requirements.
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**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Dale Kleven Administrative Rules Coordinator		2) Date When Request Submitted: 3/25/19 Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting									
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board											
4) Meeting Date: 4/4/19	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? 8:30 A.M. Public Hearing: CR 18-105 – Chir 1, 4, 10, and 11 Relating to Delegation of Services to Health Care Professionals 1. Review and Respond to Public Comments and Clearinghouse Report 8:30 A.M. Public Hearing: CR 18-103 – Chir 9 Relating to Chiropractic Preceptorship 1. Review and Respond to Public Comments and Clearinghouse Report Legislation and Rule Matters – Discussion and Consideration 1. Review and Respond to Public Comments Concerning CR 18-071 – Chir 4 Relating to Chiropractic Practice 2. Review of Draft Rules for Chir 5, Relating to Continuing Education 3. Scope Statement for Chir 5, Relating to Approval of Continuing Education Programs 4. Proposals for Chir 6, Relating to Standards of Conduct, and Chir 12, Relating to Nutritional Counseling Certification 5. Update on Pending Legislation and Pending and Possible Rulemaking Projects									
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes (Fill out Board Appearance Request) <input checked="" type="checkbox"/> No									
9) Name of Case Advisor(s), if required:											
10) Describe the issue and action that should be addressed:											
11) Authorization <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><i>Dale Kleven</i></td> <td style="width: 50%; border: none;"><i>March 25, 2019</i></td> </tr> <tr> <td style="border: none;">Signature of person making this request</td> <td style="border: none;">Date</td> </tr> <tr> <td style="border: none;">Supervisor (if required)</td> <td style="border: none;">Date</td> </tr> <tr> <td colspan="2" style="border: none;">Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date</td> </tr> </table>				<i>Dale Kleven</i>	<i>March 25, 2019</i>	Signature of person making this request	Date	Supervisor (if required)	Date	Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date	
<i>Dale Kleven</i>	<i>March 25, 2019</i>										
Signature of person making this request	Date										
Supervisor (if required)	Date										
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date											
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, Provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.											

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Chiropractic Examining Board to repeal Chir 10.03 (Note); to amend Chir 4.04 (3), ch. Chir 10 (title), 10.015 (1) (a) (intro.), 10.02 (intro.), 10.03, and 11.02 (4); and to create Chir 1.02 (4) and 10.023, relating to delegation of services to health care professionals.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Sections 446.02 (7), 446.025 (1) (a), and 446.026 (1) (a), Stats.

Statutory authority:

Sections 15.08 (5) (b) and 227.11 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that examining boards, such as the Chiropractic Examining Board, “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, . . .”

Section 227.11 (2) (a), Stats., sets forth the parameters of an agency’s rule-making authority, stating an agency “may promulgate rules interpreting provisions of any statute enforced or administered by the agency. . .but a rule is not valid if the rule exceeds the bounds of correct interpretation.”

Related statute or rule:

None.

Plain language analysis:

The proposed rules make the following changes to reflect the provisions of 2017 Wisconsin Act 180, relating to a chiropractor’s authority to delegate adjunctive services and x-ray services to certain health care professionals:

- Adds the definition of “health care professional” under s. 446.01 (1v), Stats., to the definitions in ch. Chir 1.

- Revises ss. Chir 4.04 (3) and 10.03 to reflect s. 446.025 (1) (a), Stats., which provides no person may provide x-ray services on behalf of a chiropractor in connection with the practice of chiropractic unless the person is a chiropractic radiological technician and is under the direct supervision of a chiropractor licensed under ch. 446, Stats.
- Creates s. Chir 10.023 to, as required under s. 446.02 (7) (c), Stats., establish standards and procedures a chiropractor must use to verify a health care professional has adequate education, training, and experience to perform a delegated adjunctive service safely.
- As use of the term “health care professionals” in s. Chir 11.02 (4) is no longer appropriate based on its statutory definition, the proposed rules replace it with the term “healthcare providers.”

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois: Illinois statutes (Section 54.2, Medical Practice Act) allow physicians, including chiropractic physicians, to delegate authority to certain individuals:

- Physicians may delegate patient care tasks to a physician assistant, licensed practical nurse, registered professional nurse, advanced practice nurse, or other licensed person practicing within the scope of their license.
- In an office or practice setting and within a physician-patient relationship, a physician may delegate patient care tasks or duties to an unlicensed person who possesses appropriate training and experience provided a health care professional practicing within the scope of their license is on site to provide assistance.
- A physician may not delegate any patient care task or duty that is statutorily or by rule mandated to be performed by a physician.

Iowa: Rules of the Iowa Board of Chiropractic address the delegation of chiropractic services to a chiropractic assistant (645 IAC 43.12):

- A supervising chiropractic physician must ensure at all times that a chiropractic assistant has the necessary training and skills to competently perform a delegated service.
- A supervising chiropractic physician may delegate services to a chiropractic assistant that are within the scope of practice of the chiropractic physician.
- A chiropractic physician may not delegate any of the following services:
 - Services outside the chiropractic physician’s scope of practice.
 - Initiation, alteration, or termination of chiropractic treatment programs.
 - Chiropractic manipulation and adjustments.
 - Diagnosis of a condition.

- A supervising chiropractic physician must ensure a chiropractic assistant is informed of the supervisor and chiropractic assistant relationship and is responsible for all services performed by the chiropractic assistant.

Michigan: Michigan statutes allow a chiropractor to delegate to a licensed or unlicensed individual who is otherwise qualified by education, training, or experience the performance of selected acts, tasks, or functions where the acts, tasks, or functions fall within the scope of practice of the chiropractor's profession and will be performed under the chiropractor's supervision. A chiropractor may not delegate an act, task, or function if the act, task, or function, under standards of acceptable and prevailing practice, requires the level of education, skill, and judgment required of the chiropractor (Section 333.16215, Public Health Code).

Minnesota: Minnesota statutes specify grounds for the Board of Chiropractic Examiners to refuse to grant or revoke, suspend, condition, limit, restrict, or qualify a license to practice chiropractic. These provisions permit a doctor of chiropractic to employ, supervise, or delegate functions to a qualified person who may or may not be required to obtain a license or registration to provide health services if that person is practicing within the scope of the license or registration or delegated authority (Section 148.10, Subdivision 1, Chiropractic Practice Act).

Summary of factual data and analytical methodologies:

The proposed rules were developed by reviewing the provisions of 2017 Wisconsin Act 180 in conjunction with current rules relating to chiropractic practice under chs. Chir 1 to 13 and obtaining input and feedback from the Chiropractic Examining Board.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held at 8:30 a.m. on January 31, 2019, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Chir 1.02 (4) is created to read:

Chir 1.02 (4) “Health care professional” has the meaning given in s. 446.01 (1v), Stats.

SECTION 2. Chir 4.04 (3) is amended to read:

Chir 4.04 (3) ~~A chiropractor may delegate the operation of x-ray equipment only to a chiropractic radiological technician certified under ch. 446, Stats. A chiropractic radiological technician shall operate x-ray equipment under the direct supervision and direction of a licensee. As provided under s. 446.025 (1) (a), Stats., no person may provide x-ray services on behalf of a chiropractor in connection with the practice of chiropractic unless the person is a chiropractic radiological technician and is under the direct supervision of a chiropractor licensed under ch. 446, Stats. The~~ A chiropractor shall maintain records or ensure the chiropractor’s employer maintains records that verify ~~the~~ a chiropractic radiological technician delegated the performance of x-ray services is certified under ch. 446, Stats.

SECTION 3. Chapter Chir 10 (title) is amended to read:

CHAPTER CHIR 10

DELEGATION TO CHIROPRACTIC TECHNICIANS, ~~AND~~ CHIROPRACTIC RADIOLOGICAL TECHNICIANS, AND HEALTH CARE PROFESSIONALS

SECTION 4. Chir 10.015 (1) (a) (intro.) is amended to read:

Chir 10.015 (1) (a) (intro.) The course of study shall include a prerequisite ~~4 hour~~ 4-hour therapeutic overview course covering chiropractic technician scope of practice, anatomy, and contraindications followed by all of the following:

SECTION 5. Chir 10.02 (intro.) is amended to read:

Chir 10.02 (intro.) **Delegation of adjunctive services to a chiropractic technician.** A chiropractor may delegate the performance of ~~adjunctive services only to a chiropractic technician certified under ch. 446, Stats. An~~ an adjunctive service ~~may be delegated~~ to a chiropractic technician ~~only~~ if all of the following conditions are met:

SECTION 6. Chir 10.023 is created to read:

Chir 10.023 Delegation of adjunctive services to a health care professional. A chiropractor may delegate the performance of an adjunctive service to a health care professional if all of the following conditions are met:

(1) The performance of the adjunctive service is within the scope of the health care professional's license, registration, or certification.

(2) The chiropractor maintains records or ensures the chiropractor's employer maintains records that verify the health care professional's license, registration, or certification is current.

(3) The chiropractor exercises direct supervision of the health care professional performing the delegated adjunctive service.

(4) The chiropractor retains ultimate responsibility for the manner and quality of the service.

SECTION 7. Chir 10.03 is amended to read:

Chir 10.03 X-ray services. ~~A chiropractor may delegate x-ray examination procedures only to a chiropractic radiological technician certified under ch. 446, Stats. As provided under s. 446.025 (1) (a), Stats., no person may provide x-ray services on behalf of a chiropractor in connection with the practice of chiropractic unless the person is a chiropractic radiological technician and is under the direct supervision of a chiropractor licensed under ch. 446, Stats. The~~ A chiropractor shall comply with s. Chir 4.04 before delegating the performance of x-ray services to a chiropractic radiological technician.

SECTION 8. Chir 10.03 (Note) is repealed.

SECTION 9. Chir 11.02 (4) is amended to read:

Chir 11.02 (4) Patient records shall be complete and sufficiently legible to be understandable to ~~health care professionals~~ healthcare providers generally familiar with chiropractic practice, procedures, and nomenclature.

SECTION 10. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date December 19, 2018
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Chir 1, 4, 10, and 11	
4. Subject Delegation of services to health care professionals	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected
7. Fiscal Effect of Implementing the Rule <input checked="" type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses (if checked, complete Attachment A)	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule The proposed rules make the following changes to reflect the provisions of 2017 Wisconsin Act 180, relating to a chiropractor's authority to delegate adjunctive services and x-ray services to certain health care professionals: <ul style="list-style-type: none">• Adds the definition of "health care professional" under s. 446.01 (1v), Stats., to the definitions in ch. Chir 1.• Revises ss. Chir 4.04 (3) and 10.03 to reflect s. 446.025 (1) (a), Stats., which provides no person may provide x-ray services on behalf of a chiropractor in connection with the practice of chiropractic unless the person is a chiropractic radiological technician and is under the direct supervision of a chiropractor licensed under ch. 446, Stats.• Creates s. Chir 10.023 to, as required under s. 446.02 (7) (c), Stats., establish standards and procedures a chiropractor must use to verify a health care professional has adequate education, training, and experience to perform a delegated adjunctive service safely.• As use of the term "health care professionals" in s. Chir 11.02 (4) is no longer appropriate based on its statutory definition, the proposed rules replace it with the term "healthcare providers."	
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.	
13. Identify the Local Governmental Units that Participated in the Development of this EIA. No local governmental units participated in the development of this EIA.	

ADMINISTRATIVE RULES

Fiscal Estimate & Economic Impact Analysis

14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

The benefit to implementing the rule is providing clarity and conformity with the Wisconsin Statutes. If the rule is not implemented, it will not reflect the provisions of 2017 Wisconsin Act 180.

16. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is clarity, updated references, and conformity with the Wisconsin Statutes.

17. Compare With Approaches Being Used by Federal Government

None

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: Illinois statutes (Section 54.2, Medical Practice Act) allow physicians, including chiropractic physicians, to delegate authority to certain individuals:

- Physicians may delegate patient care tasks to a physician assistant, licensed practical nurse, registered professional nurse, advanced practice nurse, or other licensed person practicing within the scope of their license.
- In an office or practice setting and within a physician-patient relationship, a physician may delegate patient care tasks or duties to an unlicensed person who possesses appropriate training and experience provided a health care professional practicing within the scope of their license is on site to provide assistance.
- A physician may not delegate any patient care task or duty that is statutorily or by rule mandated to be performed by a physician.

Iowa: Rules of the Iowa Board of Chiropractic address the delegation of chiropractic services to a chiropractic assistant (645 IAC 43.12):

- A supervising chiropractic physician must ensure at all times that a chiropractic assistant has the necessary training and skills to competently perform a delegated service.
- A supervising chiropractic physician may delegate services to a chiropractic assistant that are within the scope of practice of the chiropractic physician.
- A chiropractic physician may not delegate any of the following services:
 - Services outside the chiropractic physician's scope of practice.
 - Initiation, alteration, or termination of chiropractic treatment programs.
 - Chiropractic manipulation and adjustments.
 - Diagnosis of a condition.
- A supervising chiropractic physician must ensure a chiropractic assistant is informed of the supervisor and chiropractic assistant relationship and is responsible for all services performed by the chiropractic assistant.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

Michigan: Michigan statutes allow a chiropractor to delegate to a licensed or unlicensed individual who is otherwise qualified by education, training, or experience the performance of selected acts, tasks, or functions where the acts, tasks, or functions fall within the scope of practice of the chiropractor's profession and will be performed under the chiropractor's supervision. A chiropractor may not delegate an act, task, or function if the act, task, or function, under standards of acceptable and prevailing practice, requires the level of education, skill, and judgment required of the chiropractor (Section 333.16215, Public Health Code).

Minnesota: Minnesota statutes specify grounds for the Board of Chiropractic Examiners to refuse to grant or revoke, suspend, condition, limit, restrict, or qualify a license to practice chiropractic. These provisions permit a doctor of chiropractic to employ, supervise, or delegate functions to a qualified person who may or may not be required to obtain a license or registration to provide health services if that person is practicing within the scope of the license or registration or delegated authority (Section 148.10, Subdivision 1, Chiropractic Practice Act).

19. Contact Name Dale Kleven	20. Contact Phone Number (608) 261-4472
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This document can be made available in alternate formats to individuals with disabilities upon request.

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

ATTACHMENT A

1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
 - Less Stringent Schedules or Deadlines for Compliance or Reporting
 - Consolidation or Simplification of Reporting Requirements
 - Establishment of performance standards in lieu of Design or Operational Standards
 - Exemption of Small Businesses from some or all requirements
 - Other, describe:
-

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

5. Describe the Rule's Enforcement Provisions

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes No
-



WISCONSIN LEGISLATIVE COUNCIL RULES CLEARINGHOUSE

Scott Grosz
Clearinghouse Director

Jessica Karls-Ruplinger
Legislative Council Acting Director

Margit Kelley
Clearinghouse Assistant Director

CLEARINGHOUSE RULE 18-105

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Legislative Reference Bureau and the Legislative Council Staff, dated December 2014.]

1. Statutory Authority

The rule restricts a person from providing x-ray services on behalf of a chiropractor unless the person is a chiropractic radiological technician. However, the s. 446.02 (7) (d), Stats., authorizes a chiropractor to delegate x-ray services to a “health care professional” as defined in s. 446.01 (1v), Stats., if the health care professional is acting within the scope of his or her license, registration, or certification. SECTIONS 2 and 7 of the rule text should be revised to conform to the statute with respect to the delegation of services to a health care professional.

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

a. In SECTIONS 2 and 7 of the rule text, consider changing the references to “direct supervision” to “direct, on premises supervision” to more closely match the statutory language.

b. In SECTION 9 of the proposed rule, should the board define the term “healthcare provider” in order to clearly differentiate it from the newly defined term, “health care professional?”

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Chiropractic Examining Board to **repeal** Chir 9.03 (5), 9.04, and 9.05 (1) (intro.); to **renumber and amend** Chir 9.03 (1) and (4) and 9.05 (1) (a) to (f); to **amend** Chir 9.01 (2), 9.02, 9.03 (intro.), (2), (3) (intro.), (a), and (b), (Note), and (6), 9.05 (intro.) and (Note), and 9.06 (2); and to **create** Chir 9.03 (1) (a) to (c) and (3) (am) and 9.05 (7), relating to chiropractic preceptorship.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Section 446.02 (9) (a), Stats.

Statutory authority:

Sections 15.08 (5) (b) and 227.11 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that an examining board, such as the Chiropractic Examining Board, “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains . . .”

Section 227.11 (2) (a), Stats., sets forth the parameters of an agency’s rule-making authority, stating an agency “may promulgate rules interpreting provisions of any statute enforced or administered by the agency. . .but a rule is not valid if the rule exceeds the bounds of correct interpretation.”

Related statute or rule:

None.

Plain language analysis:

The Board conducted an evaluation and update of ch. Chir 9 to ensure consistency with current professional and academic practices and applicable Wisconsin statutes. As a result, the following updates have been made:

- Section Chir 9.03 (1) is revised to include the Councils on Chiropractic Education International as an approved accreditor of chiropractic colleges.

- As most of the criteria for approval of chiropractic college preceptorship programs under s. Chir 9.03 and postgraduate preceptorship programs under s. Chir 9.04 are identical, the sections have been consolidated.
- Other provisions throughout ch. Chir 9 have been revised to update notes, provide clarity, and conform to current drafting standards.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois: Rules of the Illinois Department of Financial and Professional Regulation relating to chiropractic physician preceptorship were repealed effective February 15, 2000. (68 Ill. Adm. Code 1285.105, repealed at 24 Ill. Reg. 3620).

Iowa: Rules of the Iowa Board of Chiropractic administer chiropractic preceptorship programs (645 IAC 42.1 to 42.6). A program is established by a Board-approved chiropractic college and allows a chiropractic intern or resident from the college to practice under the supervision of a chiropractic preceptor (a chiropractic physician licensed and practicing in Iowa). The rules specify the criteria for Board approval of chiropractic colleges, preceptorship programs, and chiropractic preceptors, and the conditions under which a preceptorship program must be terminated.

Michigan: Michigan statutes permit a chiropractic student to apply for a limited license to engage in the practice of chiropractic under the supervision of a licensed chiropractor (MCL 333.16412). The applicant must have successfully completed 2 years of education in a college of arts and sciences and 2 years, 4 semesters, or 6 quarter terms in a chiropractic college approved by the Michigan Board of Chiropractic. The limited license is valid for not more than 6 months and is nonrenewable.

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners administer graduate preceptorship programs (Minnesota Rules, parts 2500.2500 to 2500.2530). A program allows an extern (a graduate of an accredited chiropractic college) to work under the supervision of a preceptor (a chiropractic physician licensed and in active private practice in Minnesota) for a period of up to 12 months. The rules specify the role of the preceptor, the eligibility and responsibilities of the preceptor and the extern, the minimum requirements of a preceptorship training program, and the conditions under which a preceptorship program must be terminated.

Summary of factual data and analytical methodologies:

The rules were developed by reviewing the provisions of ch. Chir 9 to ensure the rules are consistent with current practices and applicable Wisconsin statutes. No additional factual data or analytical methodologies were used to develop the proposed rules.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules were posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis document is attached.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Kirsten.Reader@wisconsin.gov, or by calling (608) 267-2435.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held at 8:30 a.m. on January 31, 2019, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Chir 9.01 (2) is amended to read:

Chir 9.01 (2) "Chiropractor preceptor" means a chiropractor licensed and practicing in Wisconsin pursuant to ch. 446, Stats., who accepts a chiropractic student into ~~his or her~~ the chiropractor's practice for the purpose of providing the chiropractic student with a clinical experience ~~of~~ in the practice of chiropractic.

SECTION 2. Chir 9.02 is amended to read:

Chir 9.02 Unlicensed practice by chiropractic students and graduate chiropractors. ~~The board may approve the unlicensed practice of chiropractic in this state by a bona fide~~ As provided under s. 446.02 (9) (a), Stats., a chiropractic student of a chiropractic college which offers an approved or graduate chiropractor participating in a preceptorship program approved under s. Chir 9.03, if the chiropractic college preceptorship program, under the direct, on-premises supervision of a chiropractor preceptor and the practice of chiropractic by the student meet the criteria established by the board approved under s. Chir 9.05 is not required to hold a license under ch. 446, Stats. The board may approve the unlicensed practice of chiropractic in this state by a graduate chiropractor in an approved postgraduate chiropractic preceptorship program, if

~~the postgraduate chiropractic preceptorship program, the chiropractor preceptor and the practice of chiropractic by the graduate chiropractor meet the criteria established by the board.~~

SECTION 3. Chir 9.03 (intro.) is amended to read:

Chir 9.03 (intro.) **Approved chiropractic college and postgraduate preceptorship programs.** The board shall approve a chiropractic college preceptorship program ~~which includes~~ or postgraduate preceptorship program that meets all of the following ~~criteria~~ requirements:

SECTION 4. Chir 9.03 (1) is renumbered Chir 9.03 (1) (intro.) and amended to read:

Chir 9.03 (1) (intro.) ~~Is~~ The program is operated by a chiropractic college approved by the board. ~~The~~ When making a determination as to whether to approve a chiropractic college, the board shall consider ~~whether the college is accredited by the council on chiropractic education, and shall also consider the degree of consumer protection provided by the defined standards and practices of the chiropractic college's preceptor program, as well as degree of consumer protection demonstrated by the actual operation of the chiropractic college's preceptor program.~~ all of the following:

SECTION 5. Chir 9.03 (1) (a) to (c) are created to read:

Chir 9.03 (1) (a) Whether the chiropractic college is accredited by one of the following:

1. The Council on Chiropractic Education or a successor organization.
2. The Councils on Chiropractic Education International or a successor organization.

(b) The degree of consumer protection provided by the defined standards and practices of the program.

(c) The degree of consumer protection demonstrated by the actual operation of the program.

SECTION 6. Chir 9.03 (2) and (3) (intro.) and (a) are amended to read:

Chir 9.03 (2) ~~Is~~ The program is an established component of the curriculum of the chiropractic college.

(3) (intro.) ~~Certifies~~ An authorized representative of the program certifies to the board, on forms supplied by the department, all of the following:

(a) ~~That all students who participate in the~~ If the program is a chiropractic college preceptorship program, ~~are in the last semester, trimester, or quarter of their education, and have met~~ prior to participating in the program students shall have met all requirements for graduation from the chiropractic college except for completion of the preceptorship period; ~~and~~

SECTION 7. Chir 9.03 (3) (am) is created to read:

Chir 9.03 (3) (am) If the program is a postgraduate preceptorship program, graduate chiropractors shall have graduated from a college of chiropractic approved by the board.

SECTION 8. Chir 9.03 (3) (b) is amended to read:

Chir 9.03 (3) (b) ~~That no~~ No chiropractor ~~who is a~~ preceptor shall supervise more than one chiropractic student or graduate chiropractor at any one time.

SECTION 9. Chir 9.03 (4) is renumbered Chir 9.03 (3) (c) and amended to read:

Chir 9.03 (3) (c) ~~Certifies to the board, on forms supplied by the department, that all chiropractors~~ Chiropractors who participate as chiropractor preceptors ~~are~~ shall be faculty of the chiropractic college.

SECTION 10. Chir 9.03 (5) is repealed.

SECTION 11. Chir 9.03 (Note) and (6) are amended to read:

Chir 9.03 (Note) Forms may be obtained ~~upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708~~ from the department of safety and professional services' website at dsps.wi.gov.

(6) ~~Provides~~ An authorized representative of the program provides a list to the board at least 45 days prior to every trimester or academic quarter of the chiropractors in ~~Wisconsin~~ this state who will be acting as preceptors in the program.

SECTION 12. Chir 9.04 is repealed.

SECTION 13. Chir 9.05 (intro.) is amended to read:

Chir 9.05 (intro.) **Approved chiropractor preceptors.** The board shall approve a chiropractor to be a chiropractor preceptor if the chiropractor ~~meets~~ certifies to the board, on forms supplied by the department, all of the following ~~conditions~~:

SECTION 14. Chir 9.05 (1) (intro.) is repealed.

SECTION 15. Chir 9.05 (1) (a) to (f) are renumbered Chir 9.05 (1) to (6) and amended to read:

Chir 9.05 (1) The chiropractor ~~preceptor~~ has been continuously licensed in Wisconsin for the previous 5 years, and ~~that~~ there are no pending disciplinary actions or malpractice claims against the chiropractor ~~preceptor~~ in any ~~state or country~~ jurisdiction. If ~~any~~ discipline has ever been imposed in any ~~state or country~~ jurisdiction on any professional license held by the ~~preceptor~~ chiropractor, the ~~preceptor~~ chiropractor shall provide details of the discipline for the board's review.

(2) The chiropractor ~~preceptor~~ is a member of the faculty of the chiropractic college from which the chiropractor ~~preceptor~~ will accept a chiropractic student or graduate chiropractor into a preceptorship practice.

(3) The chiropractor ~~preceptor~~ is responsible for the practice of the chiropractic student or graduate chiropractor the chiropractor ~~preceptor~~ accepts into a preceptorship practice.

(4) The chiropractor ~~preceptor~~ will identify the chiropractic student or graduate chiropractor to the patients of the preceptorship practice in such a way that no patient will tend to be misled as to the status of the chiropractic student or graduate chiropractor, and that each patient or parent or guardian of each patient will be required to provide informed consent to treatment of that patient by the chiropractic student or graduate chiropractor.

(5) The chiropractor ~~preceptor~~ will supervise no more than one chiropractic student or graduate chiropractor at any one time.

(6) The chiropractor ~~preceptor~~ will exercise direct, on-premises supervision of the chiropractic student or graduate chiropractor at all times during which the chiropractic student or graduate chiropractor is engaged in any facet of patient care in the ~~chiropractor preceptor's~~ chiropractor's clinic.

SECTION 16. Chir 9.05 (7) is created to read:

Chir 9.05 (7) The chiropractor and the chiropractic student or graduate chiropractor have agreed on the goals of the preceptor program to be completed by the chiropractic student or graduate chiropractor.

SECTION 17. Chir 9.05 (Note) is amended to read:

Chir 9.05 (Note) Forms may be obtained ~~upon request from the Department of Safety and Professional Services, Chiropractic Examining Board, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708~~ from the department of safety and professional services' website at dsps.wi.gov.

SECTION 18. Chir 9.06 (2) is amended to read:

Chir 9.06 (2) If a preceptorship is terminated under sub. (1) (d), (e), or (f), the board may approve a replacement chiropractor preceptor proposed by the chiropractic student or graduate chiropractor, ~~who satisfies~~ To be approved by the board, the proposed replacement chiropractor preceptor shall satisfy the requirements in under s. Chir 9.05 (4) (a) and (e) to (f). The proposed chiropractor preceptor ~~need is not required to~~ has not been listed named by the chiropractic college operating the preceptorship program on the most recent list provided to the board under s. Chir 9.03 (6).

SECTION 19. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis
 Original Updated Corrected

2. Administrative Rule Chapter, Title and Number
Chir 9

3. Subject
Chiropractic preceptorship

4. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	5. Chapter 20, Stats. Appropriations Affected
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6. Fiscal Effect of Implementing the Rule
 No Fiscal Effect Increase Existing Revenues Increase Costs
 Indeterminate Decrease Existing Revenues Could Absorb Within Agency's Budget
 Decrease Cost

7. The Rule Will Impact the Following (Check All That Apply)
 State's Economy Specific Businesses/Sectors
 Local Government Units Public Utility Rate Payers
 Small Businesses **(if checked, complete Attachment A)**

8. Would Implementation and Compliance Costs Be Greater Than \$20 million?
 Yes No

9. Policy Problem Addressed by the Rule
The Board conducted an evaluation and update of ch. Chir 9 to ensure consistency with current professional and academic practices and applicable Wisconsin statutes. As a result, the following updates have been made:

- Section Chir 9.03 (1) is revised to include the Councils on Chiropractic Education International as an approved accreditor of chiropractic colleges.
- As most of the criteria for approval of chiropractic college preceptorship programs under s. Chir 9.03 and postgraduate preceptorship programs under s. Chir 9.04 are identical, the sections have been consolidated.
- Other provisions throughout ch. Chir 9 have been revised to update notes, provide clarity, and conform to current drafting standards.

10. Summary of the businesses, business sectors, associations representing business, local governmental units, and individuals that may be affected by the proposed rule that were contacted for comments.
The proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.

11. Identify the local governmental units that participated in the development of this EIA.
No local governmental units participated in the development of this EIA.

12. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)
This proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.

13. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule
The benefit to implementing the rule is providing consistency with current professional and academic practices and applicable Wisconsin statutes. If the rule is not implemented, it will continue to not include the CCEI as an approved accreditor of chiropractic colleges.

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

14. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is consistency with current professional and academic practices and applicable Wisconsin statutes.

15. Compare With Approaches Being Used by Federal Government

None

16. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: Rules of the Illinois Department of Financial and Professional Regulation relating to chiropractic physician preceptorship were repealed effective February 15, 2000. (68 Ill. Adm. Code 1285.105, repealed at 24 Ill. Reg. 3620).

Iowa: Rules of the Iowa Board of Chiropractic administer chiropractic preceptorship programs (645 IAC 42.1 to 42.6). A program is established by a Board-approved chiropractic college and allows a chiropractic intern or resident from the college to practice under the supervision of a chiropractic preceptor (a chiropractic physician licensed and practicing in Iowa). The rules specify the criteria for Board approval of chiropractic colleges, preceptorship programs, and chiropractic preceptors, and the conditions under which a preceptorship program must be terminated.

Michigan: Michigan statutes permit a chiropractic student to apply for a limited license to engage in the practice of chiropractic under the supervision of a licensed chiropractor (MCL 333.16412). The applicant must have successfully completed 2 years of education in a college of arts and sciences and 2 years, 4 semesters, or 6 quarter terms in a chiropractic college approved by the Michigan Board of Chiropractic. The limited license is valid for not more than 6 months and is nonrenewable.

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners administer graduate preceptorship programs (Minnesota Rules, parts 2500.2500 to 2500.2530). A program allows an extern (a graduate of an accredited chiropractic college) to work under the supervision of a preceptor (a chiropractic physician licensed and in active private practice in Minnesota) for a period of up to 12 months. The rules specify the role of the preceptor, the eligibility and responsibilities of the preceptor and the extern, the minimum requirements of a preceptorship training program, and the conditions under which a preceptorship program must be terminated.

17. Contact Name

Dale Kleven

18. Contact Phone Number

(608) 261-4472

This document can be made available in alternate formats to individuals with disabilities upon request.



WISCONSIN LEGISLATIVE COUNCIL RULES CLEARINGHOUSE

Scott Grosz
Clearinghouse Director

Jessica Karls-Ruplinger
Legislative Council Acting Director

Margit Kelley
Clearinghouse Assistant Director

CLEARINGHOUSE RULE 18-103

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Legislative Reference Bureau and the Legislative Council Staff, dated December 2014.]

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

Under both the current code and the proposed rule, s. Chir 9.03 (intro.) requires the board to approve a chiropractic college preceptorship program that meets all of the enumerated requirements. The treatment of s. Chir 9.03 (1) (intro.) in the proposed rule requires that the program be operated by a chiropractic college approved by the board. That section of the proposed rule further provides that the board “shall consider” a number of factors when making a determination whether to approve a chiropractic college, but does not clarify whether the board needs to make any findings outside of merely considering those factors. The language could be modified if the intent is to require that, for example, the chiropractic college must be accredited by an identified organization in order to be approved by the board.

RIEGLEMAN LAW OFFICES, S.C.

Attorney Dan A. Riegleman

N63 W23965 Main Street
Sussex, Wisconsin 53089

PHONE (262) 246-4606

FAX (262) 246-4644

www.sussexlawyer.com

December 27, 2018

VIA E-MAIL ONLY (DSPSadminRules@wisconsin.gov)

Mr. Dale Kleven
Administrative Rules Coordinator
Department of Safety & Professional Services
P.O. Box 836
Madison, WI 53708-8366

Dear Mr. Kleven:

I want to again thank the Chiropractic Examining Board for allowing me an opportunity to speak at the November 29, 2018 meeting on concerns with the proposed revisions to CHIR, Chapter 4. As requested, I have attached a written summary of my presentation.

Following the presentation, I recall that three (3) questions were asked by Board Members. I would offer the following responses to those questions:

1. Do other healthcare professionals have language in the Statutes or Administrative Code describing both their "scope of care" and "scope of practice"?

I believe that the commonly referenced health care professions have those descriptions to varying degrees. Language as to the nature of their care is often described in the Statutes while the nature of their practice is clarified in the Administrative Code. For instance, with massage therapists and body workers, Wis. Stat. §460.01(4) defines that form of healthcare; while MTBT 1.02(19) provides a description of how the profession is performed. Additionally, the optometry definition of care is found at Wis. Stat. §449.01(1) with scope of practice stated at OPT 1.02; while occupational therapists have their practice defined at Wis. Stat. §448.96(4) and (5) with scope of practice stated at OT 4.02.

With regard to other health care providers, the distinction is not quite as clear, but still exists, as referenced below:

<u>Profession</u>	<u>Scope of Care/Definition</u>	<u>Scope of Practice</u>
Radiographers	Wis. Stat §462.01(5)	RAD 4.01
Podiatrists	Wis. Stat §448.60(3)(4)	(limited)
Athletic Trainers	Wis. Stat §448.95(5)	AT1.02(6) & AT4.01 – "Protocol"
Physical Therapists	Wis. Stat §448.50(4)(a) & Wis. Stat §448.50(1m)(3)	P.T. 6.01 – with M.D. "referral"

RIEGLEMAN LAW OFFICES, S.C.

Mr. Dale Kleven
December 27, 2018
Page Two

2. Is the chiropractor's scope of practice addressed under the "chiropractic science" language of current Rules?

The "chiropractic science" phrase with the existing rules is listed at CHIR 4.02(1). Under the proposed Rule change, the phrase, "chiropractic science" remains, but the extensive language which follows in the current rule is repealed and recreated to incorporate only the definition of chiropractic from Wis. Stat. §446.01(2)(a).

3. Will defining the scope of chiropractic practice in the proposed Rule constitute a conflict with the statutory definition of chiropractic in Wis. Stat. §446.01(2)?

There should be no legal conflict with incorporating the scope of practice language in the new Rules for two (2) principal reasons. First, the existing, Administrative Rules on chiropractic already contain a more detailed description on the scope of practice which has not previously been challenged by any court action. Second, the Administrative Code provisions relating to other healthcare professions demonstrate a pattern of providing a more detailed explanation or description of that profession's scope of practice than the general descriptions contained within the statutes for each profession.

I would respectfully encourage the Examining Board to reinstate the language of CHIR 4.03 into the proposed rules or otherwise adopt more carefully crafted language relating to the chiropractor scope of practice. I remain concerned that other institutions may ultimately attempt to define or intrude upon the chiropractor scope of practice if it is not clearly defined in the Administrative Code. Those institutions could include other healthcare professions, insurance companies, or the Courts. As noted in the conclusion of the Attorney General's opinion from 2001, the Chiropractic Examining Board has the ultimate responsibility to describe the unique and distinguishing practice characteristics of its own profession in any revised Chapter 4 of the Administrative Code.

Respectfully submitted,

RIEGLEMAN LAW OFFICES, S.C.



Dan A. Riegleman

DAR/ap

PROPOSE Reinstating CHIR 4.03 into draft rule for 3 reasons:

1. Only language clearly describing chiropractor's "scope of practice"
 - a. Proposed 4.02(1) defines scope of care by generally duplicating Wis. Stats. 446.01(2)(a)
 - b. Proposed CHIR 4.02(1) also eliminates previous, expanded definition of "chiropractic science" at current 4.02(1) leaving only a description of what constitutes the profession as "identifying the cause of departure" from health of the human ... and treating "such conditions without the use of drugs or surgery."
 - c. Existing CHIR 4.03 described the manner by which chiropractic is performed and contains details and terminology unique to profession such as: (what done) "adjustment", (where done) "spinal column, skeletal articulations and adjacent tissue", (purpose) "spinal subluxations and associated nerve energy expression", (how done) "use of procedures and instruments complementary to treatment thereof, (ancillary analysis) "drawing of blood", "use of x-rays", and "other instruments" **NOTE:** express language of blood draw and x-rays are excluded under proposed rule.
 - d. Broad and vague definition in proposed 4.02(1) results in uncertainty as to manner by which chiropractic is performed. Example offered at hearing – Is hyperbaric oxygen therapy now regarded as the practice of chiropractic?

2. Excluding existing language of CHIR 4.03 (and similar portions from CHIR 4.02(1)) creates potential for health risk to public and liability exposure to chiropractors
 - a. Vague reference to "conditions" causing departure from human health can be broadly interpreted to allow chiropractors to provide wide and uncertain forms of care; some of which can cause risk to public because of a lack of qualified training or knowledge.
 - b. Vague reference to chiropractic "treatment" of such conditions broadly expands the areas of the human body which chiropractors could be

responsible for addressing; exposing the profession to greater liability for areas of body subject to care and the forms of treatment provided.

3. Existing administrative code language has had substantial legal significance to the chiropractic profession
 - a. Case law from Goldstein v. Janusz Chiropractic Clinics, S.C. (1998 Wisconsin Court of Appeals) relied extensively upon CHIR 4.03 in determining the scope of chiropractor's duty with respect to areas of the body. "The statutory definitions of the science of chiropractic and of chiropractic practice lead to the conclusion that, in Wisconsin, chiropractors' responsibility to recognize conditions is limited to certain human body parts that they can treat and that the scope of their practice does not encompass treatment of the lungs. (Reference to existing CHIR 4.03 in relieving the chiropractor from liability for failure to note a mass on patient's lung.)
 - b. Wisconsin Attorney General's Opinion, January 30, 2001 (Copy of decision filed prior to public hearing) relied extensively upon existing CHIR 4.02 and CHIR 4.03 to address whether other health care professions, such as massage therapists and physical therapists can perform "chiropractic manipulation/adjustment". Attorney general noted:
 - Existing terms in administrative code are "undefined" such as "adjustments" and "adjacent tissue"
 - Physical therapy and chiropractic have areas of the body in which they "intersect" in their treatment
 - In future administrative efforts, the Chiropractic Examining Board should "define the particular procedures" and "focus on the unique, specific features of the discipline of chiropractic science."
 - Opinion concludes by encouraging the Examining Boards "...to sharpen the definitions of their respective practice areas, in order to give both chiropractors and physical therapists adequate guidance about the permissible scope of their respective practices."

STATE OF WISCONSIN
CHIROPRACTIC EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	CHIROPRACTIC EXAMINING
CHIROPRACTIC EXAMINING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Chiropractic Examining Board to **repeal** Chir 5.02 (3); to **amend** Chir 5.01 (1) (a), (1g) (a), (1r) (a), (2) (b), and (3), 5.02 (1) (intro.), (a), (b), (bm), (c), and (f), (2) (a), and (4) (a) 5. and 6., and 5.03 (intro.); and to **create** Chir 5.01 (1) (g), (1g) (c), (1r) (c), (4), and (5) and 5.03 (6), relating to continuing education.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Sections 446.025 (3) (b), 446.026 (3) (b), and 446.028, Stats.

Statutory authority:

Sections 15.08 (5) (b) and 227.11 (2) (a), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., provides that an examining board, such as the Chiropractic Examining Board, “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains . . .”

Section 227.11 (2) (a), Stats., sets forth the parameters of an agency’s rule-making authority, stating an agency “may promulgate rules interpreting provisions of any statute enforced or administered by the agency. . .but a rule is not valid if the rule exceeds the bounds of correct interpretation.”

Related statute or rule:

None.

Plain language analysis:

The Board conducted an evaluation and update of ch. Chir 5 to ensure consistency with current practices and applicable Wisconsin statutes. As a result, the following updates have been made:

- The date referenced in s. Chir 5.01 (1) (a), (1g) (a), (1r) (a), and (2) (b) is revised from December 14 to December 15 to align with the renewal date under s. 440.08 (2) (a) 24., Stats.

- Section Chir 5.01 (1) (g), (1g) (c), and (1r) (c) are created to allow a chiropractor, chiropractic radiological technician, or chiropractic technician to acquire up to half of their required continuing education credit hours by participating in online continuing education programs approved by the Board. This provision first applies to the renewal period ending on December 15, 2022.
- Section Chir 5.01 (3) is revised and s. Chir 5.01 (5) is created to comply with s. 440.03 (4m), Stats., as created by 2017 Wisconsin Act 59. Under this provision, the Board may require a credential holder to submit proof of completing continuing education programs or courses only if a complaint is made against the credential holder.
- Section Chir 5.02 (1) (a) is revised to remove the American Chiropractic Association (ACA) as an approved program sponsor, as the ACA is not included in the definition of “program sponsor” under s. 446.028, Stats.
- The requirement under s. Chir 5.02 (1) (b) and (2) (a) that program subject matter relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) is revised. The revised requirement is that program subject matter contributes to the advancement, extension, and enhancement of the clinical skills of a chiropractor and fosters the enhancement of general or specialized practice and values.
- Section Chir 5.03 is revised to require the Board to deny approval of a continuing education program for any of the enumerated reasons. Current rules allow the Board to exercise discretionary authority in issuing a denial.
- Other provisions throughout ch. Chir 5 have been revised to provide clarity and conform to current drafting standards.

Summary of, and comparison with, existing or proposed federal regulation:

None.

Comparison with rules in adjacent states:

Illinois: Rules of the Illinois Department of Financial and Professional Regulation address continuing medical education (CME) for persons licensed to practice chiropractic in Illinois (68 Ill. Adm. Code 1285.110). A CME program must be sponsored by one of the following:

- The Accreditation Council on Continuing Medical Education (ACCME) and organizations accredited by ACCME as sponsors of CME.
- The Illinois State Medical Society or its affiliates.
- The Illinois Chiropractic Society or its affiliates.
- The Illinois Prairie State Chiropractic Association or its affiliates.
- The International Chiropractic Association or its affiliates.
- The American Chiropractic Association or its affiliates.

- Any other accredited school, college or university, state agency, or any other person, firm, or association that has been approved and authorized by the Department.

A CME program must meet all of the following requirements:

- Contributes to the advancement, extension and enhancement of the professional skills and scientific knowledge of the licensee.
- Fosters the enhancement of general or specialized practice and values.
- Is developed and presented by persons with education, experience, or both in the subject matter of the program.
- Specifies the course objectives, course content and teaching methods to be used.
- Specifies the number of CME hours that may be applied to fulfilling the Illinois CME requirements for license renewal.
- Provides a mechanism for evaluation of the program and instructor by the participants.
- Provides each participant in the program with a certificate of attendance or participation.

As the rules do not expressly allow or prohibit online CME programs, an online CME program meeting the above requirements may be used to satisfy the CME requirement.

Iowa: Rules of the Iowa Board of Chiropractic address continuing education for chiropractic physicians (645 IAC 44.1 to 44.11). A continuing education program must meet all of the following requirements:

- Constitutes an organized program of learning which contributes directly to the professional competency of the licensee.
- Pertains to subject matters which integrally relate to the practice of the profession.
- Is conducted by individuals who have specialized education, training and experience by reason of which said individuals should be considered qualified concerning the subject matter of the program.
- Fulfills stated program goals, objectives, or both.
- Provides proof of attendance to licensees in attendance.

Of the 60 hours of continuing education during a renewal period, 20 hours relating to clinical case management of chiropractic patients must be earned by completing a program in which an instructor conducts the class employing a traditional in-person, classroom-type presentation and the licensee is in attendance in the same room as the instructor.

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs address continuing education for persons licensed to practice chiropractic in Michigan (Mich Admin Code, R 338.12006 to R 338.12008a). A continuing education program must be accredited by the Commission on Accreditation of the Council on Chiropractic Education or approved by another state's board of chiropractic.

Fifteen of the 30 required hours of continuing education may be from online programs, excluding the required 2 hours of continuing education on physical measures, the 2 required hours of continuing education on the performance and ordering of tests, and any continuing education program in which a participant performs a chiropractic manipulation or adjustment on another individual.

Minnesota: Rules of the Minnesota Board of Chiropractic Examiners address continuing education for persons licensed to practice chiropractic in Minnesota (Minnesota Rules, parts 2500.1100 to 2500.2000). The Board registers and approves continuing education sponsors. A program sponsor must use the following criteria to determine if a continuing education program is approved and the number of continuing education units for which approval is granted:

- Whether the material to be presented is likely to enhance the practitioner's knowledge and skill in the practice of chiropractic.
- Whether the instructors or speakers presenting the program, and those persons preparing the program, are sufficiently qualified in the field of their instruction, either by practical or academic experience or both.
- Whether the classes will be held in a suitable setting, or under suitable conditions, that are considered by the Board to be conducive to the learning process.
- Whether the program may improve the practitioner's ability to keep records necessary to substantiate the need for chiropractic care.

A chiropractor may obtain the annual continuing education requirement through alternatives to traditional classroom presentations. The programs must be approved by the Board or a Board-approved sponsor. An online program approved for continuing education credit must include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation.

Summary of factual data and analytical methodologies:

The rules were developed by reviewing the provisions of ch. Chir 5 to ensure the rules are consistent with current practices and applicable Wisconsin statutes. No additional factual data or analytical methodologies were used to develop the proposed rules.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact analysis:

The proposed rules will be posted for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator, Nia Trammell, may be contacted by calling (608) 266-8608.

Agency contact person:

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

TEXT OF RULE

SECTION 1. Chir 5.01 (1) (a) is amended to read:

Chir 5.01 (1) (a) Every chiropractor shall complete at least 40 continuing education credit hours in approved continuing education programs during each 2-year license registration period ending on December ~~14~~ 15 of each even-numbered year, except as specified in s. Chir 3.02 (1) (c).

SECTION 2. Chir 5.01 (1) (g) is created to read:

Chir 5.01 (1) (g) Beginning with the license registration period ending on December 15, 2022, up to 20 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.

SECTION 3. Chir 5.01 (1g) (a) is amended to read:

Chir 5.01 (1g) (a) Every chiropractic radiological technician shall complete at least 12 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December ~~14~~ 15 of each even-numbered year. A chiropractic radiological technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.

SECTION 4. Chir 5.01 (1g) (c) is created to read:

Chir 5.01 (1g) (c) Beginning with the certificate registration period ending on December 15, 2022, up to 6 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.

SECTION 5. Chir 5.01 (1r) (a) is amended to read:

Chir 5.01 (1r) (a) Every chiropractic technician shall complete at least 6 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December ~~14~~ 15 of each even-numbered year. A chiropractic technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.

SECTION 6. Chir 5.01 (1r) (c) is created to read:

Chir 5.01 (1r) (c) Beginning with the certificate registration period ending on December 15, 2022, up to 3 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.

SECTION 7. Chir 5.01 (2) (b) and (3) are amended to read:

Chir 5.01 (2) (b) If the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during the period, continuing education hours acquired on or after December ~~14~~ 15 of any even-numbered year will apply to the preceding period only if the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during that period, and will not apply to any other period or purpose.

(3) To obtain credit for completion of continuing education programs, a chiropractor, chiropractic radiological technician, or chiropractic technician shall certify on ~~his or her~~ the application for credential renewal that ~~he or she has completed~~ all continuing education credits have been completed as required ~~in~~ under this section ~~for the previous 2-year credential registration period. A chiropractor, chiropractic radiological technician, or chiropractic technician shall retain for a minimum period of 4 years, and shall make available to the board or its agent upon request, certificates of attendance issued by the program sponsor for all continuing education programs for which he or she claims credit for purposes of renewal of his or her credential. Chiropractors, chiropractic radiological technicians, or chiropractic technicians attending a program for credit shall be present in the room where a program is being presented in order to claim credit. A chiropractor, chiropractic radiological technician, or chiropractic technician may claim credit hours for continuing education for which he or she was in actual attendance in the room, except for authorized break periods or to attend to personal hygiene needs.~~

SECTION 8. Chir 5.01 (4) to (6) are created to read:

Chir 5.01 (4) A chiropractor, chiropractic radiological technician, or chiropractic technician shall retain a certificate or other evidence of attendance issued by the program sponsor for a minimum of 4 years from the date of completion of a continuing education program.

(5) The board shall require any chiropractor, chiropractic radiological technician, or chiropractic technician who is under investigation by the board for alleged misconduct to submit evidence of compliance with the continuing education requirements under this section.

(6) Except as provided under subs. (1) (g), (1g) (c), and (1r) (c), credit may only be claimed for completing a program in which an instructor employs an in person, classroom-type presentation and the chiropractor, chiropractic radiological technician, or chiropractic technician is in attendance in the same room as the instructor. A home study or other distance learning program may be approved for credit only in cases of extreme hardship, as determined by the board.

SECTION 9. Chir 5.02 (1) (intro.), (a), (b), (bm), (c), and (f) and (2) (a) are amended to read:

Chir 5.02 (1) (intro.) The board may approve a continuing education program ~~which~~ that meets all of the following minimum requirements:

(a) The program is sponsored by the Wisconsin ~~chiropractic association~~ Chiropractic Association, ~~the American chiropractic association~~, ~~the international chiropractors association~~ International Chiropractors Association, a college of chiropractic approved by the board, or a college of medicine or osteopathy accredited by an agency recognized by the United States department of education.

~~(b) Chiropractors. The~~ For a continuing education program required under s. Chir 5.01 (1) (a), the program subject matter relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) the advancement, extension, and enhancement of the clinical skills of a chiropractor and fosters the enhancement of general or specialized practice and values. The board will not approve credit for continuing education regarding a technique or practice which the board has determined to be unsafe or ineffective.

~~(bm) Chiropractic radiological technician and chiropractic technician. The~~ For a continuing education program required under s. Chir 5.01 (1g) (a) or (1r) (a), the program subject matter relates to improving the clinical skills of a chiropractic radiological technician or chiropractic technician, as applicable.

(c) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered chiropractor, chiropractic radiologic technician, or chiropractic technician, as applicable, ~~at~~ participating in the program, and the program sponsor agrees to keep the records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.

(f) When a course instructor of the program is on the undergraduate or postgraduate faculty of a chiropractic college, the program sponsor has provided written verification that the course instructor has been appointed in accordance with the accreditation standards of the ~~council~~ Council on chiropractic education Chiropractic Education, and that the chiropractic college exercises sufficient supervision over a faculty member's course content.

(2) (a) Continuing education programs may include subject material ~~other than that which relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college, meeting the requirements of s. Chir 2.02 (6) (b)~~ that does not meet the requirements under sub. (1) (b). However, only the parts of the program ~~which relate to improving the clinical skills of a chiropractor and are generally taught at the undergraduate or postgraduate level of a chiropractic college~~ that include subject material that meets the requirements under sub. (1) (b) are eligible for credit.

SECTION 10. Chir 5.02 (3) is repealed.

SECTION 11. Chir 5.02 (4) (a) 5. and 6. are amended to read:

Chir 5.02 (4) (a) 5. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter ~~is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) and relates to improving the clinical skills of a chiropractor~~ meets the requirements under sub. (1) (b). A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.

6. Describe the names and qualifications of all instructors, and if applicable, whether an instructor of the program who is an undergraduate or postgraduate faculty member of a sponsoring college was appointed in accordance with accreditation standards of the Council on Chiropractic Education (~~CCE~~) or by an agency approved by the United States ~~Office of Education or its successor~~ department of education.

SECTION 12. Chir 5.03 (intro.) is amended to read:

Chir 5.03 (intro.) Application denials. The board ~~may~~ shall deny approval of an application for any of the following reasons:

SECTION 13. Chir 5.03 (6) is created to read:

Chir 5.03 (6) The program subject matter relates to practice that is prohibited under s. Chir 4.05.

SECTION 14. EFFECTIVE DATE. The rules adopted in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register, pursuant to s. 227.22 (2) (intro.), Stats.

(END OF TEXT OF RULE)

Chapter Chir 5 CONTINUING EDUCATION

Chir 5.01 Continuing education requirements for credential renewal.

(1)

- (a) Every chiropractor shall complete at least 40 continuing education credit hours in approved continuing education programs during each 2-year license registration period ending on December ~~14~~ 15 of each even-numbered year, except as specified in s. Chir 3.02 (1) (c).
- (b) Continuing education requirements for license renewal apply to the first full 2-year period in which a chiropractor is licensed.
- (c) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.
- (d) Course work completed in pursuit of the educational requirements of ch. Chir 12 may be counted on an hour-for-hour basis.
- (e) Of the 40 continuing education credit hours in par. (a), a chiropractor holding a nutritional counseling certificate issued under ch. Chir 12 shall complete at least 4 continuing education hours in nutrition.
- (f) One credit of course work completed to become proficient in the use of an automated external defibrillator as required in ss. Chir 2.02 (6) (c), 3.02 (1) (e), and 3.03 (1) (i), may be counted as a continuing education credit hour.
- (g) Beginning with the license registration period ending on December 15, 2022, up to 20 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.

(1g)

- (a) Every chiropractic radiological technician shall complete at least 12 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December ~~14~~ 15 of each even-numbered year. A chiropractic radiological technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.
- (b) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.
- (c) Beginning with the certificate registration period ending on December 15, 2022, up to 6 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.

(1r)

- (a) Every chiropractic technician shall complete at least 6 continuing education credit hours in approved continuing education programs during each 2-year certificate registration period ending on December ~~14~~ 15 of each even-numbered year. A chiropractic technician who receives an initial certificate during a licensing biennium is not required to satisfy the continuing education requirement from the date of that certificate to the end of that licensing biennium.
 - (b) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.
 - (c) Beginning with the certificate registration period ending on December 15, 2022, up to 3 of the continuing education credit hours required under par. (a) may be acquired through participation in online continuing education programs approved under s. Chir 5.02.
- (2)** Continuing education credit hours may apply only to the 2-year license period in which the credit hours are acquired, unless either of the following applies:

- (a) The continuing education credit hours required of a particular chiropractor, chiropractic radiological technician, or chiropractic technician as a consequence of a disciplinary proceeding, informal settlement conference, or resolution of an investigation into the conduct or competence of the chiropractor, chiropractic radiological technician, or chiropractic technician may not be counted towards the fulfillment of generally applicable continuing education requirements.
- (b) If the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during the period, continuing education hours acquired on or after December ~~14~~ 15 of any even-numbered year will apply to the preceding period only if the chiropractor, chiropractic radiological technician, or chiropractic technician has failed to meet the credential renewal requirement during that period, and will not apply to any other period or purpose.
- (3) To obtain credit for completion of continuing education programs, a chiropractor, chiropractic radiological technician, or chiropractic technician shall certify on ~~his or her~~ the application for credential renewal that ~~he or she has completed~~ all continuing education credits have been completed as required ~~in under~~ this section ~~for the previous 2-year credential registration period. A chiropractor, chiropractic radiological technician, or chiropractic technician shall retain for a minimum period of 4 years, and shall make available to the board or its agent upon request, certificates of attendance issued by the program sponsor for all continuing education programs for which he or she claims credit for purposes of renewal of his or her credential. Chiropractors, chiropractic radiological technicians, or chiropractic technicians attending a program for credit shall be present in the room where a program is being presented in order to claim credit. A chiropractor, chiropractic radiological technician, or chiropractic technician may claim credit hours for continuing education for which he or she was in actual attendance in the room, except for authorized break periods or to attend to personal hygiene needs.~~
- (4) A chiropractor, chiropractic radiological technician, or chiropractic technician shall retain a certificate or other evidence of attendance issued by the program sponsor for a minimum of 4 years from the date of completion of a continuing education program.
- (5) The board shall require any chiropractor, chiropractic radiological technician, or chiropractic technician who is under investigation by the board for alleged misconduct to submit evidence of compliance with the continuing education requirements under this section.
- (6) Except as provided under subs. (1) (g), (1g) (c), and (1r) (c), credit may only be claimed for completing a program in which an instructor employs an in person, classroom-type presentation and the chiropractor, chiropractic radiological technician, or chiropractic technician is in attendance in the same room as the instructor. A home study or other distance learning program may be approved for credit only in cases of extreme hardship, as determined by the board.

Chir 5.02 Approval of continuing education programs.

- (1) The board may approve a continuing education program ~~which that~~ meets all of the following ~~minimum~~ requirements:
 - (a) The program is sponsored by the Wisconsin ~~chiropractic association~~ Chiropractic Association, the ~~American chiropractic association~~, the ~~international chiropractors association~~ International Chiropractors Association, a college of chiropractic approved by the board, or a college of medicine or osteopathy accredited by an agency recognized by the United States department of education.
 - (b) ~~Chiropractors. The~~ For a continuing education program required under s. Chir 5.01 (1) (a), the program subject matter relates contributes to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) the advancement, extension, and enhancement of the clinical skills of a chiropractor and fosters the enhancement of general or specialized practice and values. ~~The board will not approve credit for continuing education regarding a technique or practice which the board has determined to be unsafe or ineffective.~~

- ~~(bm) *Chiropractic radiological technician and chiropractic technician.* The For a continuing education program required under s. Chir 5.01 (1g) (a) or (1r) (a), the program subject matter relates to improving the clinical skills of a chiropractic radiological technician or chiropractic technician, as applicable.~~
- (c) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered chiropractor, chiropractic radiologic technician, or chiropractic technician, as applicable, ~~at participating in~~ the program, and the program sponsor agrees to keep the records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.
- (d) A program sponsor shall not assign or delegate its responsibilities to monitor or record attendance, provide evidence of attendance, validate course content, or provide information on instructors or other aspects of the program unless the assignment or delegation is specifically identified in the application for approval and approved by the board.
- (e) The program sponsor has reviewed and validated the program's course content to ensure its compliance with pars. (b) and (bm).
- (f) When a course instructor of the program is on the undergraduate or postgraduate faculty of a chiropractic college, the program sponsor has provided written verification that the course instructor has been appointed in accordance with the accreditation standards of the ~~council~~ Council on chiropractic education Chiropractic Education, and that the chiropractic college exercises sufficient supervision over a faculty member's course content.
- (g) The program offers significant professional educational benefit for participants, as determined by the board.
- (h) The instructor is qualified to present the course.
- (1m) The board shall approve a continuing education program that is approved under s. 46.03 (38), Stats., to provide instruction in the use of an automated external defibrillator. Subsections (1) to (4) and (6) do not apply to programs approved under this section.
- (2)
- (a) Continuing education programs may include subject material ~~other than that which relates to improving the clinical skills of a chiropractor and is generally taught at the undergraduate or postgraduate level of a chiropractic college, meeting the requirements of s. Chir 2.02 (6) (b) that does not meet the requirements under sub. (1) (b).~~ However, only the parts of the program ~~which relate to improving the clinical skills of a chiropractor and are generally taught at the undergraduate or postgraduate level of a chiropractic college that include subject material that meets the requirements under sub. (1) (b)~~ are eligible for credit.
- (am) Continuing education programs may include subject material other than that which relates to improving the clinical skills of a chiropractic radiological technician or chiropractic technician. However, only the parts of the program which relate to improving the clinical skills of a chiropractic radiological technician or chiropractic technician, as applicable, are eligible for credit.
- (b) Any presentation, program content, materials or displays for the advertising, promotion, sale or marketing of equipment, devices, instruments or other material of any kind or purpose shall be kept separate from the program content and presentation for which approval is applied and granted.
- (c) Programs shall be approved for one hour of continuing education for every 50 minutes of instruction.
- ~~(3) Home study programs may be approved for credit only in cases of extreme hardship, as determined by the board.~~
- (4)
- (a) An application for approval of a continuing education program shall:

1. Be on a form provided by the board.

Note: Application forms are available on ~~request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708~~ the department's website at dsps.wi.gov, or by request from the Department of Safety and Professional Services, P. O. Box 8935, Madison, Wisconsin 53708, or call (608) 266-2112. **This note is on a list for LRB to revise. The rule does not reflect this change.**

2. Identify the name and address of the program sponsor and describe how the program sponsor qualifies under this section.
3. Describe the time and place of the program.
4. Be complete as prescribed in this subsection and filed with the board no later than 75 days prior to the program date. An application is not considered complete until such time as all information required to be submitted with the application, and any supplementary information requested by the board, is received by the board.
5. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter ~~is generally taught at the undergraduate or postgraduate level of a chiropractic college meeting the requirements of s. Chir 2.02 (6) (b) and relates to improving the clinical skills of a chiropractor~~ meets the requirements under sub. (1) (b). A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.
- 5m. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter relates to improving the clinical skills of a chiropractic radiological technician or a chiropractic technician, as applicable. A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.
6. Describe the names and qualifications of all instructors, and if applicable, whether an instructor of the program who is an undergraduate or postgraduate faculty member of a sponsoring college was appointed in accordance with accreditation standards of the Council on Chiropractic Education (~~CCE~~) or by an agency approved by the United States ~~Office of Education or its successor~~ department of education.
7. Identify whether the program sponsor intends to assign or delegate any of its responsibilities to another person or entity, and if so, include each of the following:
 - a. A specific description of the assignment or delegation.
 - b. The person or entity who is assigned or delegated to perform the responsibility, including name, address and qualification to perform the responsibility.
 - c. The method by which the program sponsor intends to assure that the delegated or assigned responsibility is performed.
- (b) If necessary in order to determine whether an applicant meets the requirements of this chapter, the board may require that the applicant submit information in addition to that described in this section.
- (5) Continuing education credit may not be awarded for meals or break periods.
- (6) The sponsor of an approved program shall ensure that the program is carried out and presented as represented to and approved by the board, and that all responsibilities of the program sponsor, an instructor, and any person or entity delegated or assigned a responsibility relating to a program approved by the board are fulfilled.

Note: Continuing education approval request forms are available ~~upon request from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708 on the department's website at dps.wi.gov, or by request from the Department of Safety and Professional Services, P. O. Box 8935, Madison, Wisconsin 53708, or call (608) 266-2112.~~ This note is on a list for LRB to revise. The rule does not reflect this change.

Chir 5.03 Application denials. The board ~~may~~ shall deny approval of an application for any of the following reasons:

- (1) The program or program sponsor does not meet requirements established in this chapter.
- (2) The emphasis of the program is on the business, management, or insurance aspects of a chiropractic practice rather than on improving the clinical skills of the chiropractor, chiropractic radiological technician, or chiropractic technician, as applicable.
- (3) The board determines that the program sponsor has not provided adequate assurance that responsibilities delegated or assigned to others will be satisfactorily performed.

- (4)** The program sponsor, an instructor, or a person delegated or assigned a responsibility has a financial, personal or professional interest which conflicts directly with the performance of responsibilities in this chapter.
- (5)** Failure on the part of a program sponsor, an instructor, or a person delegated or assigned a responsibility to carry out a program as represented to and approved by the board or as provided in this chapter.
- (6)** The program subject matter relates to practice that is prohibited under s. Chir 4.05.

STATEMENT OF SCOPE

Chiropractic Examining Board

Rule No.: Chapter Chir 5

Relating to: Approval of Continuing Education Programs

Rule Type: Permanent

1. Finding/nature of emergency (Emergency Rule only):

N/A

2. Detailed description of the objective of the proposed rule:

The Chiropractic Examining Board will establish requirements for approval of continuing education programs recognized by the Providers of Approved Continuing Education (PACE) of the Federation of Chiropractic Licensing Boards.

3. Description of the existing policies relevant to the rule, new policies proposed to be included in the rule, and an analysis of policy alternatives:

Current rules provide requirements for approval of continuing education programs. The Board has determined that continuing education programs that meet the standards established by PACE should not be subject to the same requirements for approval as continuing education programs that are not. The proposed rules will establish separate requirements for approval of continuing education programs recognized by PACE.

4. Detailed explanation of statutory authority for the rule (including the statutory citation and language):

Section 15.08 (5) (b), Stats., provides that examining boards, such as the Chiropractic Examining Board, "shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, . . ."

Section 446.025 (3) (b), Stats., provides "[a] chiropractic radiological technician shall, at the time that he or she applies for renewal of a certificate . . .submit evidence satisfactory to the examining board that he or she has completed at least 12 continuing educational credit hours in programs established by rules promulgated by the examining board."

Section 446.026 (3) (b), Stats., provides "[a] chiropractic technician shall, at the time that he or she applies for renewal of a certificate . . .submit evidence satisfactory to the examining board that he or she has completed at least 6 continuing educational credit hours in programs established by rules promulgated by the examining board."

5. Estimate of amount of time that state employees will spend developing the rule and of other resources necessary to develop the rule:

80 hours

6. List with description of all entities that may be affected by the proposed rule:

Wisconsin credentialed chiropractors, chiropractic radiological technicians, and chiropractic technicians, as well as sponsors and providers of continuing education required to be completed by persons with these credentials.

7. Summary and preliminary comparison with any existing or proposed federal regulation that is intended to address the activities to be regulated by the proposed rule:

None.

8. Anticipated economic impact of implementing the rule (note if the rule is likely to have a significant economic impact on small businesses):

The proposed rule will have minimal to no economic impact on small businesses and the state's economy as a whole.

Contact Person: Dale Kleven, Administrative Rules Coordinator, DSPSAdminRules@wisconsin.gov, (608) 261-4472

Approved for publication:

Approved for implementation:

Authorized Signature

Authorized Signature

Date Submitted

Date Submitted

Chapter Chir 6

STANDARDS OF CONDUCT

Chir 6.01 Authority.
Chir 6.015 Definition.

Chir 6.02 Unprofessional conduct.
Chir 6.03 Duty to evaluate and inform.

Chir 6.01 Authority. The rules in ch. Chir 6 are adopted under authority in ss. 15.08 (5) (b), 227.11 and 446.04, Stats.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; correction made under s. 13.93 (2m) (b) 7., Stats., Register, March, 1990, No. 411.

Chir 6.015 Definition. In this chapter:

(1) "Advertisement" means any communication disseminated or intended to be disseminated to the public which is likely to or intended to induce, directly or indirectly, the rendering of professional services by the chiropractor named in or identified by the communication. "Advertisement" includes professional business cards, professional announcement cards, office signs, letterhead, telephone directory listings, directories or listings of health care practitioners, and communications which are likely to or intended to induce, directly or indirectly, the rendering of professional services by the chiropractor named in or identified by the communication in newspapers, broadsides, flyers, radio, television, books, magazines, or motion pictures.

History: Cr. Register, November, 1997, No. 503, eff. 12-1-97.

Chir 6.02 Unprofessional conduct. Unprofessional conduct by a chiropractor includes:

(1) Engaging in any practice which constitutes a substantial danger to the health, welfare or safety of a patient or the public.

(2) Practicing or attempting to practice when unable to do so with reasonable skill and safety to patients.

(3) Practicing in a manner which substantially departs from the standard of care ordinarily exercised by a chiropractor.

(4) Practicing or attempting to practice beyond the scope of a license issued by the board, including but not limited to acts prohibited under s. Chir 4.05 (1).

(5) Practicing or attempting to practice while the ability to perform is impaired by physical, mental or emotional disorder, drugs or alcohol.

(6) Performing professional services inconsistent with training, education or experience.

(7) Engaging in sexual contact, exposure, gratification, or other sexual behavior with or in the presence of a patient.

(8) Engaging in excessive evaluation or treatment of a patient.

(9) Failing to conduct a competent assessment, evaluation or diagnosis as a basis for treatment or consultation.

(10) Revealing confidential patient information without consent of a patient, except that information shall be revealed to the board or its representatives pursuant to investigation of a licensee or as otherwise authorized by law.

(11) Refusing to render services to a person because of race, color, sex or religion.

(12) Knowingly falsifying patient records.

(13) Impersonating another chiropractor.

(14) Obtaining or attempting to obtain any compensation for chiropractic services by fraud, including billing for services not rendered or submitting a claim for a fraudulent diagnosis.

Note: The use by a licensee of "no out-of-pocket expense" payment arrangements may constitute insurance fraud, and may therefore violate this subsection as well as s. 943.395, Stats.

(15) Advertising in a manner which is false, deceptive or misleading. An advertisement which does any of the following is false, deceptive or misleading:

(a) Contains a misrepresentation of fact.

(b) Is likely to mislead or deceive because of a failure to disclose material facts.

(c) Is intended to or is likely to create false or unjustified expectations of favorable results.

(d) Fails to prominently disclose complete details of all variables and material factors relating to any advertised fee.

(e) Contains any representation or implication that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived.

(f) Includes reference to or implies specialization or advanced training unless all of the following are true:

1. The specialty is recognized by a council of the American chiropractic association or the international chiropractors association.

2. The specialty requires at least 300 hours of postgraduate credit hours and passage of a written examination approved by the American chiropractic association or the international chiropractors association.

3. The title applied to the specialty by the chiropractor is the title applied by the American chiropractic association or the international chiropractors association.

(g) Includes reference to or implies advanced training unless all of the following are true:

1. The postgraduate training was received in one, unified program approved by the American chiropractic association or the international chiropractors association, or through one, unified program at a college accredited by the council on chiropractic education and approved by the board.

2. The chiropractor has completed at least 100 hours of postgraduate training in the area in which the chiropractor claims advanced training.

3. The postgraduate training program includes successful completion of a written examination as a requirement for successful completion of the training program.

(h) Appears in any classified directory, listing or other compendium under a heading, which when considered together with the advertisement, has the capacity or tendency to be deceptive or misleading with regard to the profession or professional status of the chiropractor.

(i) Implies that the chiropractic services provided will result in emotional or spiritual benefits.

(16) Aiding or abetting or permitting unlicensed persons in the practice of chiropractic.

(17) Failing to exercise a reasonable degree of supervision over subordinate employees.

(18) Obtaining or attempting to obtain a license through fraud or misrepresentation or making any material misstatement, omission or falsification in connection with an application for a license, registration or renewal.

(19) Refusing upon request to cooperate in a timely manner with the board's investigation of a complaint lodged against a

licensee. Licensees taking longer than 30 days to respond shall have the burden of demonstrating that they have acted in a timely manner.

(20) Knowingly providing false information to the board or its representative.

(21) Failing to notify the board of having a chiropractic license, certificate, permit or registration granted by any other jurisdiction subject to disciplinary action.

(22) Having a license, certificate, permit or registration granted by another jurisdiction to practice as a chiropractor limited, suspended or revoked, or subject to any other disciplinary action.

(23) Failing to notify the board of any criminal conviction, the circumstances of which relate substantially to the practice of chiropractic.

(24) Being convicted of a crime substantially related to the practice of chiropractic.

(25) Violating any provision of ch. 446, Stats., or any rule or order of the board.

(26) Violating a law, or aiding or abetting the violation of any law substantially related to the practice of chiropractic.

(27) Failing to maintain patient records for a minimum period of 7 years after the last treatment or after the patient reaches the age of majority, whichever is greater.

(28) Failing to release patient health care records to a patient in accordance with s. 146.83, Stats.

(29) Negating the co-payment or deductible provisions of a contract of insurance by agreeing to forgive any or all of the patient's obligation for payment under the contract unless the chiropractor reduces the chiropractor's claim to the insurance carrier in regard to that patient by an equal proportion. In this section, "co-payment or deductible provisions" means any terms in a contract of insurance with a third party whereby the patient remains financially obligated to the chiropractor for payment.

Note: It is no violation of this rule for a chiropractor to adjust fees, but the fee charged must be accurately reported to any third party payor. It is no violation of this rule for a chiropractor to provide treatment without any charge.

(30) Giving or receiving unauthorized assistance, violating rules of conduct, or otherwise cheating or acting dishonestly respecting any examination required for the granting of a license or registration to practice chiropractic.

(31) Making a representation likely to create an unjustified expectation about the results of a nutritional counseling service or procedure.

History: Cr. Register, December, 1984, No. 348, eff. 1-1-85; am. (4), Register, October, 1989, No. 406, eff. 11-1-89; cr. (27) and (28), Register, January, 1992, No. 433, eff. 2-1-92; cr. (29), Register, January, 1993, No. 445, eff. 2-1-93; am. (7), Register, June, 1993, No. 450, eff. 7-1-93; am. (27), Register, May, 1997, No. 497, eff. 6-1-97; r. and recr. (15), Register, November, 1997, No. 502, eff. 12-1-97; am. (18), cr. (30), Register, September, 1999, No. 525, eff. 10-1-99; CR 03-082: am. (14) Register July 2004 No. 583, eff. 8-1-04; CR 06-051: cr. (31) Register November 2006 No. 611, eff. 12-1-06.

Chir 6.03 Duty to evaluate and inform. (1) A chiropractor shall evaluate each patient to determine whether the patient presents a condition that is treatable through chiropractic means. An evaluation shall be based upon an examination appropriate to the presenting patient. In conducting an evaluation, a chiropractor shall utilize chiropractic science as described in s. Chir 4.02 and the principles of education and training of the chiropractic profession.

(2) If an evaluation indicates a condition treatable by chiropractic means, the chiropractor shall treat the patient using appropriate chiropractic means.

(3) If an evaluation indicates a condition which is not treatable through chiropractic means, the chiropractor shall inform the patient that the condition is not treatable through chiropractic means and recommend that the patient seek additional advice or care.

(4) A chiropractor may render concurrent or supportive chiropractic care to a patient, but a chiropractor shall refrain from further chiropractic treatment when a reasonable chiropractor should be aware that the patient's condition will not be responsive to further treatment.

History: Cr. Register, June, 2000, No. 534, eff. 7-1-00.

Chapter Chir 12

NUTRITIONAL COUNSELING CERTIFICATION

Chir 12.01	Definitions.
Chir 12.02	Requirements for nutritional counseling certification.
Chir 12.03	Approval of nutritional counseling education programs.

Chir 12.04	Application denials.
Chir 12.05	Revocation of approval.
Chir 12.06	Prohibited practices.

Chir 12.01 Definitions.

In this chapter:
(1) “Administering” means the direct application of a product, whether by ingestion or any other means, to the body of a patient or research subject by any of the following:

- (a) A chiropractor.
- (b) A patient or research subject at the direction of the chiropractor.

(2) “Dispensing” means delivering a product to an ultimate user or research subject by a chiropractor.

(3) “Nutritional counseling” means providing counsel, direction, guidance, advice or a recommendation to a patient regarding the health effects of vitamins, herbs or nutritional supplements.

(4) “Nutritional supplement” means a product, other than tobacco, that is intended to supplement the diet that contains one or more of the following dietary ingredients: a vitamin, a mineral, an herb or other botanical, an amino acid, a dietary substance for use by man to supplement the diet by increasing the total daily intake, or concentrate, metabolics, constituent, extract or combination of these ingredients; or is labeled as a nutritional or dietary supplement.

History: CR 06–051: cr. Register November 2006 No. 611, eff. 12–1–06.

Chir 12.02 Requirements for nutritional counseling certification. **(1)** The board shall grant a certificate for nutritional counseling to a licensed chiropractor who does all of the following:

- (a) Submits an application for a certificate to the department on a form provided by the department.

Note: Application forms are available on request to the board office located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, or from the department’s website at: <http://dsps.wi.gov>.

- (b) Pays the fee specified in s. 446.02 (2) (c), Stats.
- (c) Submits evidence satisfactory to the board that he or she has completed any of the following:

1. Received a postgraduate degree in human nutrition, nutrition education, food and nutrition or dietetics conferred by a college or university that is accredited by an accrediting body listed as nationally recognized by the secretary of the federal department of education.

2. Received diplomate status in human nutrition conferred by a college of chiropractic accredited by the Council on Chiropractic Education (CCE) or approved by the board or by an agency approved by the United States office of education or its successor.

3. Received a postgraduate degree in human nutrition conferred by a foreign school determined to be equivalent to an accredited college of chiropractic by the CCE or approved by the board or another board approved accrediting agency, indicating that the applicant has graduated from a program that is substantially equivalent to a postgraduate or diplomate program under subd. 1. or 2.

4. Received a degree from or otherwise successfully completed a postgraduate program after December 1, 2006 consisting of a minimum of 48 hours in human nutrition that is approved by the board as provided in s. Chir 12.03, after December 1, 2006.

History: CR 06–051: cr. Register November 2006 No. 611, eff. 12–1–06.

Chir 12.03 Approval of nutritional counseling education programs.

(1) To qualify for board approval as a nutritional counseling education program under s. Chir 12.02 (1) (c) 4., a program shall meet all of the following minimum requirements:

- (a) The program is sponsored by the Wisconsin Chiropractic Association, the American Chiropractic Association, the International Chiropractors Association, a college of chiropractic approved by the board, or a college of medicine or osteopathy accredited by an agency recognized by the United States department of education.

- (b) The program subject matter includes core curriculum education in each of the following areas:

1. Nutrition counseling and initial screening to include nutrition physical examination.

2. Diet history taking.

3. Analysis of laboratory data including hair, saliva, urine and blood samples.

4. Symptoms of severe vitamin and nutritional deficiencies, and the toxicity of excess vitamin and mineral supplementation, herbals or other nutritional supplements.

5. Protein, carbohydrates, and fat macronutrient needs and symptoms of deficiencies of any of these nutrients.

6. Vitamin recommended daily allowances and dietary reference intakes.

7. Mineral and metals needs of the human body and the biochemistry of essential and non-essential nutritional supplements.

8. Fiber needs.

9. Codex Alimentarius Commission.

10. Dietary supplement health and education act of 1994, P.L. 103–417 and related regulations.

11. Etiology of organ system dysfunction, internal medicine diseases and conditions.

12. Supplements and nutrition.

13. The efficacy, safety, risks and benefits of glandular products, chelation therapy and therapeutic enzymes.

14. Food composition and foods as a source of vitamins.

15. Sports nutrition, endurance, body building and exercise physiology.

16. Weight management and control.

17. Contraindications, side effects, and toxic effects of botanicals, nutritional supplements and diet products.

18. Nutrition across the life cycle.

19. Nutrition relating to infants, pregnancy and lactation.

20. Geriatric nutritional needs.

21. Adolescent nutrition needs.

22. Male and female nutrition needs.

23. Therapeutic use of botanical medicine.

24. Food, drug, and nutritional supplements interactions.

25. Safety and efficacy – risks and benefits of nutritional supplements.

- (c) The program sponsor agrees to provide a responsible person to monitor and verify the attendance of each registered chiropractor at the program, and the program sponsor agrees to keep the

records of attendance for 3 years from the date of the program and to furnish each participant with evidence of having attended the program.

(d) The program sponsor shall not assign or delegate its responsibilities to monitor or record attendance, provide evidence of attendance, compare course content with subject matter content required under sub. (1) (b), or provide information on instructors or other aspects of the program unless the assignment or delegation is specifically identified in the application for approval and approved by the board.

(e) The program sponsor has reviewed and validated the program's content to insure its compliance with par. (b).

(f) When a course instructor of the program is on the undergraduate or postgraduate faculty of a chiropractic college, the program sponsor has provided written verification that the course instructor has been appointed in accordance with the accreditation standards of the Council on Chiropractic Education.

(g) The program offers significant professional educational benefit for participants, as determined by the board.

(h) The instructor is qualified to present the course.

(i) The program shall include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation. There shall be an assessment or test at the conclusion of each 12 hours of education. A score of 75% or higher shall be considered a passing score.

(j) The program shall contain a reasonable security procedure to assure that the chiropractor enrolled is the actual participant.

(k) Programs shall be approved for one hour of education credit for every 50 minutes of instruction. The time used for testing and assessment purposes shall not be included in the computation of educational credit.

(2) (a) An application for approval of a nutritional counseling education program shall meet all of the following requirements:

1. Be on a form provided by the board.

Note: Application forms are available on request to the board office located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708, or from the department's website at: <http://dps.wi.gov>.

2. Identify the name and address of the program sponsor and describe how the program sponsor qualifies under s. Chir 12.03 (1) (a).

3. Describe the time and place of the program.

4. Be complete as prescribed in this subsection and filed with the board no later than 75 days prior to the program date. An application is not considered complete until such time as all information required to be submitted with the application, and any supplementary information requested by the board, is received by the board.

5. Include evidence of the program sponsor's verification showing to the satisfaction of the board that the subject matter is generally taught at the undergraduate or postgraduate level of a chiropractic college and relates to improving the clinical skills of a chiropractor. A detailed course outline or syllabus describing the subject matter of the program, and the amount of time devoted to each section of the outline or syllabus shall be attached to the application.

6. Describe the names and qualifications of all instructors, and if applicable, whether an instructor of the program who is an undergraduate or postgraduate faculty member of a sponsoring college was appointed in accordance with accreditation standards of the Council on Chiropractic Education.

7. Identify whether the program sponsor intends to assign or delegate any of its responsibilities to another person or entity, and if so, include all of the following:

a. A specific description of the assignment or delegation.

b. The person or entity who is assigned or delegated to perform the responsibility, including name, address and qualification to perform the responsibility.

c. The method by which the program sponsor intends to assure that the delegated or assigned responsibility is performed.

8. Include a written assessment instrument, designed to ensure that the chiropractor actively participated in the presentation of material and derived a measurable benefit from participation.

9. Include a reasonable security procedure to assure that the chiropractor enrolled is the actual participant.

(b) If necessary, in order to determine whether an applicant meets the requirements of this chapter, the board may require that the applicant submit information in addition to that described in this section.

(3) Continuing education credit may not be awarded for meals, breaks, testing or assessment periods.

(4) The sponsor of an approved program shall ensure that the program is carried out and presented as represented to and approved by the board, and that all responsibilities of the program sponsor, an instructor, and any person or entity delegated or assigned a responsibility relating to a program approved by the board are fulfilled.

(5) The approval of a course shall be effective only for the biennium in which it is approved.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.04 Application denials. The board may deny approval of an application submitted under s. Chir 12.03 for any of the following reasons:

(1) The program or program sponsor does not meet requirements established in this chapter.

(2) The emphasis of the program is on the business, management, or insurance aspects of a chiropractic practice rather than on improving the clinical skills of the chiropractor.

(3) The board determines that the program sponsor has not provided adequate assurance that responsibilities delegated or assigned to others will be satisfactorily performed.

(4) Any presentation, program content, materials or displays for the advertising, promotion, sale or marketing of equipment, devices, instruments or other material of any kind or purpose is not kept separate from the program content and presentation for which approval is applied and granted.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.05 Revocation of approval. The board may revoke approval of a program for any of the following reasons:

(1) The program sponsor, an instructor, or a person delegated or assigned a responsibility has a financial, personal or professional interest which conflicts directly with the performance of responsibilities in this chapter.

(2) Failure on the part of a program sponsor, an instructor, or a person delegated or assigned a responsibility to carry out a program as represented to and approved by the board or as provided in this chapter.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

Chir 12.06 Prohibited practices. (1) A chiropractor shall not delegate to any chiropractic assistant or other person any recommendations, analysis, advice, consultation or dispensing with respect to vitamins, herbs, or nutritional supplements. Nothing in this subsection may be construed to prevent chiropractic assistants or administrative employees from processing sales of vitamins, herbs, or nutritional supplements.

(2) After December 1, 2008 a chiropractor shall not sell, barter, trade or give away vitamins, herbs or nutritional supplements

unless the chiropractor holds a certificate for nutritional counseling and except as consistent with the provisions of this chapter.

(3) A chiropractor shall not deliver, dispense, administer, transfer or sell a product unless that product is prepackaged for use by consumers and labeled in accordance with the requirements of state and federal law.

History: CR 06-051: cr. Register November 2006 No. 611, eff. 12-1-06.

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Division of Policy Development Staff		2) Date When Request Submitted: 1/8/2019 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: All Boards, Committees, Councils and Sections			
4) Meeting Date: 1 st Available Date	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Board Review of the Wisconsin Occupational Licensing Study Legislative Report	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Board discussion.			
11) Authorization			
Signature of person making this request			Date
Supervisor (if required)			Date
Executive Director signature (indicates approval to add post agenda deadline item to agenda)			
Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



Wisconsin Occupational Licensing Study

Legislative Report

Submitted by:
Department of Safety and Professional Services

December 2018

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December 28, 2018

The Honorable Scott Walker
Wisconsin Governor
115 East Capitol
PO Box 7863
Madison, WI 53707

Jeff Renk, Senate Chief Clerk
Wisconsin State Legislature
State Capitol, Room B20 Southeast
PO Box 7882
Madison, WI 53707

Patrick E. Fuller, Assembly Chief Clerk
Wisconsin State Legislature
17 West Main Street, Room 401
PO Box 8952
Madison, WI 53708

Dear Governor Walker and Chief Clerks Renk and Fuller:

The Wisconsin Department of Safety and Professional Services (DSPS) is charged with overseeing and regulating over 240 different types of credentials and the examining boards, affiliated boards, and councils that are required by Wisconsin State Statutes.

I have had the pleasure of leading this great agency since February 2017, and I am pleased to provide to Governor Scott Walker and the Wisconsin State Legislature a comprehensive report of our analysis of the occupational licenses regulated in Wisconsin.

DSPS was charged in 2017 Wis. Act 59 to complete a comprehensive review of Wisconsin's credentials and provide recommendations based on a variety of criteria by December 31, 2018.

I would like to thank the staff at the DSPS who have contributed countless hours to researching and extrapolating data related to not only Wisconsin's credentials, but those occupations licensed in other states. I would also like to thank the staff and leadership of those Wisconsin state agencies who contributed to the report research and data related to the occupations they credential.

Thank you,

Laura E. Gutiérrez
Secretary
Wisconsin Department of Safety and Professional Services

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II. Introduction

A. Requirements of 2017 Wisconsin Act 59

Wisconsin's 2017–19 biennial state budget, 2017 Wisconsin Act 59, required the Department of Safety and Professional Services (DPS) to study occupational licenses and submit a report of findings to the Governor and Legislature by December 31, 2018.

The Act defines occupational license as:

(a) A license, permit, certification, registration, or other approval granted under section 167.10 (6m) or chapters 101, 145, or 440 to 480 of the statutes. (These statutes relate to building safety, plumbing, fire protection, fireworks, and professional occupations under DPS, including the occupations regulated by the boards attached to DPS.); or

(b) A license, permit, certification, registration, or other approval not included under par. (a) if granted to a person by the state in order that the person may engage in a profession, occupation, or trade in Wisconsin, or in order that the person may use one or more titles in association with his or her profession, occupation, or trade.

Pursuant to section 9139 (17w) of 2017 Wisconsin Act 59, the report is to include recommendations for the elimination of occupational licenses based on the following:

- 1) An evaluation of whether the unregulated practice of the profession, occupation, or trade can clearly harm or endanger the health, safety, or welfare of the public, and whether the potential for the harm is recognizable and not remote or speculative;
- 2) An evaluation of whether the public reasonably benefits from the occupational license requirement;
- 3) An evaluation of whether the public can be effectively protected by any means other than requiring an occupational license;
- 4) An analysis of whether licensure requirements for the regulated profession, occupation, or trade exist in other states;
- 5) An estimate of the number of individuals or entities that are affected by the occupational license requirement;
- 6) An estimate of the total financial burden imposed on individuals or entities as a result of the occupational licensure requirement, including education or training costs, examination fees, private credential fees, occupational license fees imposed by the state, and other costs individuals or entities incur in order to obtain the required occupational license;
- 7) Any statement or analysis provided by the agency or board administering the occupational license; and
- 8) An evaluation of the tangible or intangible barriers people may face in obtaining an occupational license.

B. About the Report

This report consists of findings and recommendations from a statewide occupational licensure study that was conducted by DSPS. The purpose of the study was to offer recommendations to the legislature based on the requirements of 2017 Wisconsin Act 59. This report includes data and information from DSPS and other state agencies and boards with responsibility for regulating occupational licenses issued by the State of Wisconsin.

Pursuant to 2017 Wisconsin Act 59, DSPS was directed to provide recommendations for the elimination of occupational licenses based on established criteria set forth in the legislation. This report includes recommendations for the elimination and reform of 28 occupational licenses. It is recognized that any change to state law would be accomplished through the legislative process, which would include an opportunity for stakeholders and the public to provide input and comments at public hearings.

Wisconsin issues four different types of credentials, which are: *licenses, certificates, registrations, and permits*. All types collectively are commonly referred to as *credentials*. For the purposes of this report, the various types are generically referred to as a *license*, unless otherwise specified.

In addition, inaccuracy and misinterpretation are often found in the use of the terms *license, certification, registration, and permit*. Unfortunately, these terms are sometimes used interchangeably, resulting in confusion. Often what appear to be occupational licenses are actually business licenses. Occupational licenses are issued to individuals giving them the right to practice, whereas business licenses are issued to companies.⁷

This report only focuses on individual occupational licenses that fall under the definition of *occupational license* pursuant to 2017 Wisconsin Act 59. This report does not include entity, facility or business-related licenses, or other non-occupational type permits issued by the state of Wisconsin. While there are several state agencies that issue permits and other types of entity or business type licenses, only the agencies and the occupational licenses they administer are included in this report. Additionally, this report does not include licenses, certifications, permits, or registrations issued by local municipalities, counties, professional or trade organizations, or by the federal government.

The data presented in this report represents best efforts in the collection of data and information. Not all state regulatory agencies provided DSPS with comparative data for all 50 states as requested. Therefore, only the data that was made available is included in this report. Where available, comparable data was searched in all 50 states, including Washington, D.C., which is counted as a state for the purposes of this report. Due to a lack of available data, the report may exclude Washington, D.C. for some occupations.

In order to fill gaps with the lack of available data, data collectors researched information from news articles, trade and professional organizations, state and national research organizations, and other reputable sources. Data collectors found that occupational licensing information was difficult to come by for many states and a searchable database in a single location was an even rarer find. While there are some state and national databases that are comprehensive, there were several

searches that yielded limited or no useful information or resulted in outdated or unreliable data. Additionally, there appeared to be conflicts between many of the national databases relating to state comparative data, either due to the everchanging reforms or the ongoing licensing of new occupations. Therefore, confirming the validity or relying on data from these other out-of-state sources proved to be challenging.

Some states allow public access to a comprehensive occupational licensing directory that includes information such as job descriptions, licensing requirements, appropriate regulatory agency and contact information, wage data, number of active licensees, and authorizing statutes. However, this information was a rarity rather than the norm. In most states, occupational licensing information was contained over different web pages in different locations without links to connect these resources resulting in challenges to find similar occupational titles. Even in cases where the titles were similar in nature, the requirements varied vastly.

Some states defined occupational categories more broadly than others. For example, while one state may require licenses for *contractors* (of all kinds), others may require licenses for several specializations of contractors. Wisconsin issues licenses for seven classes of blasters, which determines which duties may be conducted, while several states issue only one blaster category or may have an “umbrella” licensure type. Therefore, this report may contain limited comparative data for some occupations. In other cases, similar occupation types were combined to form more general occupational licensing categories.

The occupational licensing data contained in this report is quantitative, not qualitative. The criteria used by data collectors was to determine whether or not a state requires a license for a comparable occupation. Although an attempt was made to compare other licensing requirements (fees, initial and continuing educational requirements, reciprocity, etc.) from one state to another, the information was not always available for all licensure types and thus is not included in this report.

Additionally, this report may also reflect an underrepresentation (undercount) of a license’s regulation in another state due to the difference in the state’s definition of the occupation. This study analyzed licensing requirements at the state level only. There are numerous other requirements at the local and federal levels in most states, which may also attribute to the inconsistencies between various databases and to the number of licensed occupations that may appear to be undercounted.

Lastly, governments across the country are continuously licensing more and new occupations. While it is rare that states abolish licensing requirements, there are several states that are currently undergoing occupational licensing reform. Because of this, state comparative data contained in this report may not reflect the current licensure status in that state.

C. About the Statewide Occupational Licensing Study

To meet the requirements of 2017 Wisconsin Act 59, DSPS conducted a statewide study to determine which occupational licenses are needed to protect the public and explore areas where less restrictive alternatives may be appropriate. To assist with the collection of data, a 30-question survey was disseminated in early 2018 to all 35 state agencies, as shown in Table 1. Each agency was tasked with consulting their legal counsel to determine if their agency regulates licenses that fall under the *occupational license* definition pursuant to 2017 Wisconsin Act 59.

Of the 35 state agencies, responses revealed that 13 agencies regulate at least one license type. Of the 13 regulatory agencies, 11 agencies submitted data requested in the survey. Following an analysis of the submitted data, some license types were eliminated if it was determined that the license or permit was a business or firm and not related to an occupational license held by an individual. Therefore, this report contains an evaluation of the information supplied by 10 state regulatory agencies.

State agencies with regulatory responsibilities were asked to gather information relating to complaints and disciplinary data, educational requirements, fees, and other related costs, how the general public benefits from the regulation of that occupation, identify barriers or burdens associated with each of the regulated occupations, and research existing regulatory requirements in other states.

Lastly, agencies were asked to provide a summarizing statement to attest that the current level of governance was appropriate for each license type, if the license should be eliminated, or if a less restrictive or alternative reform should be considered while still ensuring public safety and consumer protection. Agency recommendations are included in this report.

Table 1: List of Wisconsin agencies surveyed for occupational licensing study.

State Agency	Regulates Occupational Licenses?
Administration, Department of	No
Agriculture, Trade and Consumer Protection, Dept. of	Yes
Children and Families, Department of	Yes
Corrections, Department of	No
Director of State Courts, Office of	Yes*
Educational Communications Board	No
Elections Commission	No
Employee Trust Funds, Department of	No
Ethics Commission	Yes
Financial Institutions, Department of	Yes
Health Services, Department of	Yes
Higher Educational Aids Board	No
Historical Society	No
Insurance, Office of the Commissioner	Yes
Investment Board, State of Wisconsin	No
Judicial Commission	No
Justice, Department of	No
Natural Resources, Department of	Yes
Public Instruction, Department of	Yes*
Public Lands, Board of Commissioners of	No
Public Service Commission	No
Railroads, Office of the Commissioner of	No
Revenue, Department of	Yes
Safety and Professional Services, Department of	Yes
Secretary of State, Office of the	No
State Public Defender	No
Tourism, Department of	No
Transportation, Department of	Yes
University of Wisconsin System	No
Veterans Affairs, Department of	No
Wisconsin Economic Development Corporation	No
Wisconsin Health and Educational Facilities Authority	No
Wis. Housing and Economic Development Authority	No
Wisconsin Technical College System	No
Workforce Development, Department of	Yes
35 Agencies	13 Regulatory Agencies

* No information received.

In late 2018, a second survey was conducted to gather input from credential holders, members of the public, and stakeholders. This survey was posted on the DSPS website and disseminated to individual credential holders, stakeholders, and provided to the regulatory agencies who submitted data. This survey aimed to solicit feedback about the usefulness credential holders'

primary occupational license serves for: 1) getting a job; 2) keeping a job; 3) keeping employees marketable to employers or clients; 4) improving work skills; and 5) increasing wages or salary. Survey questions also asked credential holders to estimate the costs they incurred, hours of instruction required, and hardships or barriers they faced to obtain and retain their *primary* occupational license.

The survey asked credential holders, stakeholders, and non-credential holders (public) to rate the importance occupational licenses serve to protect public citizens from harm or danger. Individuals were also given the opportunity to provide specific instances where occupational licensing regulations may have impacted the cost of consumer goods or services. If individuals currently hold a similar license in another state, they were also asked to compare that state’s requirements, costs, and hardships with Wisconsin’s. Lastly, individuals were provided with an opportunity to share any additional comments. The survey results are included later in this report.

D. About Occupational Licensing in Wisconsin

Wisconsin’s regulation of occupations affects many professions. Wisconsin issues over one million occupational licenses for 280 different credential types. While DSPS issues 75 percent of the occupational licenses in Wisconsin, there are over a dozen other state agencies, along with attached boards, that also have occupational oversight responsibilities, as shown in Figure 1. Affiliated boards may also have regulatory, credentialing, and examining responsibilities. However, for the purposes of this report, the state agency that administers the occupational license is listed as the regulatory agency.

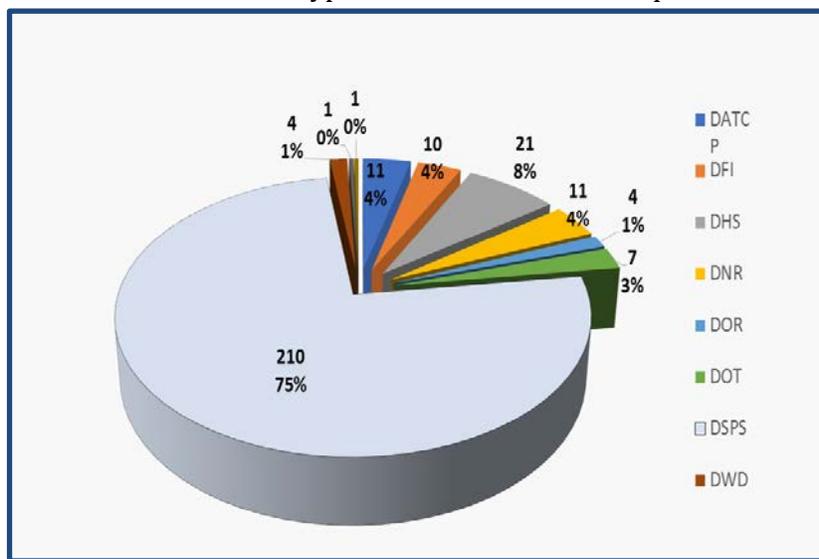


Figure 1: Wisconsin regulated occupational license types issued per state agency.

Occupational licensing in Wisconsin falls into three categories:

- 1) Occupations regulated by independent examining boards attached to a state agency or by affiliated credentialing boards attached to those boards;
- 2) Occupations regulated by semi-autonomous boards that share authority with the state agency; and
- 3) Occupations directly regulated by the state agency.

Wisconsin agencies and attached boards are responsible for ensuring the safe and competent practice of regulated health, social services, business, industry, and trades professionals. In addition to issuing licenses and providing oversight, state regulatory agencies provide administrative, legal, and enforcement services, assist in rulemaking and examinations of the credentialed professions, and

aid the boards in developing regulatory policies that protect the public. The four types of occupational credentials issued include *licenses, certificates, registrations, and permits*. These credentials are generally differentiated by qualification requirements, the use of a professional title, and the range of activities that a credential holder is allowed to perform (i.e. Scope of Practice). While there are additional state agencies that issue other types of permits, or variations of the types listed, for non-occupational or business-related entities, this report only focuses on occupational credentials issued to individuals.

Licenses are considered the most restrictive type of credential. Licenses encompass qualification requirements that typically include an examination, specialized education, and usually specific work experience. Cosmetologists, occupational therapists, and electricians are examples of occupations requiring formal licensure in order to practice in Wisconsin.

Certificates are similar to licenses. Certificates generally provide special recognition to individuals who have fulfilled certain required criteria for a profession, including successful completion of an examination. Examples of occupations requiring Wisconsin certification in order to practice are acupuncturists, substance abuse counselors, and lead sampling technicians.

Registration is generally the least restrictive form of credentialing. Registration simply requires an individual to file with the appropriate regulatory entity their name, address, and registration fee payment. A registration may also restrict the use of a professional title. Examples of occupations requiring Wisconsin registration are interior designers, art therapists, and pipe layers.

Permits are another form of credential issued by regulatory agencies. Permits can be used as a training credential or as a primary credential. Examples of occupations requiring a permit are private security persons, limited x-ray machine operators, and juvenile martial arts instructors.

While the distinctions among credentials help in understanding the general level of regulation of occupations, it is the statutes and administrative rule that outline specific requirements for each occupation's credential. Because individuals in certain occupations are required to *register*, this does not necessarily mean that the group is statutorily less restricted than another occupation where individuals must be *certified*. Common usage of credential terms may be misleading without reviewing the relevant statutes. For example, a "*certified* public accountant" and a "*registered* nurse" practicing in Wisconsin are both required to obtain a *license*. To determine what each license issuance entails, it is important to consult the statutes and administrative codes.⁵

E. Wisconsin Selected for National Occupational Licensing Consortium

Wisconsin was one of 11 initial states chosen to participate in the National Occupational Licensing Learning Consortium, which is a multi-year program that explores ways to further reduce unnecessary barriers to the labor market. Other states selected include: Arkansas, Colorado, Connecticut, Delaware, Illinois, Indiana, Kentucky, Maryland, Nevada, and Utah.

The consortium is supported by the National Conference of State Legislatures (NCSL), the National Governors Association Center for Best Practices (NGA), and the Council of State

Governments (CSG), as well as support from the U.S. Department of Labor (USDOL). These organizations assist participating states in improving their understanding of occupational licensure issues and best practices by providing an opportunity for state teams to engage with experts in the areas of occupational regulation, workforce development and populations with challenges, and developing a road map focused on reducing unnecessary barriers to the labor market.⁸

The 11 participating states (expanded to 15 states in 2018) convened in December 2017 to begin work on their goals and to learn, network, and discuss the practices, costs, opportunities, and challenges related to occupational licensing. The consortium states were required to create a core team of officials to participate in the consortium as well select members for a home team that consisted of a broader group of stakeholders to participate in the in-state learning and planning activities. Each state was required to select specific occupations and target populations to focus on through this work, as well the aspects of licensure regulation that they wanted to address in their action plan.⁸

The selection of these occupations focused on two primary criteria – occupations that are licensed in at least 30 states and occupations that require less than a bachelor’s degree, as well as two additional measures—projected employment growth rate for 2014-2024 at national average or higher and total current employment levels of 10,000 or greater. Through this process, the consortium identified 34 occupations, as shown in Table 2.

Table 2: List of occupations selected by the National Consortium.

TARGET OCCUPATIONS	
Barbers	Pharmacy Technicians
Bus Driver (City/Transit)	Physical Therapy Assistants
Bus Drivers, School or Special Client	Pipefitters and Steamfitters
Construction Managers	Plumbers
Construction and Building Inspectors	Preschool Teachers, Except Special Education
Dental Hygienists	Private Detectives and Investigators
Electricians	Radiologic Technologists
Emergency Medical Technicians and Paramedics	Real Estate Appraisers
Hairdressers, Hairstylists and Cosmetologists	Real Estate Sales Agents
Heating, Air Conditioning, and Refrigeration Mechanics and Installers	Respiratory Therapists
Heavy and Tractor-Trailer Truck Drivers	Security and Fire Alarm Systems Installers
Insurance Sales Agents	Security Guards
Licensed Practical and Licensed Vocational Nurses	Skin care Specialists
Manicurists and Pedicurists	Teacher Assistants
Massage Therapists	Veterinary Technologists and Technicians
Nursing Assistants	Vocational Education Teachers, Postsecondary
Occupational Therapy Assistants	Water and Wastewater Treatment Plant and System Operators

States were required to focus on at least four occupations in their proposed project work, a majority of which must be included on this list. However, states were welcome to include one or more other occupations that are particularly relevant to their state’s occupational licensing landscape and unique needs.⁸

The vision and goals chosen by Wisconsin’s core team were based on the Wisconsin Legislature and Governor Walker’s expressed interest in occupational licensure reform through legislation and proposed budgets. These desires for reform are based on national trends and bipartisan federal recommendations to all states to review their current occupational licensing practices.

Like Wisconsin, some of the states selected to participate in the national consortium had a history of making progress on this issue. Proactively, Wisconsin’s Legislature and Governor had already been looking to alternative ways to license occupations. Wisconsin’s participation in the

national consortium provided the team members with additional opportunities to learn from other progressive states. Inclusion in the consortium, along with this study, also provided an opportunity for Wisconsin stakeholders, such as associations, license holders, other state agencies, and citizens, to provide input and feedback on this issue. The end goal of Wisconsin’s participation in the National Occupational Licensure Consortium is to continue to provide meaningful feedback, data, and facts to legislators and ensure that all partners and stakeholders are included in these statewide conversations. Wisconsin’s consortium goals are listed in Table 3.

Table 3. Wisconsin’s goals and action plan for the National Occupational Licensure Consortium.

GOAL	ACTION PLAN
Goal 1: EXAMINE THE STATE’S CURRENT OCCUPATIONAL LICENSING LANDSCAPE	Conduct study of occupational licenses and regulations in Wisconsin and other states, and report findings to state policymakers.
Goal 2: IDENTIFY THE BEST OPPORTUNITIES FOR OCCUPATIONAL LICENSURE REFORM	Determine the specific occupational licenses and regulations that do not align with the team’s vision statement and prioritize in the order of most likely to least likely for achieving success in reducing or eliminating that license or regulation.
Goal 3: DEVELOP A COMMUNICATIONS PLAN	Incorporate research conducted by policy research institutions, as well as feedback from stakeholders and the public, to grow public awareness and expand the base of understanding for stakeholders and state policymakers.
Goal 4: IMPROVE THE STATE’S LICENSING PRACTICES	Provide coordination among state licensing agencies to maximize existing regulatory flexibility and efficiencies, and partner with the state Legislature and stakeholders to advance legislative proposals that promote occupational licensure reform.

III. National Outlook on Occupational Licensing

A. The Rise of Occupational Licensure Laws

In the 1950s, roughly five percent of occupations required a government-issued license. Since then, especially in the past 20 years, states across the nation, including Wisconsin, have witnessed a dramatic growth in occupations that have become regulated.¹ In the last two decades, the number of Wisconsin credential holders has increased by 34 percent, with the total number of professional credential types increasing by over 80 percent. This growth far outpaces Wisconsin's growth in population (10.6 percent) and total employment (7.4 percent).³

The national growth of occupational licensing and the barriers it presents to job seekers have attracted mounting bipartisan concern. In recent years, occupational licensing reform has gained momentum. Among policymakers and advocates at both the state and national levels, interest in licensing reform is at an all-time high. Over the past few years, licensing reform has been championed at the state governmental level and by several public policy organizations and state research institutes. While some reforms have aimed at rolling back specific licensing barriers, others have sought to improve licensing practices more generally.²

In 2015, the U.S. Treasury Department, the Council of Economic Advisors and the Labor Department under former President Barack Obama issued a report documenting problems with licensing policy and calling for widespread reform. The Bureau of Labor Statistics has been collecting data on licensed workers through its population surveys and in early 2017 the Federal Trade Commission created an Economic Liberty Task Force focused in part on occupational licensing reform.⁸

In July 2017, the U.S. Secretary of Labor under President Donald Trump, highlighted the issue and encouraged state legislators to undertake occupational licensing reform. The Department of Labor's Employment and Training Administration awarded the National Conference of State Legislatures, in partnership with the Council of State Governments and National Governors Association Center for Best Practices, funding on a three-year project to:

- 1) Ensure that existing and new licensing requirements are not overly broad or burdensome and don't create unnecessary barriers to labor market entry.
- 2) Improve portability for selected occupational licenses across state lines. The national partners produced research and convened state policymakers and experts in the field of occupational licensing.⁹

Between 2017 and 2018, several states enacted laws to reform either the state's requirements or procedures to obtain an occupational license, with Wisconsin enacting nearly 30 laws related to strengthening employment growth and occupational licensing reform. (See Section V of this report for a full list of recent occupational licensing legislation.)

While most states enacted bills reducing the requirements and regulations of licenses, some reform efforts focus on addressing concerns certain demographics face when acquiring a license.¹ Some states also reformed requirements for those with criminal backgrounds and some reform bills

contained clauses for military personnel, making relevant experience in the military transferable to an occupational licensing requirement and streamlined the occupational licensing requirements for military spouses who obtained a license in another state.¹

While several states have attempted to enact occupational licensure reform laws, the success rate is still considered low. One study’s research discovered only eight instances in the past 40 years of the successful *de-licensing* of an occupation at the state level. In four of these cases, attempts to relicense the occupations followed soon afterward. Most of these de-licensing proposals have not gone through a sunset review process. Instead, the proposals have been made in the context of legislative concern that excessive government regulation (of which occupational licensing is one example) may have inhibited job growth.⁷

Since the 1970s, approximately 36 sunset laws have passed nationally. These laws require the periodic review of certain programs and agencies (such as occupational licensing and licensing boards). The periodic reviews are commonly called performance audits or legislative audits, and they result in a recommendation to either continue or discontinue the licensing of the occupation under review.⁷

B. Alternatives to Occupational Licensing

Advocates for occupational licensing reform have indicated that policymakers have several options for the regulation of occupational licensure. The regulatory options include a range from the option to license or not license, the least restrictive being *Market Competition* and the most restrictive being *Licensure*. To illustrate the alternatives, the Institute for Justice created an inverted pyramid figure that visually lists these options from least to most restrictive, as shown in Figure 2, with accompanying explanations of each option.²

The Inverted Pyramid: A Hierarchy of Alternatives to Licensing²

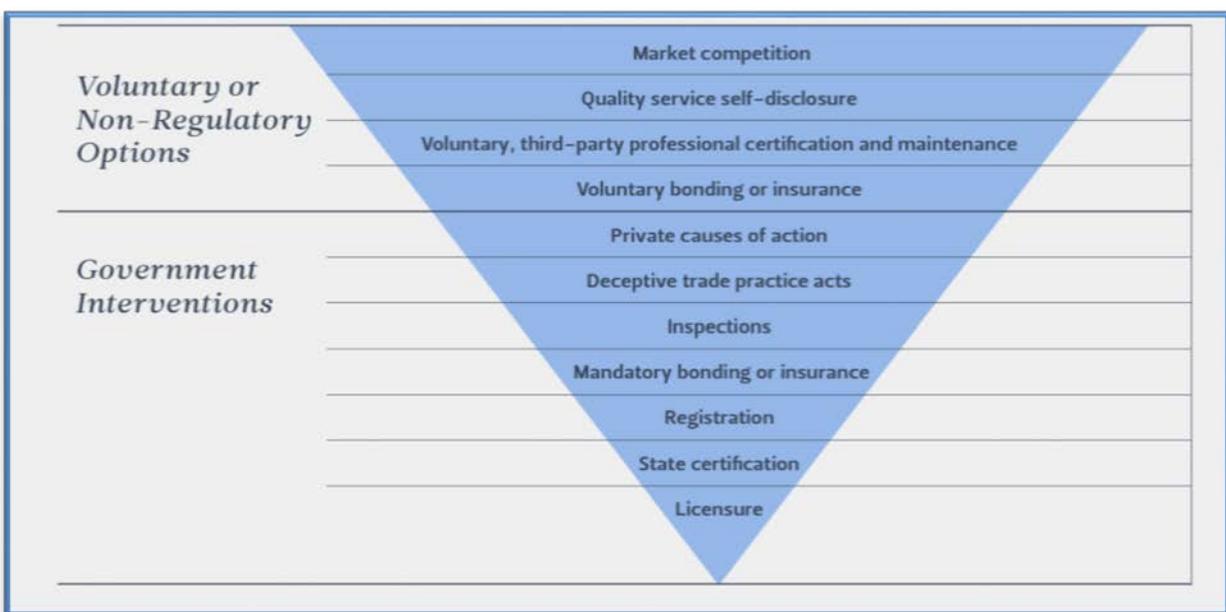


Figure 2: The “Inverted Pyramid” is used to illustrate alternatives to licensing.

In many cases, license alternatives can protect the public as well as or better than licensing without imposing its costs. When undergoing occupational reform, many states have adopted the concept of the inverted pyramid or have created a similar concept. The top four options, which can be considered voluntary or “non-regulatory,” are:

1) Market competition. Market competition takes the primary position in the inverted pyramid’s hierarchy because open markets with no or limited government intervention provide the widest range of consumer choices, allocate resources more efficiently and give businesses strong incentives to keep their reputations as providers of high-quality services. When service providers are free to compete, consumers weed out providers who fail to deliver safe and quality service. They do this by 1) denying repeat business to such service providers; and 2) telling others about their experience.²

2) Quality service self-disclosure. Service providers themselves can help solve the “information problem” through self-disclosure—that is, by proactively sharing information about how previous customers have rated the quality of their goods and services. Occupational practitioners can link to third-party evaluation sites from their websites to provide consumers with an important competitive “signal” that they are open to disclosure regarding their service quality. Practitioners without websites can exercise this option by providing prospective customers with lists of past customers or other references who can provide information about them. And consumers can spur disclosure by demanding such information as a condition of doing business.²

3) Voluntary, third-party professional certification and maintenance. Another way a service provider can help address the problem of asymmetrical information is by voluntarily pursuing and maintaining certification from a non-governmental organization. Like licensing, third-party certification sends a signal that an occupational practitioner has attained a certain degree of education or experience. But unlike licensing, it does so without creating any barriers to entry. It therefore provides the purported benefits of licensing while avoiding the pitfalls, including higher costs and fewer services for consumers. Third-party certification is used by many companies to voluntarily make certain certifications a requirement for employment.²

4) Voluntary bonding or insurance. Some occupations pose greater risks to consumers than others. Voluntary bonding and insurance allow practitioners of such occupations to outsource management of risks to bonding or insurance companies, which will provide a guarantee of protection against, respectively, a provider’s failure to fulfill an obligation (e.g., a moving company’s failure to deliver goods by the agreed date) or losses from theft or damage by the provider. This option is already in common use among temporary personnel agencies, janitorial companies, and companies with government contracts.²

The next six options are government interventions that, although more restrictive than the non-regulatory options above, are nevertheless less restrictive than licensure:²

5) Private causes of action. Private causes of action give consumers the right to bring lawsuits against service providers who have injured them. Where they do not already exist, legislators can create them. The existence of such rights may compel providers to adopt standards of quality to avoid litigation and an accompanying loss of reputation. The cost to consumers of obtaining

a remedy could be reduced by allowing them to sue in small claims court or, if suing in district court, to collect court and attorneys' fees when their claims are successful.²

6) Deceptive trade practice acts. All 50 states and the District of Columbia already have deceptive trade practice acts, consumer protection laws that allow attorneys general and consumers to sue service providers engaged in certain practices deemed false, misleading, or deceptive and permit enforcement agencies to prosecute them. Such deceptive trade practice acts are an important and frequently used means of protecting consumers from predatory and unscrupulous business practices.²

7) Inspections. Inspections are already common in some settings. For example, many municipalities use inspections to ensure restaurant hygiene, favoring them over onerous licensing of food preparers, wait staff, and dishwashers. In other settings where the state may have a legitimate interest in instrument or facility cleanliness, inspections may be sufficient and preferable to new or existing licensing. Periodic random inspections could also replace the licensing of various trades, such as electricians, carpenters, and other building contractors, where the application of skills is repeated and detectable to the experienced eye of an inspector. Where inspections are already used as a complement to licensing, states may find that inspections alone suffice.²

8) Mandatory bonding or insurance. For some occupations, a system of mandatory bonding or insurance can be a better alternative to full licensure. Voluntary bonding or insurance is generally preferable, but states may prefer a mandatory requirement when the risks associated with the services of certain firms extend beyond just the immediate consumer. For example, the state interest in regulating a tree trimmer is in ensuring that the service provider can pay for repairs in the event of damage to power lines or the home or other property of a party—a neighbor, for instance—not involved in the contract between the firm and the consumer. Because tree trimming presents few other threats, states can achieve this objective through bonding or insurance requirements while allowing workers to otherwise practice freely. Similarly, while many states require construction contractors to comply with expensive and burdensome licensing laws, Minnesota requires only bonding for HVAC contractors. If that occupation can be practiced freely and safely with only bonding as a requirement, the same is likely true of other trades both in Minnesota and in other states.²

9) Registration. Registration requires service providers to provide the government with their name, address, and a description of their services. Registration can complement private causes of action because it often requires providers to indicate where and how they take service of process in the event they are sued. However, the simple requirement to register with the state may be sufficient in and of itself to deter bad actors.²

10) State certification. Like voluntary, third-party certification, state certification overcomes the problem of asymmetrical information by sending a signal to potential customers and employers that an occupational practitioner meets certain standards. However, state certification differs from third-party certification in two major respects. First, the certifying body is the government rather than a private association. And second, state certification restricts the use of an occupational title—though not, as licensing does, the practice of an occupation. Under state certification, anyone can work in an occupation, but only those who meet the state's qualifications can use a designated title, such as certified interior designer or certified financial planner. Third-

party certification is generally preferable because state certification requires new or expanded government bureaucracy, which comes with costs. Further, third-party organizations are likely to be more responsive to industry and consumer trends. Nevertheless, state certification is less restrictive than occupational licensing and presents few costs in terms of increased unemployment and consumer prices.²

Finally, at the bottom of the inverted pyramid's hierarchy is licensure, the most restrictive form of occupational regulation. Only where there is proof of demonstrated, substantial harms from an occupation that cannot be mitigated by one of the less restrictive options in the above menu should policymakers consider this regulation of last resort.²

C. Economic Impacts of Occupational Licensing

Research has found that licensing reduces access to jobs, inhibits geographic mobility, and raises the costs of services. Studies indicate that unnecessary licensing requirements reduce employment in licensed occupations and reduce wages for unlicensed workers relative to their licensed counterparts. These studies show that occupational licensing requirements present significant barriers to entering a licensed occupation and can reduce total employment in that profession.⁹

Occupational licensing often carries a cost in terms of opportunity. Wisconsin has several licenses that few other states regulate. For some occupations, Wisconsin's fees, and training requirements, are markedly different and more burdensome from other states. In terms of reciprocity, Wisconsin does not always accept the credentials of licensed professionals who happen to move from another state. In other words, Wisconsin's licensing requirements impose costs to the workforce—many who are of low and middle income—that do not exist in many other states.³

While the intent of occupational regulation is to protect the public from harm, some Wisconsin stakeholders agree this protection comes at a cost and burden to credential holders. One such stakeholder, who is a director of nurses, feels policymakers should remove burdensome regulations for Certified Nurse Aides (CNA). For example, Minnesota requires 70 hours of training. Her recommendation is to allow training requirements for certification to be accepted in Wisconsin if the individual trained in Minnesota. Also, current regulations do not allow CNAs under the age of 18 to operate mobility equipment (lifts and stands) alone. This stakeholder feels individuals old enough to drive a car should be able to move residents with this type of equipment. Additionally, the stakeholder wants Wisconsin to accept the testing at the conclusion of the CNA course instead of the cumbersome requirement to find a testing site to get certified, which require some students to travel up to 100+ miles and wait weeks or months to find a testing site to schedule their test in order to get certified to then be placed on the registry.

D. Protection of Public Health, Safety, and Welfare

The intent of occupational licensure is to safeguard public health and safety and protect consumers by guaranteeing minimum educational requirements and industry oversight, support career development and pathways for licensed workers and enhanced professionalism for licensed workers, and step in when competitive market forces (e.g. litigation or reputation) fail to achieve desired outcomes.⁹

However, many studies have found that unnecessary licensing requirements reduce employment in licensed occupations, reduce geographic mobility, reduce wages for unlicensed workers relative to their licensed counterparts, reduce market competition and innovation, increase the price of goods and services, and disproportionately burden low-income, military veterans and their families, people with criminal history, immigrants with work authorization, and dislocated and unemployed workers.⁹

Researchers have found little evidence that licensure improves the quality of services or protects consumers from harm. In fact, evidence suggests that the most onerous licensure laws may lead to lower-quality services and increased public safety risks.⁹ Licensing reduces the supply of service providers while simultaneously increasing the average operating costs for professionals. The result of limited consumer choice and increased prices could be that consumers forego necessary services because prices are too high, or no one is available for hire. This situation can pose a threat to public safety in certain occupations. For example, the inability to legally hire an electrician for repairs may lead to electrocution or fire. Similarly, licensing that limits the supply and increases the cost of veterinarians may prevent animal owners from vaccinating against contagious diseases like rabies.⁹

According to several studies, research revealed little tangible evidence of public benefit. In theory, licensing should improve the consumer experience and protect public health and safety by weeding out incompetent practitioners, especially in fields where consumers might be unable to tell good providers from bad ones on their own. Yet most research has failed to find a connection between licensing and service quality or safety.²

When implemented appropriately, licensing can offer important health and safety benefits and consumer protections and provide workers with clear professional development and training guidelines, as well as a career path.^{9,10} For decades, policymakers have adopted licensure policies to achieve a variety of goals. The Federal Trade Commission's 1990 report on the costs and benefits of licensure found that well-designed occupational licensing "can protect the public's health and safety by increasing the quality of professionals' services through mandatory entry requirements—such as education—and business practice restrictions—such as advertising restrictions."^{9,11} The report found that occupational licensing helps consumers when they cannot easily assess the professional's skills, and when the costs related to poor quality are especially high, as is the case with emergency health care providers. Economist Jason Furman testified to Congress in 2016 that the argument for licensing "is strongest when low-quality practitioners can potentially inflict serious harm, or when it is difficult for consumers to evaluate provider quality beforehand." Furman points out that the threats to consumers from incompetent commercial pilots and physicians justify a government

intervention; whereas, they face less harm and are better able to assess the quality of florists, barbers, or decorators.^{9,12}

Today's information-sharing economy and the growth of online consumer review websites help consumers evaluate provider quality and reputation. The enhanced access to information and strong provider incentives to deliver high-quality services bolster claims by experts that alternate regulatory approaches could achieve the same goals as licensing.⁹ Harvard and Stanford researchers found that, while licensure is not directly associated with improved quality of goods or services, there is a relationship between licensing and increased consumer confidence that can lead to increased economic activity. Additionally, the study argues that licensure can lead to consumers becoming more informed about the licensed service, which makes it more likely that they will “upgrade to higher quality services.” As a result, the researchers find an indirect improvement in the average level of quality provided in a market because of licensing.⁹

While survey responses from state agencies unveiled very few cases in Wisconsin where the public was harmed, many agencies attested that the public does benefit from regulatory oversight and the licenses they regulate are warranted for the protection of public health, safety, and welfare. In some cases, regulatory state agencies acknowledged that certain licensed occupations were of no public benefit and felt that deregulating these would not affect consumers, and therefore, recommended to eliminate them.

E. Evaluation of Barriers to Licensure

A report by the Institute for Justice (IJ) suggests that numerous occupations in various states are licensed unnecessarily. Among the occupations listed were: auctioneer, funeral attendant, and interior designer. Most of these occupations are licensed by only a handful of states, including Wisconsin. Proponents of occupational licensure reform make the argument that if a license were necessary to protect public health and safety, one would expect to see greater consistency in which occupations are licensed across states. For example, only seven states license tree trimmers, but it is highly unlikely that trees in those states—or the tasks required to trim them—are any more complex or dangerous than those in the other 44 that require no license.²

On average, the 102 occupations studied by the IJ are licensed by just 27 states. Only 23 of these occupations are licensed by 40 states or more. The vast majority of these occupations are practiced in at least one state without need of permission from the state and without evidence of widespread harm.² The IJ report cites that legislators rarely create licenses at the behest of consumers seeking protection from a

Benefits and Costs⁸

The intent of occupational licensure is to:

- Safeguard public health and safety
- Protect consumers by guaranteeing minimum educational requirements and industry oversight
- Support career development and pathways for licensed workers and enhanced professionalism for licensed workers
- Step in when competitive market forces (e.g., litigation or reputation) fail to achieve desired outcomes

However, unnecessary licensing requirements have been found to:

- Reduce employment in licensed occupations
- Reduce geographic mobility
- Reduce wages for unlicensed workers relative to their licensed counterparts
- Reduce market competition and innovation
- Increase the price of goods and services
- Disproportionately burden low-income populations, military veterans and families, people with a criminal history, immigrants with work authorization, and dislocated and unemployed workers.

demonstrated threat to health and safety from an occupation. Instead, they most often create licenses in response to lobbying by those already at work in an occupation and their industry associations.¹

Several studies have shown that such regulations disproportionately harm the low income and minority populations, who generally have less work experience and fewer employment opportunities than the rest of the population. These studies show that laws that make it more difficult for these populations to obtain certain jobs or start their own businesses only make it that much harder for them to work their way up the economic ladder.⁶

According to a report by the Reason Foundation, the low income populations, who are in most need of economic opportunity and can least afford to jump through regulatory hoops, are harmed by prohibitively costly licensing requirements.⁶ Many occupations that would otherwise be attractive options for those looking to improve their economic position and quality of life—including entry-level positions, jobs that require little or no formal education, and businesses that require little start-up capital for entrepreneurs—are needlessly regulated and price the poor out of the market. Thus, they must settle for fewer (and less desirable) jobs and lower wages, and the poorest of the poor are prevented from getting back on their feet.⁶

IV. Occupational Licensing Study and Survey Results

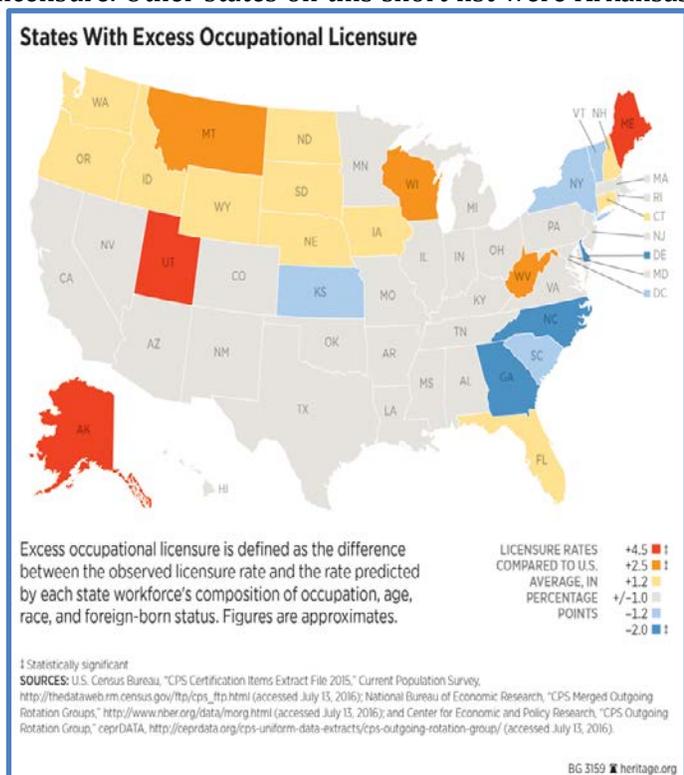
A. How Wisconsin Compares to Other States

A 2017 study by the Institute for Justice (IJ) found that Wisconsin licenses 42 of the 102 low- and medium-wage occupations selected for the study.² The report ranked Wisconsin as the 36th *most broadly and onerously licensed* state in the nation and the 42nd *most burdensome*. According to the IJ report—*Licensed to Work, 2nd Edition*—Wisconsin’s licensing laws require, on average, \$259 in fees, 214 days of education and experience, and around one exam.² A report published by the Reason Foundation in 2007 ranked Wisconsin as the 9th highest state in the nation to license the most job categories, only behind California, Connecticut, Maine, New Hampshire, Arkansas, Michigan, Rhode Island, and New Jersey.⁶

Wisconsin's National Rankings		
42	42nd	36th
Number of lower-income occupations licensed	Most burdensome licensing laws	Most broadly and onerously licensed state

Source: Institute for Justice, License to Work 2nd Edition

According to 2016 data from the U.S Census Bureau, Wisconsin is among the states identified as having the most excessive occupational licensure. Other states on this short list were Arkansas, Maine, and Utah—as the top three—with Montana and West Virginia joining Wisconsin to round out the top six. The data also identifies Wisconsin as a state with a high percentage of licensed workforce. According to data from the Wisconsin Department of Workforce Development, nearly 3.1 million people are employed in Wisconsin. Although Wisconsin issues over one million occupational licenses, some credential holders are not required to hold an occupational license by their employer. Rather, they voluntarily choose to hold one or more occupational licenses for a variety of reasons. Nevertheless, license types have increased nearly 85 percent over the past 20 years. This growth outpaces the national average and outpaces Wisconsin’s growth in population.³



Wisconsin issues several occupational license types that are unique to Wisconsin or are regulated by only a handful of other states, many of which are being recommended for elimination. Nearly 60 license types that are currently licensed in Wisconsin were found to be regulated in less than 10 other states. For example, interior designers are only regulated in four other states. DSPS regulates seven classes of blasters, whereas few states regulate more than one class. No other state besides Wisconsin regulates Designer of Engineering Systems. Only one other state regulates Dance Therapists and just a few others regulate Art Therapists and Music Therapists.

Additionally, Wisconsin regulates several “sub-specialty” type occupations that were not found to be regulated in other states, if at all. For example, DSPS administers licenses for “assistants”, “helpers”, and “trainers”. These license types are most prevalent in the trades occupations (electrician, plumber, fire sprinkler, and elevator categories), and social services professions (therapists and social workers).

In addition to DSPS, other state regulatory agencies also regulate occupations that fall in the “unique to Wisconsin” category. For example, Department of Agriculture, Trade and Consumer Protection (DATCP) administers three license types that are not regulated by any other state, including cheesemakers. As *America’s Dairyland* and the *Cheese Capitol* of the world, one may think it’s only logical for Wisconsin to be the only state in the country to require its cheesemakers to be licensed in order to make cheese in a licensed facility for public sale. According to DATCP, to become a licensed cheesemaker, individuals are required to have one of five different experience options, complete 240 hours interning under a licensed cheesemaker, and pass an exam.

Wisconsin is also the only state in the nation to license buttermakers. According to DATCP, to become a licensed buttermaker, individuals are required to pass an exam plus have one of six different experience options, complete 120 hours of internship under a licensed buttermaker plus department-approved courses. With only 43 licensed buttermakers in Wisconsin, proponents of change say this places Wisconsin’s butter industry at risk.¹⁴

Additionally, DATCP administers three other licenses that few states regulate. In all states but Wisconsin, a humane officer is regulated at the county level. A veterinarian-faculty license is only licensed by four other states, and the veterinarian-temporary consulting permit is only regulated by one other state. Both latter licenses are recommended for elimination.

Under the licenses administered by the Department of Workforce Development, no other states regulate a certified private rehabilitation specialist or require a “License to Appear at a Worker’s Compensation Hearing Agent/Representative”. Only one other state regulates Registered Private Employment Agents. Consequently, all three of these occupations are also being recommended for elimination.

B. State Agency Survey

As mentioned in the introductory section of this report, two surveys were conducted as part of the Wisconsin Occupational Licensing Study, with the first issued to state agencies. This report contains information and recommendations from 10 of the 13 state regulatory agencies.

In addition to a request to supply certain data related to each of the licenses they administer, each agency was asked to provide a summary statement to attest if the license should be retained and is appropriate to protect consumer health, safety, and welfare. Most agencies felt the licenses they currently administer were appropriate to protect consumers and that the public benefits from the regulation of the occupation.

The Department of Agriculture, Trade and Consumer Protection (DATCP) relayed that while there was no quantitative data available for buttermakers or cheesemakers, it is logical to assume that the common baseline requirements for buttermakers and cheesemaker increase knowledge of the proper procedures for making consistent, high-quality, safe butter and cheese. Over a five-year period, DATCP received no complaints against either occupation. DATCP indicated some industry advocates want the agency to retain the regulation of these occupations.

The Department of Financial Institutions (DFI) feels the regulation of their occupational licenses helps to protect the public from misappropriation, excessive fees, theft, and fraud, enables the delivery of clear and informative information, and ensures the consumer receives the services for which they paid. Like DFI, many of the occupations licensed by state regulatory agencies must also abide by federal regulations.

In the case of certified nurse aides, the Department of Health Services (DHS) stated that federal legislation (Omnibus Budget Reconciliation Act of 1987) and associated regulations (42 CFR 483.152) require that Medicare and Medicaid-certified nursing homes employ nurse aides who are trained and evaluated through training programs approved by their state. Federal regulations require that these training programs consist of at least 75 hours of training, including at least 16 hours of supervised practical or clinical training. Federal regulations also list the subject areas and skills to be taught, outline the qualifications for approved trainers, define the competency evaluation process, and require that each state establish and maintain a registry of nurse aides. Wisconsin statutes and administrative rules establish training, testing, and registry requirements. Supported by several Wisconsin organizations and associations, the minimum 75-hour nurse aide training course was increased in Wisconsin to 120 hours, including 32 hours of hands-on clinical training.

Referring to the emergency medical practitioner licenses, DHS stated that licensing and regulation helps to ensure the public can continue to trust that their emergency medical service practitioners are competent and trustworthy professionals.

This was the common theme from stakeholders and advocacy groups for the medical and health related occupations. A letter and report received by the Wisconsin Society for Respiratory Care states that their related occupational licenses benefit the health and safety of Wisconsin patients and that licensure ensures services, including life-sustaining procedures, provided to patients are performed by practitioners who meet high standards of accredited education and competency.

The Department of Natural Resources (DNR) feels the licensing and regulation of their occupations are necessary to assure these individuals and businesses have the training, resources, and experience required to properly provide services as defined by state regulations. For example, water testing by itself cannot serve as a substitute for proper well grouting and construction that are performed by well drillers and pump installers. The presence of contaminants in water can lead to health issues and cause contamination of the groundwater resource and without certification and licensing, there are risks to public health and the environment.

The Department of Revenue (DOR) feels the regulation of assessors is a minimal cost to the assessor and a great benefit to the public. The certification provides a mechanism for DOR to enforce Wisconsin's uniform taxation clause and require assessors to implement laws and standards.

The Department of Transportation (DOT) feels that current licenses issued by their department provide safeguards to industry partners and the public. The regulations and requirements associated with each license ensure a certain level of truthful and ethical business practices are present during all facets of a transaction. They feel the deregulation of those occupations would result in significant misrepresentation and fraud resulting in the victimization of public citizens.

The Wisconsin Ethics Commission, which regulates lobbyists, feel public disclosure of the identity, expenditures, and activities of persons who hire others or are hired to engage in efforts to influence the actions for the legislative and executive branches is integral to the continued functioning of an open government and the preservation of the integrity in the governmental decision-making process.

The Office of the Commissioner of Insurance (OCI), who regulates insurance producers, feel the licensure requirements and regulatory oversight for insurance producers working the state of Wisconsin are warranted. OCI states they actively monitor the insurance marketplace and investigate any complaints, protect the public, and ensures that the insurance needs of Wisconsin citizens are met responsibly and adequately. OCI feels this system of regulatory oversight ensures that insurance producers have adequate training, operate using sound business practices and comply with state insurance laws and regulations.

C. Credential Holder and Stakeholder Survey

The second survey conducted as part of the Wisconsin Occupational Licensing Study was designed and intended to be taken by credential holders, non-credential holders, and stakeholders. The survey was emailed by DSPS to its credential holders and attached regulatory boards and posted on the department's website. The survey was also provided to the other state regulatory agencies for dissemination to their credential holders.

The survey was taken by a total of 65,319 respondents. The first question asked respondents if they currently have an active occupational or professional license or credential that is issued by the state of Wisconsin. For the purposes of the survey, a definition of "license" was provided to respondents and defined as follows:

"License" means a state of Wisconsin-issued occupational license, credential, certification, or registration. "License" does not include permits, facility or establishment licenses, business licenses (such as a liquor license or vending license), or licenses required by a local or municipal ordinance.

Of the total respondents, 92.71 percent self-identified as holding an active Wisconsin-issued occupational license; 0.35 percent said their license application is pending, 1.35 percent said their license was inactive or expired, and 3,647 individuals (5.58 percent), said they did not hold a Wisconsin-issued license.

The second question asked respondents to specify the type of active license that they held. If they held multiple licenses, they were asked to select the category type that best describes the license

they use for their primary occupation. For the purposes of this survey, “*main job or occupation*” was defined to mean their current and main occupation or job, job from which they are on layoff, or job at which they last worked if between jobs.

Because respondents could choose which category best described their license type, some respondents may have selected different categories for the same license type. Therefore, although minimal, some occupations may be spread over more than one of the categories.

The survey results for each question are provided below.

Q. Specify the type of active license that you hold. If you hold multiple licenses, select the category type that best describes the license you use for your *primary/main* occupation.

Category	No. of Respondents	%
Animal or Agriculture related	1,170	1.90
Banking and Financial related (includes investments, insurance, lenders, collectors, tax assessor, charitable fundraising)	7,087	11.49
Business related	8,220	13.33
Chemical, Environmental, or Utilities Dealer, Supplier, or Applicator (includes fuel, gas, oil, water, power, pesticides, asbestos, hazardous materials, or waste products)	676	1.10
Educator or School related (includes instructor, teacher, administrator, or service provider of elementary, secondary, postsecondary education)	1,560	2.53
Food or Restaurant related	179	0.29
Health or Medical related	29,327	47.55
Legal, Security, or Enforcement related (i.e. attorney, investigator, inspector, tester, certifier, private detective, notary, etc.)	969	1.57
Product or Vehicle Manufacturer, Broker, or Dealer	179	0.29
Sales related	1,716	2.78
Social Services (includes child and adult care services)	3,004	4.87
Sports related	44	0.07
Trades related	6,451	10.46
Other (please specify)	88	0.13
Total Respondents	61,672	94.41

Q. How useful is your license for each of the following?

a. Getting a job?

Category	No. of Respondents	%
Extremely useful	47,257	79.05%
Very useful	6,095	10.20%
Somewhat useful	3,776	6.32%
Not so useful	1,014	1.70%
Not at all useful	1,637	2.74%
Total Respondents	59,779	

b. Keeping a job?

Category	No. of Respondents	%
Extremely useful	47,638	79.69%
Very useful	6,060	10.14%
Somewhat useful	3,536	5.92%
Not so useful	1,081	1.81%
Not at all useful	1,464	2.45%
Total Respondents	59,779	

c. Keeping you marketable to employers or clients?

Category	No. of Respondents	%
Extremely useful	47,857	80.06%
Very useful	6,389	10.69%
Somewhat useful	3,410	5.70%
Not so useful	925	1.55%
Not at all useful	1,198	2.00%
Total Respondents	59,779	

d. Improving your work skills?

Category	No. of Respondents	%
Extremely useful	30,526	51.06%
Very useful	9,872	16.51%
Somewhat useful	9,794	16.38%
Not so useful	4,802	8.03%
Not at all useful	4,785	8.00%
Total Respondents	59,779	

e. Increasing your wages/salary?

Category	No. of Respondents	%
Extremely useful	33,350	55.79%
Very useful	8,361	13.99%
Somewhat useful	8,682	14.52%
Not so useful	4,575	7.65%
Not at all useful	4,811	8.05%
Total Respondents	59,779	

Q. Which of the following was required to obtain your license associated with your primary occupation? (Check all that apply)

Category	No. of Respondents	%
High school diploma or equivalent	26,409	44.55
Passing a test	4,4709	75.43
Demonstrating certain skills	23,518	39.68
Completing an internship or apprenticeship	16,242	27.40
Previous job-related experience	9,002	15.19
Technical certification (Less than 2 years)	6,709	11.32
Some college, no degree	2,634	4.44
Associate degree	14,348	24.21
Bachelor's degree*	7,669	12.94
Master's degree	7,641	12.89
Doctoral or professional degree	8,352	14.09
None of the above	977	1.65
Other (please specify)	3,111	5.25
Total Respondents	59,274	

*This option was inadvertently omitted in the survey. The results represent responses from respondents who added this option under the "other" category.

Q. About how many hours of instruction did you complete to obtain your license associated with your primary occupation?

Category	No. of Respondents	%
Less than 40	5,498	9.34
40 to 159	6,948	11.80
160 to 479	2,574	4.37
480 hours (half a full-time school year) to 959 hours	2,973	5.05
960 hours (1 full-time school year) or more	40,876	69.44
Total Respondents	58,869	

Q. Select the category that best describes the initial costs you incurred to *obtain* your license associated with your primary occupation.

(Include costs for initial education/tuition, registration fees, initial licensing fees, exam fees, **required** association fees, or other **required** costs you incurred to obtain your license.)

Category	No. of Respondents	%
Zero to \$200	5,755	9.85
\$201 to \$500	6,882	11.78
\$501 to \$1,000	3,349	5.73
\$1,001 to \$5,000	5,880	10.06
\$5,001 to \$10,000	6,053	10.36
\$10,001 to \$50,000	17,094	29.25
\$50,001 to \$100,000	8,066	13.80
Greater than \$100,000	5,356	9.17
Total Respondents	58,435	

Q. Select the category that best describes the ongoing costs you incur to *retain* your license associated with your primary occupation.

(Include costs for continuing education, registration fees, renewal licensing fees, exam fees, **required** association fees, or other **required** costs you incur in order to keep your license.)

Category	No. of Respondents	%
Zero to \$200	20,423	35.08
\$201 to \$500	17,349	29.80
\$501 to \$1,000	9,164	15.74
\$1,001 to \$5,000	8,859	15.22
\$5,001 to \$10,000	1,511	2.60
\$10,001 to \$50,000	657	1.13
\$50,001 to \$100,000	149	0.26
Greater than \$100,000	103	0.18
Total Respondents	58,215	

Q. Rate the level of hardship or barriers you faced to *obtain* your initial license.

Category	No. of Respondents	%
None at all	15,268	26.26
A small amount	18,353	31.56
A moderate amount	17,699	30.44
A large amount	6,595	11.34
A great amount that resulted in my inability to get a license.	231	0.40
Total Respondents	58,146	

Q. Rate the level of hardship or barriers you faced to *retain* your initial license.

Category	No. of Respondents	%
None at all	22,921	39.46
A small amount	25,409	43.75
A moderate amount	8,226	14.16
A large amount	1,365	2.35
A great amount that resulted in my inability to get a license.	163	0.28
Total Respondents	58,146	

Q. Rate the importance that your license serves in protecting public citizens from harm or danger.

Category	No. of Respondents	%
Extremely important. It's a matter of life or death.	21,189	36.59
Very important. The public would be at risk for significant harm or danger if a license wasn't required for this occupation.	23,730	40.97
Somewhat important. It's possible the public could be exposed to some risk if a license wasn't required for this occupation.	8,707	15.03
Not so important. It's unlikely the public would be exposed to harm or danger if a license wasn't required for this occupation.	2,478	4.28
Not at all important. There is no risk of harm or danger to the public if a license wasn't required for this occupation.	1,810	3.13
Total Respondents	57,914	

Q. Do you hold a similar occupational license in another state(s)?

Category	No. of Respondents	%
Yes	14,113	24.38
No	43,766	75.62
Total Respondents	57,879	

Q. Select the category that best describes the *initial* requirements to *obtain* your out of state license compared to Wisconsin's initial licensing requirements.

(Compare educational and other requirements, fees, and other costs.)

Category	No. of Respondents	%
Way more than Wisconsin	953	6.76
Somewhat more than Wisconsin	2,112	14.97
About the same as Wisconsin	9,567	67.83
Somewhat less than Wisconsin	930	5.59
Way less than Wisconsin	541	3.84
Total Respondents	14,104	

Q. Select the category that best describes the *ongoing* requirements to *retain* your out of state license compared to Wisconsin's initial licensing requirements.

(Compare educational and other requirements, fees, and other costs.)

Category	No. of Respondents	%
Way more than Wisconsin	823	5.87
Somewhat more than Wisconsin	2,170	15.48
About the same as Wisconsin	9,866	70.37
Somewhat less than Wisconsin	737	5.26
Way less than Wisconsin	425	3.03
Total Respondents	14,021	

Q. Rate the level of hardship or barriers you faced to *obtain* your initial out of state license.

Category	No. of Respondents	%
The state has way more hardships and barriers than Wisconsin.	630	4.52
The state has somewhat more hardships and barriers than Wisconsin.	2,078	14.92
The state has about the same as Wisconsin.	9,880	70.92
The state has somewhat less hardships and barriers than Wisconsin.	934	5.99
The state has way less hardships and barriers than Wisconsin.	509	3.65
Total Respondents	13,931	

Q. Rate the level of hardship or barriers you faced to *retain* your out of state license.

Category	No. of Respondents	%
The state has way more hardships and barriers than Wisconsin.	351	2.53
The state has somewhat more hardships and barriers than Wisconsin.	1,854	13.37
The state has about the same as Wisconsin.	10,582	76.30
The state has somewhat less hardships and barriers than Wisconsin.	624	4.50
The state has way less hardships and barriers than Wisconsin.	458	3.30
Total Respondents	13,869	

Q. Are you aware of any instances where occupational licensing regulations have impacted the cost or availability of consumer goods or services?

(i.e. increased costs for goods or services, decreased availability of practitioners)

Category	No. of Respondents	%
Yes	656	19.30
No	2,743	80.70
Total Respondents	3,399	

Q. How important is it to regulate Wisconsin's occupations in order to protect public citizens from harm or danger?

Category	No. of Respondents	%
Extremely important. It's a matter of life or death.	1,917	62.36
Very important. The public would be at risk for significant harm or danger if a license wasn't required for this occupation.	853	27.75
Somewhat important. It's possible the public could be exposed to some risk if a license wasn't required for this occupation.	174	5.66
Not so important. It's unlikely the public would be exposed to harm or danger if a license wasn't required for this occupation.	85	2.77
Not at all important. There is no risk of harm or danger to the public if a license wasn't required for this occupation.	45	1.46
Total Respondents	3,074	

Q. Indicate what types of licenses should be regulated in order to protect public citizens from harm or danger. (Check all that apply.)

Category	No. of Respondents	%
Animal or Agriculture related	2,328	78.52
Banking and Financial related (includes investments, insurance, lenders, collectors, tax assessor, charitable fundraising)	2,328	88.63
Business related	1,803	60.81
Chemical, Environmental, or Utilities Dealer, Supplier, or Applicator (includes fuel, gas, oil, water, power, pesticides, asbestos, hazardous materials, or waste products)	2,778	93.69
Educator or School related (includes instructor, teacher, administrator, or service provider of elementary, secondary, postsecondary education)	2,670	90.05
Food or Restaurant related	2,425	81.79
Health or Medical related	2,865	96.63
Legal, Security, or Enforcement related (i.e. attorney, investigator, inspector, tester, certifier, private detective, notary, etc.)	2,694	90.86
Product or Vehicle Manufacturer, Broker, or Dealer	2,250	75.89
Sales related	1,344	45.33
Social Services (includes child and adult care services)	1,283	43.27
Sports related	2,657	89.61
Trades related	2,154	72.65
No occupations should be regulated	70	2.36
Other (please specify)	213	7.18
Total Respondents	2,965	

D. The Cost and Burdens of Occupational Licensure

Many studies have found it difficult to obtain data on the total financial burden for every individual occupational license since the largest financial burden for a licensee is the cost of initial tuition or education, which varies vastly depending on the profession (i.e. cost of a doctorate degree vs. a certification course). However, many studies have collected this data for groups or types of occupations.

Information collected by the Institute for Justice (IJ) on 102 low- and medium-wage occupations provides a sense of the range of licensing burden across occupations and across states, in terms of education and experience prerequisites, licensure fees, examinations, and minimum age requirements. States range from Pennsylvania, where it takes an estimated average of 113 days (about four months) to fulfill the educational and experience requirements for the average licensed occupation examined, to Hawaii, where it takes 724 days (about two years).¹⁰ The IJ report reveals that Wisconsin's licensing laws require, on average, \$259 in fees and 214 days of education and experience.²

While several studies have identified common themes when it comes to the many burdens that workers face while pursuing a state license, this report contains barriers that may be specific to Wisconsin occupations. In their survey responses, state regulatory agencies provided examples of barriers and hardships that individuals may face to achieve and maintain the licensure. It should be noted that the agencies included licensing requirements that either they thought were a barrier or that could be considered a barrier from a license holder's perspective.

Some barriers identified by state regulatory agencies include the following:

1. Cost of initial and continuing education to obtain and retain the license.
2. Cost of initial license and renewal fees, including payments for annual registrations, certifications, or applications.
 - Pesticide Commercial Applicators are required to apply and pay a fee annually.
3. Cost of national and state examinations.
4. Cost of ongoing competency testing based on the requirement.
 - Licensed Pesticide Applicators are required to pass a competency test every five years.
5. Lack of availability and/or access for educational programs, courses, and national and state exams, in terms of number of times offered and locations.
 - A national exam for veterinarians is only offered twice per year.
 - No Wisconsin training center currently offers the training as an initial course for (EMT) Intermediates because this level of emergency medical practitioner is no longer included in the National EMS Educational Standard.
 - For lead inspectors, only the initial training is available in Wisconsin (due to very limited demand). Applicants seeking to renew must take an eight-hour refresher training outside of Wisconsin or take the 16-hour initial training over again in lieu of the refresher. The required x-ray fluorescence device training is only offered intermittently by manufacturers of the devices.
 - Lack of instructors and trainers required for certain courses.

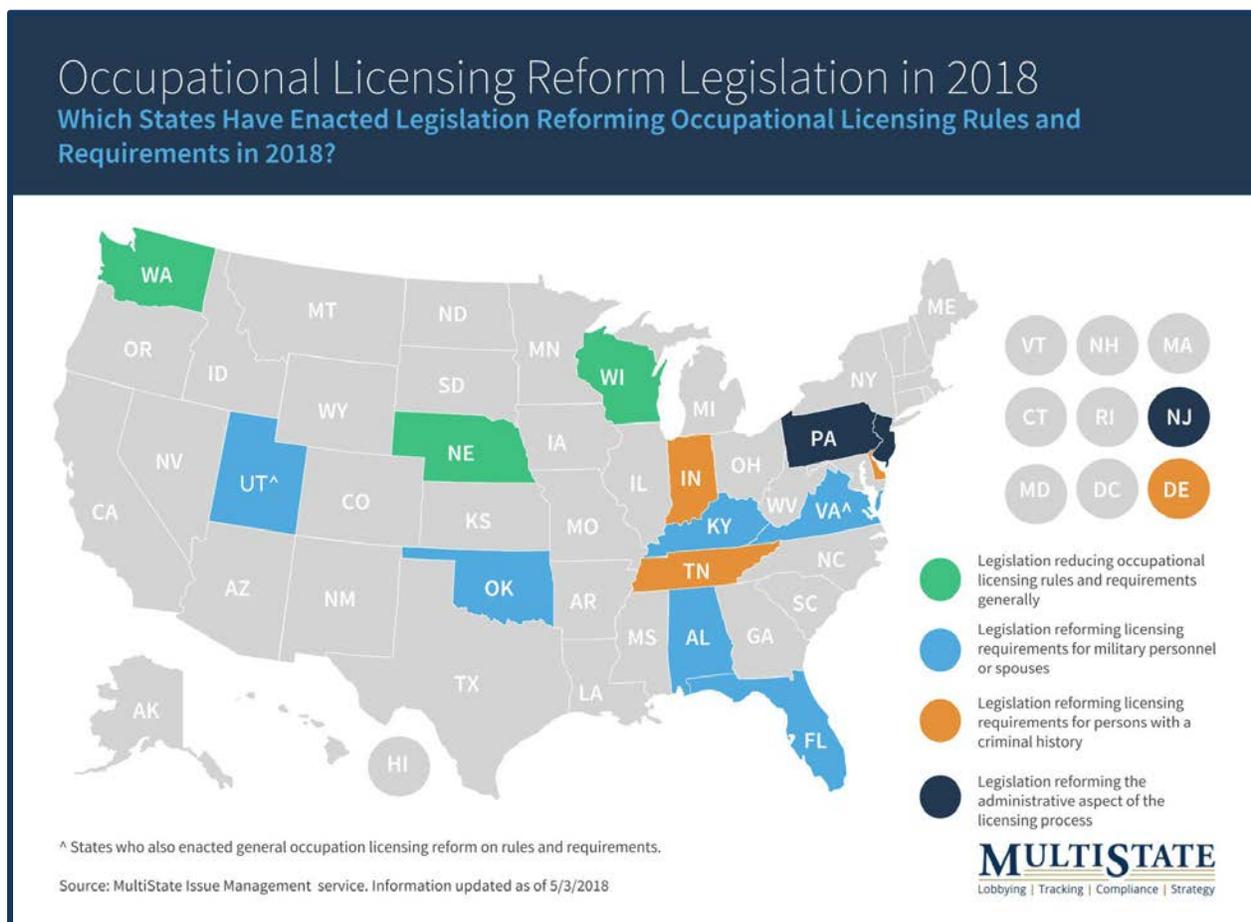
6. Time commitment and costs associated with traveling long distances to obtain required education and testing.
 - There is only one accredited veterinary medical education program in Wisconsin, and only 30 in the United States.
 - Many individuals from rural areas must travel several miles to take a course or exam.
7. Lack of nationwide universal computer application and renewal filing system (applies to some DFI occupations).
8. Requirement to obtain surety bond.
9. Requirement to submit to fingerprinting.
10. Hearing requirements related to “character and fitness” of the applicant (applies to some DOT and DWD occupations).
11. Requirements related to financial responsibility.
12. Requirements for clean driving or criminal history.
 - Applicants for mortgage brokers cannot have been convicted of or pled guilty or no contest to a felony in a seven-year period before date of application.
13. Delinquency checks for taxes, unemployment insurance contributions, and child/family support payments.
14. Lack of available clinical sites for health professions to obtain the required patient contacts while in training.
15. Excessive requirements for initial education for certain occupations.
16. Language barriers for individuals where English is not their primary language.
 - DHS relayed that a large number of people who hold lead or asbestos abatement type licenses, English is their second language, which causes barriers. They struggle to find a training course in their first language that allows them to understand the material in class. If they cannot understand the material taught to them in class, they then have difficulty understanding the exam language which makes it difficult for them to pass the exam in order to obtain a license. When they pass the exam, they sometimes have difficulty communicating with regulators in order to obtain their license. While classes, exams, and applications are offered in Spanish, DHS feels there is room for improvement in this area.
17. Lack of reading skills necessary to read and pass an exam.
18. Reciprocity barriers.
 - While nurse aides who successfully train and test in other states are able to transfer to Wisconsin if they have completed equivalent training, those with less training must provide verification of employment to satisfy requirements or complete a 45-hour bridge program.
19. Minimum age requirements
 - Heat exchange and water well drillers must be at least 20 years old, while water well drilling rig operators and heat exchange drilling rig operators can be at least 18.
 - Certified nursing aides must be at least 18 years old in order to operate certain types of patient mobility equipment

V. Occupational Licensing Reforms

A. Recent Reforms in Wisconsin

Although increased national attention has been focused on occupational licensing reform over the past few years, the concept of “de-licensing” is not new to Wisconsin. In 1937, Wisconsin passed a law requiring that watchmakers be licensed. A five-member Board of Examiners administered the statute, administered examinations, and issued “certificates of registration.” In 1979, the Board was abolished, thereby ending the licensing requirement.

Since 2012, Wisconsin has offered fee waivers to veterans and members of military families seeking to become licensed after moving from a state where they already held a license. In the last two years, Governor Scott Walker has signed into law nearly 30 bills that have contributed to job growth and occupational licensing reform that have eliminated barriers for many populations, entrepreneurs, trades workers, and other professionals.



2016 Wisconsin Act 258 eliminated the need for registration of timeshare salespersons. Existing law required a broker or salesperson to obtain a license for the act of selling real property in Wisconsin, but timeshare and membership campground salespersons were required to register with the Real Estate Examining Board instead.

2017 Wisconsin Act 20 increased access to preventative care for underserved populations by increasing the settings in which dental hygienists are authorized to practice dental hygiene in certain settings, without the authorization and presence of a licensed dentist.

2017 Wisconsin Act 59 required the Department of Safety and Professional Services to study occupational licenses and to submit a report of its findings to the Governor and Legislature by no later than December 31, 2018. This law also sunsetted the Wisconsin Rental Weatherization Program, thereby eliminating the licensure of rental weatherization inspectors.

2017 Wisconsin Acts 81 and 82 eliminated costly barriers for barbers, cosmetologists, and related professions. The reforms removed key professional licensing requirements that prohibited entry into these professions by removing separate licensing manager requirements and now allow barbers and cosmetologists to provide instruction without obtaining an additional license. The reforms also eliminated continuing education requirements for barbers, cosmetologists, aestheticians, electrologist, and manicurists and allow these professionals to provide services outside of salons and accept professional experience from licensees from other states.

2017 Wisconsin Act 88 authorized Wisconsin to participate in national data-sharing programs that will help protect the public interest and contribute to the increased transparency and mobility of the state's licensed Certified Public Accountants.

2017 Wisconsin Act 110 made various changes to laws governing real estate practice that will allow for the cooperation between Wisconsin real estate firms and out-of-state brokers representing buyers and tenants in commercial transactions – helping expand economic opportunities for Wisconsin-based companies.

2017 Wisconsin Act 113 brought Wisconsin into compliance with federal law, which requires states to regulate appraisal management companies, and will help Wisconsin avoid a likely major disturbance in the financing of most residential real estate transactions.

2017 Wisconsin Act 121 required the Department of Agriculture, Trade, and Consumer Protection to establish and implement a program for veterans, and their immediate family members if the veteran died during service, is missing in action, or died as a result of a service-connected disability (qualifying family members), to integrate them into the field of agriculture and support those currently working in agriculture. The program requires assisting eligible participants in rural and urban communities; providing employment, mentorship, and outreach opportunities; facilitating education opportunities; and providing advice, technical assistance, and training.

2017 Wisconsin Act 123 eliminated the signature requirement of a national guard member claiming payments under the Department of Military Affairs (DMA) Tuition Grant Program and the representative of the school certifying that the guard member has satisfactorily completed the course and achieved the minimum grade point average. Instead, the Act requires the DMA to rely on the qualifying school's certification to determine a guard member's eligibility for the grant.

2017 Wisconsin Act 135 ratified and entered Wisconsin into the Enhanced Nurse Licensure Compact (eNLC), replacing the original Nurse Licensure Compact (NLC), which will allow Wisconsin to maintain continued participation in the nurse licensure compact and ensure unnecessary additional licensure barriers do not exist for our state's nursing workforce.

Under 2017 Wisconsin Act 148, no apprenticeship program can require a ratio of more than one journey worker for each apprentice in an apprenticeship. The Act also removed the specific length of apprenticeship programs in prior law for plumbers and carpenters.

2017 Wisconsin Act 153 requires the Department of Workforce Development (DWD) to permit minors at least 15 years of age to be employed as lifeguards. DWD rule previously prohibited minors 14 and 15 years of age from being employed as lifeguards.

2017 Wisconsin Act 168 allows a child of any age to be employed under the direct supervision of the child's parent or guardian in connection with the parent's or guardian's business, trade, or profession, without a work permit.

2017 Wisconsin Acts 180, 227, and 293 helped address growing patient care needs by allowing certain health professionals to delegate various types of services.

2017 Wisconsin Act 195 created the Hire Heroes program, under which employers can be reimbursed for the wages of a veteran for employers providing transitional jobs to veterans of the U.S. Armed Forces who have been unemployed for at least four weeks.

2017 Wisconsin Act 206 revised provisions relating to lifetime teaching licenses and created a pilot grant program to support college courses taught in high schools.

2017 Wisconsin Act 262 requires the Department of Safety and Professional Services to grant a certification as a substance abuse counselor, clinical supervisor, or prevention specialist to an individual who holds a similar unexpired certification granted by another state that has requirements for certification that are not lower than this state's certification requirements.

2017 Wisconsin Act 278 streamlined the licensing process for those with criminal records by allowing them to receive an individualized review of their criminal history before submitting a full licensure application, which will reduce reoffending rates in Wisconsin and help solve a growing worker shortage.

2017 Wisconsin Act 288 removed an arbitrary barrier for individuals seeking to become a licensed chiropractor in Wisconsin by bringing Wisconsin's passing exam scores required for chiropractic licensure in line with 47 other states.

2017 Wisconsin Act 319 helped remove a burdensome barrier for veterans and economically disadvantaged populations seeking to obtain the necessary license to enter Wisconsin's workplace by reducing the standard fee required for an initial license.

2017 Wisconsin Act 323 developed a coaching program for the hiring of individuals with disabilities that directly engages private and nonprofit businesses.

2017 Wisconsin Act 329 eliminated a provision that imposed a \$50 forfeiture on a credential holder or applicant who failed to report a change of name or address within 30 days of the change.

2017 Wisconsin 329 also generally prohibited local governments from regulating tattoo and body piercing, unless authority is delegated by the Department of Safety and Professional Services.

2017 Wisconsin Act 330 eliminates exam eligibility requirements for individuals applying for a credential from the Marriage and Family Therapy, Professional Counseling, and Social Work Examining Board. Prior law required individuals to satisfy certain prerequisite degree requirements to become eligible to take the applicable licensure exam.

2017 Wisconsin Act 331 allowed for greater uniformity and consistency across DSPS-regulated occupations and professions that will provide greater convenience for DSPS customers.

2017 Wisconsin Act 336 created an incentive grant program for school districts that provide training for certain public safety occupations and provides completion awards for students who complete those programs. Currently, these grants are available for programs that are designed to mitigate workforce shortages in an industry or occupation that the Department of Workforce Development identifies as facing workforce shortages or shortages of adequately trained entry-level workers. Under the Act, these grants to school districts will also be available for public safety occupations training programs. Eligible programs are industry-recognized certification programs that are designed to prepare individuals for occupations as fire fighters, emergency medical responders, or emergency medical services practitioners.

2017 Wisconsin Act 341 creates an exception to the prohibition for practice at certain sporting events or facilities, by an individual who is licensed in good standing to practice medicine and surgery in another state. The Act authorizes the Medical Examining Board (MEB) to enter into agreements with medical or osteopathic licensing boards of other states to implement the new licensure exception.

2017 Wisconsin Act 350 expanded the licensure or certificate renewal for certain emergency medical services personnel and ambulance service providers from every two years to every three years.

B. Recommendations for Reform of Current Regulated Occupations

For occupational licenses outside the jurisdiction of DSPS, the recommendations for reform contained in this report are based on the statements, data, and information received by the state regulatory agency who administers the license. For licenses under the jurisdiction of DSPS, the Department took several factors into consideration for the occupational licenses being recommended for reform, including the criteria listed below:

- 1) Is the regulation of this occupation necessary to safeguard public health and safety and protect consumers?
- 2) Does the public substantially benefit from this occupation being regulated?
- 3) Is it reasonable to assume public citizens would be subjected to harm or danger if this occupation was unregulated or regulated by a less restrictive means?
- 4) Is the regulation of this occupation overly broad or onerous?
- 5) How many other states regulate this occupation?
- 6) Is this occupation among the nationally identified occupations that are needlessly regulated?
- 7) Are there too few individuals who possess this licensure type to financially justify the existence of the license and/or licensing board?

- 8) Is there is a history of minimal complaint or enforcement activity that may suggest there is no justification for strict regulation?
- 9) Could the Department accept credentials from other organizations that meet the equivalency standards?
- 10) Are there more effective, less restrictive, or alternative methods for regulating this occupation (as illustrated by the *Inverted Pyramid in Figure 2*)?

After thoughtful consideration of these factors and input from stakeholders and members of the public, DSPS recommends the elimination of 15 occupational licenses under its jurisdiction. In addition, six of the other regulatory agencies are recommending the elimination of 13 occupational licenses that fall under their respective jurisdictions. (A complete list may be found in Appendix C of this report.)

C. Considerations for Future Occupational Licensing Reform

This report includes several recommendations for occupational licensing reform. The supplemental information and state comparison data contained in this report should provide policymakers with ample data to make informed decisions for possible additional future reforms. Legislators may also consider conducting more in-depth studies on certain occupations where reform may be warranted.

To continue the consortiums goal of reforming Wisconsin's occupational licensing regulations, it is recommended policymakers collaborate with other states, especially our border states, in order to improve portability across state lines and to refine regulatory practices that create barriers to work. Future research should include more in-depth analysis of fees, continuing education, work experience requirements to minimize complexity and procedural burdens; continued review of the impact of criminal history and substantial relation to the scope of practice; and perform ongoing assessments to ensure that licensing requirements closely align with the protection of public health and safety without being overly broad or burdensome.

Many states are also studying employment and occupational trends and taking these trends into consideration when making occupational licensing reform decisions. The Department of Workforce Development has many experts, useful tools, and resources that can be tapped for input and data relating to employment trend predictions at both the state and national levels. The data helps in predicting which Wisconsin-regulated occupations will most likely experience the largest growth in employment over the next 10 years (2016-2026) and which ones will experience the least amount of growth. Understanding these trends will be valuable for future policy decisions.

One of the additional reforms explored by DSPS include the acceptance of national credentials in lieu of requiring a separate license and separate exams, which impose a financial burden to credential holders. For example, DSPS administers several trade-related occupations where acceptance of credentials from the International Code Council (ICC) could be considered if deemed equivalent to a Wisconsin credential. (Through both statute and administrative rules, Wisconsin adopts several technical standards produced by the ICC). Earlier this year, DSPS discussed these options with ICC representatives.

In July 2018, DSPS representatives participated in a meeting, hosted by the Wisconsin Code Officials Alliance (WCOA), with the ICC President, ICC Board Chair, and other ICC representatives, to discuss how Wisconsin and the ICC can work together to streamline credentialing of these related occupations. Currently, some credential holders take courses and exams offered by both ICC and DSPS.

Following the meeting, DSPS compiled a list of possible ICC credentials that could provide equivalencies. A thorough analysis found some ICC credentials to be similar to Wisconsin's that would require only minimal modifications to include important elements specific to Wisconsin, typically referred to as "*Wisconsinisms*". For other license types, where ICC does not require any qualifications to take an exam, Wisconsin statutes require previous experience, coursework, an apprenticeship, or some level of experience before taking an exam. For these credentials, legislative changes would be needed in order to authorize DSPS to implement these reforms.

Other methods that could be considered for reform include the implementation of sunrise and sunset legislation. Several states have taken steps to adopt sunrise and sunset reviews, audits, active supervision, and other procedures to weigh the costs and benefits of existing and proposed occupational licensure. A sunrise process includes a cost-benefit analysis as part of any proposal to regulate a previously unlicensed profession. The sunset review process involves periodic reviews or legislative audits of licensing and licensing boards, and their potential elimination unless the legislature acts to continue them.⁹

In the state of Vermont, when the state Office of Professional Regulation receives requests from individuals or groups recommending that a profession be regulated, Vermont law provides that the profession should be regulated only when necessary to protect the public. When the office receives a request, it conducts a preliminary assessment and develops a recommendation for the Legislature as to whether or not the profession should be regulated. (A link to Vermont's *Application for Preliminary Sunrise Review Assessment* form may be found in the Resource section of this report.)

Pursuant to 26 V.S.A. § 3101:

"It is the policy of the state of Vermont that regulation be imposed upon a profession or occupation solely for the purpose of protecting the public. The legislature believes that all individuals should be permitted to enter into a profession or occupation unless there is a demonstrated need for the state to protect the interests of the public by restricting entry into the profession or occupation. If such a need is identified, the form of regulation adopted by the state shall be the least restrictive form of regulation necessary to protect the public interest." - State of Vermont

Some evidence suggests that sunrise reviews can be more successful at limiting the growth of licensing than sunset reviews are at removing unnecessary licensing. A sunset review can nevertheless be useful because, even if licensing was justified when first introduced, technological and economic changes may have rendered it unnecessary or overly restrictive. Periodic examination of existing rules is thus helpful in maintaining the quality of occupational regulation. Sunset reviews also have the benefit of reviewing complaints lodged with the licensing board. These can provide important insight into the value of continuing the license.¹⁰

Research has found that other practitioners—not consumers—file a large majority of complaints which mostly related to workers practicing without a license rather than any substantive violation of rules concerning health and safety.¹⁰ Therefore, experts caution that sunset reviews should carefully consider what the complaint record means. In principle, few complaints could mean that licensing a particular occupation eliminates all dangerous conduct, but it can also mean that

genuine consumer harms are very rare in the occupation.¹⁰ For that reason, the licenses recommended for reform in this report are accompanied by complaint data (where available) to assist decision-makers with comprehensive information when reviewing the recommendations.

D. Strategies for Occupational Licensing Reform

State policymakers play a critical and longstanding role in occupational licensing policies, dating back to the late 19th century when the Supreme Court decision in *Dent v. West Virginia* established states' rights to regulate certain professions. Shortly thereafter, states began developing their own systems of occupational regulation and licensing.⁸ State policymakers play a central role in developing and shaping these systems by:

1. Establishing licensing requirements for specific occupations.
2. Authorizing regulatory boards to license applicants and oversee compliance.
3. Reviewing the merits of existing and proposed licensure requirements.
4. Proposing strategies or guiding principles to improve the state's overall approach to regulating professions.

According to a 2015 brief published by the Council on Licensure, Enforcement and Regulation, "civic leaders, elected officials, and courts have struggled to balance legitimate interests in protecting public health and safety with the preservation of free practice." Striking the right balance represents an opportunity for policymakers to achieve important public policy goals, including consumer protection, job creation, workforce mobility and economic growth. Removing employment barriers for unique populations, such as immigrants with work authorization, military families, and people with criminal records, offers a powerful lever to achieve multiple policy goals. These include employment growth, reduced reoffending for employed ex-offenders, enhanced geographic mobility, and economic stability and opportunity for individuals and their families.⁸

Some of the most comprehensive occupational licensing reforms were passed in Arizona, Tennessee, and Mississippi. Arizona and Tennessee each passed a *Right to Earn a Living Act*. The Act limits entry regulations into an occupation to only those that are legitimately necessary to protect public health, safety, or welfare and then those objectives could *not* be met with less burdensome means, including certification, bonding, insurance, inspections, etc. It favors policy options that preserve occupational freedom.¹³

Over the past few years, several studies, research briefs, and guidance documents have been published that provide tools, resources, and strategies for policymakers for tackling occupational licensing reform. Several states have found these resources to be helpful in implementing less restrictive regulations, evaluating the roles of regulatory boards, conducting ongoing sunset review hearings, and recognizing and prevent the passing of unnecessary licensing laws. Several of these resources are included in the Resource section of this report.

Policymaker Questions to Ask When Considering Occupational Licensing Proposals

What is the problem?	<ul style="list-style-type: none"> • Has the public been harmed because the occupation has not been regulated? • Has the public's health, safety or economic well-being been endangered? • Can proponents' claims be documented?
Why should the occupation be regulated?	<ul style="list-style-type: none"> • Who uses the services offered by the occupation? Does the public lack knowledge or information to evaluate the providers' qualifications? • What is the extent of the autonomy of the providers? Do they work independently or under supervision? If supervised, is the supervisor covered under regulatory statute?
What efforts have been made to address the problems?	<ul style="list-style-type: none"> • Has the occupation established a code of conduct or complaint-handling procedures for resolving disputes between practitioners and consumers? • Has a non-governmental certification program been established to assist the public in identifying qualified practitioners? • Could use of applicable laws or existing standards (e.g., civil laws or unfair and deceptive trade practice laws) solve problems? • Would strengthening existing laws help to deal with the problem?
Have alternatives to licensure been considered?	<ul style="list-style-type: none"> • Could an existing agency be used to regulate the occupation? • Would regulation of the employer versus the individual practitioner (e.g., licensing a restaurant instead of its employees) provide the necessary public protection? • Could registration or certification be an acceptable alternative? • Why would use of less stringent alternatives adequately protect the public? Why would licensing be more effective?
Will the public benefit from regulating the occupation?	<ul style="list-style-type: none"> • How will regulation help the public identify qualified practitioners? • How will regulation assure that practitioners are competent? • Are all standards job-related? • How do the standards, training and experience requirements compare with other states? Can differences be justified? • Are alternative routes of entry recognized—for example, for individuals licensed in another state?
Will regulation harm the public?	<ul style="list-style-type: none"> • Will competition be restricted by the regulated group? • Will the regulated group control the supply of practitioners? Are standards more restrictive than necessary? • Will regulation increase the cost of goods and services to consumers? • Will regulation decrease the availability of practitioners?
How will the regulatory activity be administered?	<ul style="list-style-type: none"> • Who will administer the regulation? • What power will the entity have, and will its actions be subject to review? • How would the cost of administering the regulatory entity be financed?
Who is sponsoring the regulatory program?	<ul style="list-style-type: none"> • Are members of the public sponsoring the legislation? • What provider associations or organizations are sponsoring the regulatory approach?
Why is regulation being sought?	<ul style="list-style-type: none"> • Is the profession seeking to enhance its status by having its own regulatory law? • Is the occupation seeking licensure to facilitate reimbursement? • Is the public seeking greater accountability of the occupation?

Source: Council on Licensure, Enforcement and Regulation, Questions Legislators Should Ask, 1994

VI. Conclusion

Most consumers acknowledge that the regulation of certain occupations is vital for the protection of public health, safety, and welfare. Where opinions begin to differ is determining which occupations should be regulated and at what level. This report is intended to provide the data and information necessary to aid in these statewide discussions and considerations and to continue the goal of commonsense occupational licensing reforms that will maintain consumer protection while removing barriers in order to provide economic opportunities for Wisconsin's workers and entrepreneurs. Moving forward, the federal directive is for states to continue to learn from one another as they adopt and refine regulatory practices that seek to remove barriers to work and improve portability across state lines.

VII. Appendices

Appendix A - Wisconsin Regulated Occupations

Occupation	Regulating Agency	Type of Regulation	No. Active Licenses
Buttermaker	DATCP	License	43
Cheesemaker	DATCP	License	1,283
Humane Officer	DATCP	Certificate	208
Pesticide Applicator Certification; commercial	DATCP	Certification	18,600
Pesticide Applicator Certification; private	DATCP	Certification	12,300
Pesticide Commercial Applicator (Individual)	DATCP	License	8,900
Veterinarian	DATCP	License	3,427
Veterinarian - Faculty License	DATCP	License	33
Veterinarian - Temporary Consulting Permit	DATCP	Permit	1
Veterinary Technician	DATCP	Certificate	2,148
Weights and Measures Service Technician	DATCP	Certification	805
Agent (Broker-Dealer Agent/Securities Agent)	DFI	Registration	146,350
Broker-Dealer	DFI	Registration	1,613
Fundraising Counsel	DFI	Registration	0
Investment Advisor	DFI	Registration	361
Investment Advisor Representative	DFI	Registration	9,915
Mortgage Banker	DFI	License	397
Mortgage Broker	DFI	License	194
Mortgage Loan Originator	DFI	Registration and License	10,392
Notary Public	DFI	Commission	81,971
Solicitor/Collector	DFI	License	6,348
Advanced Emergency Medical Technician	DHS	License	2,325
Asbestos Abatement Supervisor	DHS	Certification	1,264
Asbestos Abatement Worker	DHS	Certification	516
Asbestos Inspector	DHS	Certification	625
Asbestos Management Planner	DHS	Certification	49
Asbestos Project Designer	DHS	Certification	48
Emergency Medical Responder	DHS	Certification	3,343
Emergency Medical Technician	DHS	License	8,733
Exterior Asbestos Supervisor	DHS	Certification	89
Intermediate (EMT)	DHS	License	123
Lead Abatement Supervisor	DHS	Certification	319
Lead Abatement Worker	DHS	Certification	100
Lead Hazard Investigator	DHS	Certification	77
Lead Inspector	DHS	Certification	7
Lead Project Designer	DHS	Certification	0
Lead Risk Assessor	DHS	Certification	231
Lead Sampling Technician	DHS	Certification	15
Lead-Safe Renovator	DHS	Certification	4,434
Nurse Aide	DHS	Certification	58,790
Paramedic	DHS	License	4,949
Exterior Asbestos Worker	DHS	Certification	1,189
Heat Exchange Driller	DNR	License	32
Heat Exchange Drilling Rig Operator	DNR	Registration	37
Municipal Waterworks Operator	DNR	Certification	2,619
Pump Installer	DNR	License	1,170
Septage Service Operator	DNR	Certification	1,193
Small Water System Operator	DNR	Certification	948
Solid Waste Disposal Facility Operator	DNR	Certification	322
Solid Waste Incinerator Operator	DNR	Certification	25
Wastewater Operator	DNR	Certification	2,529
Water Well Driller	DNR	License	251
Water Well Drilling Rig Operator	DNR	Registration	138

Occupation	Regulating Agency	Type of Regulation	No. Active Licenses
Assessor	DOR	Certificate	683
Cigarette Salesperson	DOR	Permit	685
Liquor Salesperson	DOR	Permit	3,017
Tobacco Products Salesperson	DOR	Permit	760
Buyer's License	DOT	License	6,879
Certify 3rd Party CDL Examiner	DOT	Certification	215
Certify Traffic Safety School Instructor	DOT	Certification	165
Driver Training School Instructor	DOT	License	764
Representative License	DOT	License	792
Salesperson License	DOT	License	14,589
Salvage Buyer License	DOT	License	3,606
Acupuncturist	DSPS	License	556
Administrative Medicine and Surgery (DO)	DSPS	License	0
Administrative Medicine and Surgery (MD)	DSPS	License	4
Aesthetician	DSPS	License	2,126
Aesthetics Instructor (Certified)	DSPS	Certification	44
Agent for Burial Agreements	DSPS	Registration	888
Anesthesiologist Assistant	DSPS	License	101
Appraiser, Certified General	DSPS	License and Certification	758
Appraiser, Certified Residential	DSPS	License and Certification	841
Appraiser, Licensed	DSPS	License	253
Architect	DSPS	Registration	4,846
Art Therapist	DSPS	Registration	64
Athlete Agent	DSPS	Registration	66
Athletic Trainer	DSPS	License	1,290
Auctioneer	DSPS	Registration	637
Audiology	DSPS	License	405
Automatic Fire Sprinkler Contractor	DSPS	License	106
Automatic Fire Sprinkler Contractor - Maintenance	DSPS	Registration	27
Automatic Fire Sprinkler Fitter - Maintenance	DSPS	Registration	191
Automatic Fire Sprinkler Fitter, Journeyman	DSPS	License	665
Automatic Fire Sprinkler System Apprentice	DSPS	Registration	138
Automatic Fire Sprinkler System Tester	DSPS	Registration	100
Automatic Fire Sprinkler Tester Learner	DSPS	Registration	12
Barber	DSPS	License	255
Barber Apprentice	DSPS	Permit	39
Barbering Instructor (Certified)	DSPS	Certification	3
Barbering Manager	DSPS	License	505
Behavior Analyst	DSPS	License	195
Blaster Class 1	DSPS	License	37
Blaster Class 2	DSPS	License	96
Blaster Class 3	DSPS	License	17
Blaster Class 4	DSPS	License	5
Blaster Class 5	DSPS	License	151
Blaster Class 6	DSPS	License	71
Blaster Class 7	DSPS	License	13
Body Piercer	DSPS	License	242
Boiler-Pressure Vessel In-Service Field Inspector	DSPS	Certification	0
Boiler-Pressure Vessel Inspector	DSPS	Certification	135
Boxing Contestant	DSPS	License	34
Boxing Judge	DSPS	License	5
Boxing Referee	DSPS	License	1
Cemetery Authority	DSPS	Registration	40
Cemetery Authority - Licensed	DSPS	License	116
Cemetery Authority-Religious	DSPS	Certification	406
Cemetery Preneed Seller	DSPS	License	156
Cemetery Salesperson	DSPS	License	141
Certified Public Accountant	DSPS	License	11,974
Chiropractic Radiological Technician	DSPS	Certification	312
Chiropractic Technician	DSPS	Certification	1,208
Chiropractor	DSPS	License	2,400

Occupation	Regulating Agency	Type of Regulation	No. Active Licenses
Clinical Substance Abuse Counselor	DSPS	Certification	1,628
Clinical Supervisor-in-Training	DSPS	Certification	186
Commercial Building Inspector	DSPS	Certification	632
Commercial Electrical Inspector	DSPS	Certification	765
Commercial Plumbing Inspector	DSPS	Certification	397
Cosmetologist	DSPS	License	29,472
Cosmetology Apprentice	DSPS	Permit	257
Cosmetology Instructor (Certified)	DSPS	Certification	751
Cosmetology Temporary Permit	DSPS	Permit	372
Cosmetology Training Permit	DSPS	Permit	0
Counselor, Professional	DSPS	License	4,038
Counselor, Training License Professional	DSPS	License	1,867
Cross Connection Control Tester	DSPS	Registration	1,939
Dance Therapist	DSPS	Registration	7
Dental Hygienist	DSPS	License	5,306
Dentist	DSPS	License	4,324
Designer of Engineering Systems	DSPS	Permit	749
Dietitian, Certified	DSPS	Certification	1,933
Dwelling Contractor	DSPS	Certification	10,447
Dwelling Contractor Qualifier	DSPS	Certification	10,967
Dwelling Contractor Restricted	DSPS	Certification	8
Electrical - Residential Apprentice	DSPS	Registration	7
Electrical Contractor	DSPS	License	3,046
Electrician, Apprentice	DSPS	Registration	1,715
Electrician, Industrial Apprentice	DSPS	Registration	19
Electrician, Industrial Journeyman	DSPS	License	726
Electrician, Journeyman	DSPS	License	5,974
Electrician, Master	DSPS	License	5,743
Electrician, Master Registered	DSPS	Registration	665
Electrician, Registered (Beginning)	DSPS	Registration	2,287
Electrician, Residential Journeyman	DSPS	License	130
Electrician, Residential Master	DSPS	License	215
Electrologist	DSPS	License	164
Electrology Instructor (Certified)	DSPS	Certification	4
Elevator Apprentice	DSPS	Registration	195
Elevator Apprentice - Restricted	DSPS	Registration	1
Elevator Contractor	DSPS	License	57
Elevator Helper	DSPS	Registration	146
Elevator Inspector	DSPS	License	61
Elevator Mechanic	DSPS	License	620
Elevator Mechanic - Restricted	DSPS	License	10
Elevator Mechanic Temporary	DSPS	License	8
Engineer in Training	DSPS	Certification	1,893
Engineer, Professional	DSPS	Registration	16,162
Fire Detection, Prevention, and Suppression Inspector	DSPS	Certification	325
Firearms Certifier	DSPS	Certification	90
Fireworks Manufacturer	DSPS	License	15
Funeral Director	DSPS	License	1,195
Funeral Director Apprentice	DSPS	Permit	127
Funeral Director Embalming Only	DSPS	License	0
Funeral Director in Good Standing	DSPS	Certification	0
Geologist, Professional	DSPS	License	758
Hearing Instrument Specialist	DSPS	License	281
Home Inspector	DSPS	Registration	896
Home Medical Oxygen Provider	DSPS	License	174
HVAC Contractor	DSPS	Registration	3,322
HVAC Qualifier	DSPS	Certification	507
Hydrologist, Professional	DSPS	License	104
Independent Clinical Supervisor	DSPS	Certification	273
Interior Designer	DSPS	Registration	248
Intermediate Clinical Supervisor	DSPS	Certification	212

Occupation	Regulating Agency	Type of Regulation	No. Active Licenses
Juvenile Martial Arts Instructor	DSPS	Permit	67
Kickboxing Amateur Contestant	DSPS	License	1
Kickboxing Judge	DSPS	License	4
Kickboxing Referee	DSPS	License	2
Land Surveyor, Professional	DSPS	License	1,005
Landscape Architect	DSPS	License	406
Licensed Radiographer	DSPS	License	6,361
Lift Apprentice	DSPS	Registration	0
Lift Helper	DSPS	Registration	29
Lift Mechanic	DSPS	License	17
Limited X-Ray Machine Operator	DSPS	Permit	52
Liquified Gas Supplier	DSPS	License	155
Liquified Gas Supplier - Restricted	DSPS	License	73
Manicuring Instructor (Certified)	DSPS	Certification	40
Manicurist	DSPS	License	3,310
Manufactured Home Installer	DSPS	License	169
Manufactured Homes Dealer	DSPS	License	174
Manufactured Homes Sales Person	DSPS	License	356
Marriage and Family Therapist	DSPS	License	717
Marriage and Family Therapist, Training License	DSPS	License	275
Massage Therapist or Bodywork Therapist	DSPS	License	5,136
Matchmaker (Unarmed Combat Sports)	DSPS	License	6
Medicine and Surgery (DO)	DSPS	License	2,154
Medicine and Surgery (MD)	DSPS	License	23,775
Mixed Martial Arts Amateur Contestant	DSPS	License	144
Mixed Martial Arts Judge	DSPS	License	8
Mixed Martial Arts Professional Contestant	DSPS	License	44
Mixed Martial Arts Referee	DSPS	License	3
Mobile Dentistry Program Registrant	DSPS	Registration	36
Muay Thai Amateur Contestant	DSPS	License	2
Muay Thai Judge	DSPS	License	2
Muay Thai Referee	DSPS	License	1
Music Therapist	DSPS	Registration	59
Nurse - Midwife	DSPS	License	393
Nurse, Advanced Practice Prescriber	DSPS	Certification	6,566
Nurse, Licensed Practical	DSPS	License	13,451
Nurse, Registered	DSPS	License	104,423
Nursing Home Administrator	DSPS	License	978
Occupational Therapist	DSPS	License	3,796
Occupational Therapy Assistant	DSPS	License	1,486
Optometrist	DSPS	License	1,085
Peddler	DSPS	License	45
Perfusionist	DSPS	License	149
Pharmacist	DSPS	License	8,924
Physical Therapist	DSPS	License	6,126
Physical Therapist Assistant	DSPS	License	2,232
Physician Assistant	DSPS	License	3,080
Pipe Layer	DSPS	Registration	865
Plumber - Journeyman Restricted Appliance	DSPS	License	300
Plumber - Journeyman Restricted Service	DSPS	License	241
Plumber - Master Restricted Appliance	DSPS	License	199
Plumber - Master Restricted Service	DSPS	License	525
Plumber, Journeyman	DSPS	License	2,694
Plumber, Master	DSPS	License	2,976
Plumbing Apprentice	DSPS	Registration	957
Plumbing Learner - Restricted Appliance	DSPS	Registration	140
Plumbing Learner - Restricted Service	DSPS	Registration	154
Podiatric Medicine and Surgery	DSPS	License	405
POWTS Inspector	DSPS	Certification	429
POWTS Maintainer	DSPS	Registration	591
Prevention Specialist	DSPS	Certification	36

Occupation	Regulating Agency	Type of Regulation	No. Active Licenses
Prevention Specialist-in-Training	DSPS	Certification	54
Private Detective	DSPS	License	1,044
Private Practice of School Psychologist	DSPS	License	31
Private Security Person	DSPS	Permit	10,846
Professional Boxing Promoter	DSPS	License	1
Professional Mixed Martial Arts Promoter	DSPS	License	1
Psychologist	DSPS	License	1,797
Real Estate Broker	DSPS	License	9,620
Real Estate Salesperson	DSPS	License	13,822
Registered Sanitarian	DSPS	Registration	273
Resident Educational License	DSPS	License	1,011
Respiratory Care Practitioner	DSPS	Certification	3,131
Ringside Physician	DSPS	License	6
Second (Unarmed Combat Sports)	DSPS	License	152
Sign Language Interpreter	DSPS	License	355
Sign Language Interpreter- Restricted	DSPS	License	45
Social Worker	DSPS	Certification	5,546
Social Worker Training Certificate	DSPS	Certification	310
Social Worker, Advanced Practice	DSPS	Certification	3,340
Social Worker, Independent	DSPS	Certification	261
Social Worker, Licensed Clinical	DSPS	License	3,625
Soil Erosion Inspector	DSPS	Certification	204
Soil Scientist, Professional	DSPS	License	96
Soil Tester	DSPS	Certification	769
Speech-Language Pathology	DSPS	License	2,217
Substance Abuse Counselor	DSPS	Certification	654
Substance Abuse Counselor-in-Training	DSPS	Certification	1,178
Tattooist	DSPS	License	1,236
Timekeeper (Unarmed Combat Sports)	DSPS	License	2
Timeshare Salesperson	DSPS	Registration	314
UDC - Construction Inspector	DSPS	Certification	901
UDC - Electrical Inspector	DSPS	Certification	658
UDC - HVAC Inspector	DSPS	Certification	802
UDC - Plumbing Inspector	DSPS	Certification	802
Unarmed Combat Sports Promoter	DSPS	License	9
Utility Contractor	DSPS	License	311
Weld Test Conductor	DSPS	Certification	143
Welder	DSPS	Registration	4,449
Certified Private Rehabilitation Specialist	DWD	Certificate	92
License to Appear at a Worker's Compensation Hearing Agent/Representative	DWD	License	18
Private Employment Agent License	DWD	License	12
Private Employment Agent Registration	DWD	Registration	237
Lobbyist	Ethics	License	632
Insurance producer, Intermediary (Agent)	OCI	License	153,277
Total:	280		1,023,142

Appendix B - State Comparison List of Regulated Occupations

The following is a list of occupations that are regulated in Wisconsin and in less than or equal to 20 other states. It is possible that additional regulated occupations could fall under this category. However, either the data was unavailable for some occupations or may have been inconclusive (i.e. data not available for all states). Therefore, this list only includes occupations where data was available. Research revealed that some local municipalities or counties, rather than the state, administered and required certain occupational licenses. In other states, the state regulatory agency accepts a credential issued by a professional or trade organizations but does not issue or require a separate state license. Therefore, for comparison purposes, states were only counted if the similar license type is administered and *required* by the state regulatory agency.

Title of License	Agency	Number of Other States that Regulate Similar License Type
Buttermaker	DATCP	0
Certified Private Rehabilitation Specialist	DWD	0
Cheesemaker	DATCP	0
Designer of Engineering Systems	DSPS	0
Funeral Director in Good Standing	DSPS	0
Humane Officer	DATCP	0
Hydrologist, Professional	DSPS	0
License to Appear at a Worker's Compensation Hearing Agent/Representative	DWD	0
Marriage and Family Therapist, Training License	DSPS	0
Nurse, Advanced Practice Prescriber	DSPS	0
Plumber - Master Restricted Service	DSPS	0
Prevention Specialist-in-Training	DSPS	0
Private Practice School Psychologist	DSPS	0
Substance Abuse Counselor-in-Training	DSPS	0
Dance Therapist	DSPS	1
Juvenile Martial Arts Instructor	DSPS	1
Plumber - Master Restricted Appliance	DSPS	1
Private Employment Agent Registration	DWD	1
Sign Language Interpreter- Restricted	DSPS	1
Veterinarian - Temporary Consulting Permit	DATCP	1
Electrician, Master Registered	DSPS	2
Elevator Helper	DSPS	2
Lift Helper	DSPS	2
Plumber - Journeyman Restricted Service	DSPS	2
Weld Test Conductor	DSPS	2
Automatic Fire Sprinkler Tester Learner	DSPS	3
Electrician, Industrial Journeyman	DSPS	3
Electrician, Registered (Beginning)	DSPS	3
Plumber - Journeyman Restricted Appliance	DSPS	3
Plumbing Learner - Restricted Service	DSPS	3
Social Worker Training Certificate	DSPS	3
Interior Designer	DSPS	4
Plumbing Learner - Restricted Appliance	DSPS	4
Soil Erosion Inspector	DSPS	4
Veterinarian - Faculty License	DATCP	4
Electrical - Residential Apprentice	DSPS	5
Electrician, Industrial Apprentice	DSPS	5
Elevator Mechanic - Restricted	DSPS	5
Lift Apprentice	DSPS	5
Peddler	DSPS	5
Soil Tester	DSPS	5
Automatic Fire Sprinkler Contractor - Maintenance	DSPS	6
Elevator Apprentice - Restricted	DSPS	6
Intermediate (EMT)	DHS	6

Title of License	Agency	Number of Other States that Regulate Similar License Type
Liquified Gas Supplier - Restricted	DSPS	6
Chiropractic Radiological Technician	DSPS	7
Elevator Mechanic Temporary	DSPS	7
Music Therapist	DSPS	7
Automatic Fire Sprinkler Fitter - Maintenance	DSPS	8
Cemetery Preneed Seller	DSPS	8
Cemetery Salesperson	DSPS	8
Electrician, Residential Master	DSPS	8
Funeral Director Apprentice	DSPS	8
Lift Mechanic	DSPS	8
Soil Scientist, Professional	DSPS	8
Welder	DSPS	8
Art Therapist	DSPS	11
Athlete Agent	DSPS	11
Automatic Fire Sprinkler System Tester	DSPS	11
Cosmetology Training Permit	DSPS	11
Dwelling Contractor Restricted	DSPS	11
Firearms Certifier	DSPS	11
Automatic Fire Sprinkler System Apprentice	DSPS	12
Electrician, Residential Journeyman	DSPS	12
Anesthesiologist Assistant	DSPS	13
Blaster Class 7	DSPS	13
Commercial Plumbing Inspector	DSPS	13
Elevator Apprentice	DSPS	13
Mobile Dentistry Program Registrant	DSPS	13
Commercial Electrical Inspector	DSPS	14
Representative License	DOT	14
Salvage Buyer License	DOT	14
UDC - Electrical Inspector	DSPS	14
Blaster Class 5	DSPS	15
Blaster Class 6	DSPS	15
Cigarette salesperson	DOR	15
Pipe Layer (Non-contractor)	DSPS	15
Tattooist	DSPS	15
Tobacco products salesperson	DOR	15
Blaster Class 2	DSPS	16
Blaster Class 3	DSPS	16
Blaster Class 4	DSPS	16
Dwelling Contractor Qualifier	DSPS	16
Perfusionist	DSPS	16
POWTS Inspector	DSPS	16
UDC - Construction Inspector	DSPS	16
UDC - Plumbing Inspector	DSPS	16
Utility Contractor	DSPS	16
Cross Connection Control Tester	DSPS	17
Auctioneer	DSPS	18
Commercial Building Inspector	DSPS	18
Cosmetology Temporary Permit	DSPS	18
Muay Thai Amateur Contestant	DSPS	18
Muay Thai Professional Contestant	DSPS	18
POWTS Maintainer	DSPS	18
UDC - HVAC Inspector	DSPS	18
Automatic Fire Sprinkler Fitter - Journeyman	DSPS	19
HVAC Qualifier	DSPS	19
Manufactured Homes Sales Person	DSPS	19
Fundraising Counsel	DFI	20
Social Worker, Independent	DSPS	20

Appendix C - List of Occupations Recommended for Reform

The following occupations are recommended for elimination by the regulatory agency:

Occupation and Type of Regulation	No. Issued	Agency	Recommendation and Reason
Veterinarian Faculty License	33	DATCP	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The university could be responsible for verifying credentials, qualifications, and performance of veterinary faculty under their employ. • There have been 0 complaints over the past 5 years. • Only 4 states issue this type of license and typically grant the license on a temporary basis, such as one year.
Veterinarian – Temporary Consulting Permit	0	DATCP	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Very few licenses of this type are issued, making this credential unnecessary. • The requesting Wisconsin-licensed veterinarian who request the assistance could be responsible for verifying credentials, qualifications and performance of a consulting veterinarian licensed in another state. • There have been 0 complaints over the past 5 years. • Only 1 other state, California, issues a license for this occupation.
Community Currency Exchanger License	167	DFI	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • There are alternative avenues in place for cash transmission such as electronic transactions rather than check cashing. • There have been 9 complaints received over the past 5 years with 0 resulting in disciplinary action. • 30 other states have similar titles for this license type.
Insurance Premium Finance Companies License	32	DFI	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The marketplace product and services has moved away from consumers and is instead a product/service used primarily in business/commercial setting. It would not harm consumers to eliminate this regulation. • Since 2004, there’s been 1 instance of consumers being overcharged (<\$75). Money was refunded to harmed consumers. • Only 7 other states regulate this license type.
Solid Waste Incinerator Operator Certification	25	DNR	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Wisconsin is currently providing a service to Wisconsin incinerator operators by proctoring an exam and providing certification, NR 499.09, Wis. Adm. Code, and s. 285.51, Stats., to meet state and federal requirements. • Regulated sources could travel out of state or create their own in-house program; however, consideration should be given to the additional financial cost. • There have been 0 complaints over the past 5 years. • It is unknown how many other states require certification for this occupation.

Occupation and Type of Regulation	No. Issued	Agency	Recommendation and Reason
<p>Cigarette Salesperson</p> <p>Permit</p>	685	DOR	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • This regulation is a duplication of effort and could be eliminated because manufacturers and distributors are required to get their own permits and may already be doing background checks on their employees for public protection. • There have been 0 complaints received over the past 5 years. • 15 other states regulate this license type.
<p>Liquor Salesperson</p> <p>Permit</p>	3,017	DOR	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • This regulation is a duplication of effort and could be eliminated because manufacturers and distributors are required to get their own permits and may already be doing background checks on their employees for public protection. • There have been 0 complaints received over the past 5 years. • 20 other states regulate this license type. <p>Note: While not issued by the state, there are statutory requirements regarding responsible beverage servers (bartender licenses). These are issued by local governments with some criteria set out in state statutes.</p>
<p>Tobacco Products Salesperson</p> <p>Permit</p>	760	DOR	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • This regulation is a duplication of effort and could be eliminated because manufacturers and distributors are required to get their own permits and may already be doing background checks on their employees for public protection. • There have been 0 complaints received over the past 5 years. • 15 other states regulate this license type. (Data combined with cigarette salesperson.)
<p>Buyer Identification Card</p> <p>License</p>	N/A	DOT	<p>Agency Recommendation: Consider Elimination</p> <ul style="list-style-type: none"> • Elimination of this license may warrant discussion regarding its applicability in today's industry. • When this license was created the industry conducted almost all auctions in person. Since then the salvage pool industry has migrated to an online platform and almost all purchases are made online. Because of this enforcement is almost impossible as it would require a regulator to observe the buyer in the act of bidding which often takes place in businesses or residences. However, the rescission of this license would result in an annual revenue loss of \$21,636 to DOT (ea. Cost \$6-\$12/year). • The public does not directly benefit from the regulation of this licensee. • This regulation was found in 10 other states.
<p>Certified Private Rehabilitation Specialist</p> <p>Certificate</p>	92	DWD	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Injured employees with worker's compensation claims who are seeking vocational rehabilitation services may receive these services sooner through a private resource than through the State. • There have been 0 complaints received over the past 5 years. • This license type is not regulated by any other state.

Occupation and Type of Regulation	No. Issued	Agency	Recommendation and Reason
License to Appear at Worker's Compensation Hearing Agent/ Representative	18	DWD	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The public is protected because only attorneys licensed in Wisconsin and individuals approved by DWD through this licensing process can represent individuals in a Worker's Compensation Hearing. • There have been 0 complaints received over the past 5 years. • This license type is not regulated by any other state.
Private Employment Agent License	12	DWD	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The license requirement applies to agents who charge a fee to applicants seeking work. Most licensed agencies are modeling agencies. • There is no evidence of public harm. • A prohibition on certain practices would be a more economic and effective way of regulating as other industries are not regulated in this manner. • This regulation is archaic and no longer serves a purpose. • There have been 0 complaints received over the past 5 years. • 23 other states regulate this license and require either a license or permit or both. Some states have repealed this license over the past 5 years.
Private Employment Agent Registration	237	DWD	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Same reasons as licensed agent. • This regulation is archaic and no longer serves a purpose. • There have been 0 complaints received over the past 5 years. • Only 1 other state regulates this occupation.
Cosmetology Temporary Permit	372	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Only 19 other states require or offer a temporary permit for cosmetologists. • DL Roope (a cosmetology examination provider) administers these permits with the approval of DSPS. The applicants inform DL Roope on their examination application that they are interested in receiving a temporary permit. DL Roope sends DSPS the list of individuals who are interested in receiving a temporary permit, and DSPS staff cross checks these individuals with a list of individuals who have been given training certificates by the cosmetology schools. • By eliminating DSPS' administration over this permit, the public can be protected through allowing the organization who already manages this program to administer the permits. • Since DL Roope oversees the application process for this permit, the Department is currently not adding any kind of public protection over this credential besides serving in a "middle-man" role between the cosmetology schools and this examination provider. • There is no disciplinary data available on this license type as DSPS does not administer the permit.
Cosmetology Training Permit	0	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Only 12 other states require a training permit for cosmetologists. All states except Wisconsin require this permit within the boundaries of an internship, apprenticeship, or educational setting for students. • DSPS has not administered or offered these permits since at least 2015.

Occupation and Type of Regulation	No. Issued	Agency	Recommendation and Reason
<p align="center">Designer of Engineering Systems</p> <p align="center">Permit</p>	749	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The job duties of these individuals could be picked up through other credentials such as professional engineers, architects, HVAC contractors, Plumbers, Electricians, POWTS Maintainer and Fire Detection, Prevention and Suppression Inspectors. • The license requirements for this permit are very steep. • According to Wis. Stats. 442.07(5) The permit shall restrict the holder to the specific field and subfields of designing in which the permittee acquired his or her experience in designing. If qualified in more than one type of designing, persons may receive permits for more than one field or subfield of designing as may be determined by the designer section. • There have been 0 complaints resulting in disciplinary action within the last 5 years. • There are no other states besides that license this occupation.
<p align="center">Music Therapist</p> <p align="center">Registration</p>	59	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • According to Wis. Admin Code SPS 141.01(4), an applicant can receive a license as a music therapist if the applicant submits proof that they are certified or registered as a music therapist by the Certification Board for Music Therapists, National Music Therapy Registry, American Music Therapy Association, or by another national organization that certifies, registers, or accredits music therapists. Because this is the only noted requirement for licensure outside of conviction review, it would be appropriate to say that the public would be aptly protected by the certification of these individuals exclusively through registration with these outside organizations. • There have been 0 complaints resulting in disciplinary action within the last 5 years.
<p align="center">Art Therapist</p> <p align="center">Registration</p>	64	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • According to Wis. Admin Code SPS 141.01(4), an applicant can receive a license as an art therapist if the applicant submits proof that they are certified or registered as an art therapist by the by the Art Therapy Credentials Board or by another national organization that certifies, registers, or accredits art therapists. Because this is the only noted requirement for licensure outside of conviction review, it would be appropriate to say that the public would be aptly protected by the certification of these individuals exclusively through registration with these outside organizations. • There have been 0 complaints resulting in disciplinary action within the last 5 years. • 11 other states regulate art therapists.

Occupation and Type of Regulation	No. Issued	Agency	Recommendation and Reason
Dance Therapist Registration	7	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • According to Wis. Admin Code SPS 141.01(4), an applicant can receive a license as a dance therapist if the applicant submits proof that they are certified or registered as a dance therapist by the American Dance Therapy Association or by another national organization that certifies, registers, or accredits dance therapists. Because this is the only noted requirement for licensure outside of conviction review, it would be appropriate to say that the public would be aptly protected by the certification of these individuals exclusively through registration with these outside organizations. • There have been 0 complaints resulting in disciplinary action within the last 5 years. • Only 1 other state regulates dance therapists.
Blaster Class 1 License	42	DSPS	<p>Agency Recommendation: Retain blaster license but eliminate separate classifications.</p> <ul style="list-style-type: none"> • Wisconsin State statute does not require seven different classes of licensure for blasters. Therefore, there is no statutory authority for seven distinct licenses (Wis. stats.101.19 (1g) (c). • The multiple levels of classification of this license is inconsistent with other states as no other states license seven levels of this credential. • DSPS does not distinguish between classes of blasters when processing complaints and disciplinary data.
Blaster Class 2 License	100	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Blaster Class 3 License	18	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Blaster Class 4 License	6	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Blaster Class 5 License	162	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Blaster Class 6 License	81	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Blaster Class 7 License	13	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • See Baster Class 1
Intermediate Clinical Supervisor License	273	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • The requirements for intermediate clinical supervisor and independent clinical supervisor are the same (SPS 161.05), therefore, issuing two credentials with the same requirements is unnecessary. • The Substance Abuse Counselor Certification Review Committee recommended eliminating the intermediate clinical supervisor at their meeting on March 22, 2017.
Interior Designer Registration	248	DSPS	<p>Agency Recommendation: Eliminate</p> <ul style="list-style-type: none"> • Only 4 other states regulate this license type. • The regulation of interior designers has been identified by several studies as the most burdensome licensing requirement of all occupations.

Appendix D – State Agency Occupational Licensure Survey

Thank you for participating in the Wisconsin Occupational License Study survey. Your feedback is important.

[2017 Wisconsin Act 59](#), section 9139, requires the Department of Safety and Professional Services (DSPS) to submit a report to the Governor and the Legislature that includes recommendations for reform relating to Wisconsin's occupational licenses. To meet this requirement, DSPS is conducting a study to determine which occupational licenses are truly needed to protect the public, and explore if less restrictive alternatives may be appropriate.

The purpose of this survey is to collect data and input from each state agency. Your response to the survey questions will ensure accurate identification of each license the state requires, as well as the burdens associated with each license. The data and input collected will be used to provide recommendations for reform and improvement of Wisconsin's occupational licensing requirements.

Your participation by thoroughly answering the survey questions is vital to the success of this study and necessary to fulfill the request of the Governor and Legislature.

The following section will assist you in answering the questions appropriately.

Instructions to Survey Respondents:

1. **Survey Method:** To begin the survey, click on the following link: [Wisconsin Occupational License Study](#). The survey is designed to allow your agency to submit multiple entries if more than one Division or Bureau regulates an occupational license.
2. **Deadline to Submit:** The deadline to complete the survey is **Friday, March 30, 2018**. Agencies must complete the survey by this date.
3. **Assistance:** Questions for assistance with the survey may be sent to DSPSLicensureFeedback@Wisconsin.gov. Please consult with your agency's Chief Legal Counsel to determine if your agency regulates an occupation included in the licensing definition.
4. **Survey Questions:** This linked document contains all of the questions that are included in this survey. Since additional research and outreach to other states may be necessary to appropriately respond to certain questions, you may wish to use this document as a guide to gather the information and data prior to beginning the survey. The survey may automatically skip certain questions based on your response to the previous question. Therefore, some of the questions listed in the document may not be visible or applicable to your specific agency.

*** 1. Please provide your name and title, agency name, and contact information for the person completing this survey.**

Name & Title of Person Completing Survey	<input type="text"/>
Agency Name	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

*** 2. Does your agency issue or regulate any occupational licenses?** *(Note: If you are unsure whether your agency meets the definition listed below, please consult with your agency's Chief Legal Counsel.)*

"Occupational license" means any of the following:

- a. A license, permit, certification, registration, or other approval granted under §167.10 (6m) or chapters 101, 145, or 440 to 480 of the statutes.
- b. A license, permit, certification, registration, or other approval not included above if granted to an individual by this state in order that the individual may engage in a profession, occupation, or trade in this state or in order that the person may use one or more titles in association with his or her profession, occupation, or trade.

Yes

No

*** 3. Please provide the best point of contact for each occupation your agency regulates.** *(Note: These individuals may be different than the person(s) completing the survey.)*

Please include a contact name, email, and phone number. For example:

1. [Occupation]: Contact name, email address, phone number
2. [Occupation]: Contact name, email address, phone number

*** 4. List each occupation that your agency regulates, the type of license, and the number of active licensees for each type.**

Please number and list each occupation on a separate line. For example:

1. Physician: License; 8,500
2. Wastewater Operator: Certificate; 2,300
3. Interior Designer: Registration; 1,200
4. Funeral Establishment Operator: Permit; 450

*** 5. List each licensed occupation and the related barriers or substantial hardships that individuals may face to achieve licensure.**

Please number and list each occupation on a separate line. For example:

1. Physician: [Explanation of barriers]
2. Wastewater Operator: [Explanation of barriers]
3. Interior Designer: [Explanation of barriers]
4. Funeral Establishment Operator: [Explanation of barriers]

*** 6. Specify each licensed occupation and the related estimated costs imposed on individuals or entities as a result of regulation.** *(Note: Please itemize the estimated costs for each category, which includes, but is not limited to, the following: initial licensing fee, tuition, examination fees, registration/credential fees, cost of continuing education required for relicensure, other costs individuals or entities may incur in order to obtain the required license, permit, certification, registration, or other approval granted by this state in order to engage in a profession, trade, or occupation.)*

Please number and list each occupation and related costs on a separate line. For example:

1. [Occupation]: \$ [Total estimated cost]

- a. Licensing fee: \$
- b. Initial Tuition/Education/Training: \$
- c. Continuing Education: \$
- d. Examination fees: \$
- e. [Other costs - please itemize]: \$

2. [Occupation]: \$ [Total estimated cost]

- a. Licensing fee: \$
- b. Initial Tuition/Education/Training: \$
- c. Continuing Education: \$
- d. Examination fees: \$
- e. [Other costs - please itemize]: \$

3. [Entity]: \$ [Total estimated cost]

- a. Application fee: \$
- b. Permit Fee: \$
- c. [Other costs - please itemize]: \$

4. [Entity]: \$ [Total estimated cost]

- a. Application fee: \$
- b. Permit Fee: \$
- c. [Other costs - please itemize]: \$

7. Is your agency aware of any instances where occupational licensing regulations have impacted the cost or availability of consumer goods or services? [i.e. increased costs for goods or services, decreased availability of practitioners]

Yes

No

8. Please provide specific examples where state licensing regulations have impacted the cost or availability of consumer goods or services.

*** 9. Can the public reasonably expect to benefit due to the regulation of any of these occupations?**

Yes

No

Other: [Please specify]

*** 10. For each occupation, provide an explanation and supporting evidence to show how the public can reasonably expect to benefit due to the regulation of the occupation. Include research findings or other evidence to show how the benefit is measured.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]: [Measurable benefit, supporting evidence]
2. [Occupation]: [Measurable benefit, supporting evidence]
3. [Occupation]: [Measurable benefit, supporting evidence]
4. [Occupation]: [Measurable benefit, supporting evidence]

*** 11. Specify the occupation and explain why the public may not reasonably expect to benefit due to the regulation of that occupation.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]: [Explanation]
2. [Occupation]: [Explanation]
3. [Occupation]: [Explanation]
4. [Occupation]: [Explanation]

* 12. **Would the unregulated practice of any of the currently licensed occupations cause harm or endanger the public health, safety, or welfare?** *(Note: The potential for harm must be recognizable and not speculative and the consequences of incompetence are substantial and irreversible.)*

- Yes
- No
- Don't know

* 13. **For each occupation, list the specific public harm or danger that could occur due to unregulated providers.** *(Note: The potential for harm must be recognizable and not speculative and the consequences of incompetence are substantial and irreversible.)*

Please number and list each occupation on a separate line. For example:

- 1. [Occupation]: [Explanation]
- 2. [Occupation]: [Explanation]
- 3. [Occupation]: [Explanation]
- 4. [Occupation]: [Explanation]

* 14. **For any of the licensed occupations, could the general public be reasonably protected from potential harm or danger through less restrictive means (other than licensing)?**

- Yes
- No

*** 15. For each occupational group, provide examples of alternative means (other than regulation or licensing) that could protect the general public from potential harm or danger.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]: [Alternatives]

2. [Occupation]: [Alternatives]

3. [Occupation]: [Alternatives]

*** 16. List the occupations that would not subject the general public to harm or danger should that occupation become unregulated.**

Please number and list each occupation on a separate line.

*** 17. Has your agency received any licensing complaints in the previous five years (2013-2017) for any of the occupations that you regulate?**

Yes

No

*** 18. For each occupation, list the number of complaints that have been received in each of the previous five years (2013-2017). In addition, indicate how many of those complaints resulted in opening an investigation, and how many resulted in disciplinary action.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

2013: 15 received, 14 investigated, 10 disciplinary action;
2014: 20 received, 18 investigated, 15 disciplinary action;
2015: 25 received, 20 investigated, 12 disciplinary action;
2016: 30 received, 25 investigated, 20 disciplinary action;
2017: 35 received, 30 investigated, 25 disciplinary action.

2. [Occupation]:

2013: 15 received, 14 investigated, 10 disciplinary action;
2014: 20 received, 18 investigated, 15 disciplinary action;
2015: 25 received, 20 investigated, 12 disciplinary action;
2016: 30 received, 25 investigated, 20 disciplinary action;
2017: 35 received, 30 investigated, 25 disciplinary action.

*** 19. For each occupation, list the top three types of complaints your agency received over the previous five years (2013-2017).**

For each occupation and year, please number and list the top complaints on a separate line. a=top complaint; b=2nd top complaint, c=3rd top complaint. For example:

1. [Occupation]:

- a. Practicing without a license
- b. Operating beyond the Scope of Practice
- c. Failure to disclose discipline from another state

2. [Occupation]:

- a. Breach of contract
- b. Failure to comply with educational requirements
- c. Practicing without required supervision

*** 20. Has there been evidence of specific public harm that occurred prior to any of these occupations being regulated in Wisconsin?**

- Yes
- No
- Don't know

*** 21. For each occupation, provide specific examples and documented evidence of the public harm that was caused due to this occupation being unregulated.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]: [type of Harm],
[Specific evidence - documented court case, etc.]

2. [Occupation]: [type of Harm],
[Specific evidence - documented court case, etc.]

3. [Occupation]: [type of Harm],
[Specific evidence - documented court case, etc.]

4. [Occupation]: [type of Harm],
[Specific evidence - documented court case, etc.]

*** 22. Do other states license or regulate any of these occupations or professional scopes of practice?**

Yes

No

* 23. **For each occupation, list the state(s) and how they regulate that occupation.** [i.e. credential, certification, license, permit, registration, etc.]

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

Illinois: certification

California: license

Minnesota: permit

Michigan: registration

2. [Occupation]:

Arkansas: permit

Idaho: license

Maine: certification

New Mexico: registration

New York: credential

* 24. **For each occupation, specify the requirement for each type of regulation and renewal.** [e.g. years of initial didactic or practical education, continuing education hours, exam, refreshers, apprenticeship, internship, field experience, etc.]

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

Illinois: [Requirement]

California: [Requirement]

Minnesota: [Requirement]

Michigan: [Requirement]

2. [Occupation]:

Arkansas: [Requirement]

Idaho: [Requirement]

Maine: [Requirement]

New Mexico: [Requirement]

New York: [Requirement]

25. **For each state that provides a different type of regulation than Wisconsin, provide evidence of any specific public harm that occurred due to that state's type of regulation for that occupation.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

[State]: [Type of regulation]; [Harm caused and supporting evidence]

[State]: [Type of regulation]; [Harm caused and supporting evidence]

[State]: [Type of regulation]; [Harm caused and supporting evidence]

2. [Occupation]:

[State]: [Type of regulation]; [Harm caused and supporting evidence]

[State]: [Type of regulation]; [Harm caused and supporting evidence]

[State]: [Type of regulation]; [Harm caused and supporting evidence]

26. For each occupation, provide evidence of any specific public harm that occurred prior to this occupation being regulated in that state.

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

[State]: [information/evidence of harm];

[State]: [information/evidence of harm];

[State]: [information/evidence of harm].

2. [Occupation]:

[State]: [information/evidence of harm];

[State]: [information/evidence of harm];

[State]: [information/evidence of harm].

*** 27. For each state that does not regulate these occupations, has any specific public harm occurred due to the occupation being unregulated?**

Yes

No

Don't know

*** 28. For each unregulated occupation, provide evidence of the specific public harm that occurred in that state [e.g. news articles or releases, etc.]**

Please number and list each occupation on a separate line. For example:

1. [Occupation]:

[State]: [information/evidence of harm];

[State]: [information/evidence of harm];

[State]: [information/evidence of harm].

2. [Occupation]:

[State]: [information/evidence of harm];

[State]: [information/evidence of harm];

[State]: [information/evidence of harm].

*** 29. Provide a summarizing statement from your agency or board why the license for each occupation that your agency regulates is warranted or should be eliminated.**

Please number and list each occupation on a separate line. For example:

1. [Occupation]: [Retain Regulation or Eliminate - Summarizing statement]

2. [Occupation]: [Retain Regulation or Eliminate - Summarizing statement]

3. [Occupation]: [Retain Regulation or Eliminate - Summarizing statement]

4. [Occupation]: [Retain Regulation or Eliminate - Summarizing statement]

30. Do you have any additional comments, questions, or concerns that you would like to share?

Intro

Thank you for participating in the Wisconsin Occupational License Study survey. Your feedback is important. The deadline for participation is December 10, 2018.

Pursuant to 2017 Wisconsin Act 59, the Department of Safety and Professional Services (DSPS) is required to submit a report to the Governor and the Legislature that includes recommendations for reform relating to Wisconsin's occupational licenses.

The data and input collected will be used to provide recommendations for reform and improvement of Wisconsin's occupational licensing requirements.

Please Read:

The terms below are used in the survey and defined as follows:

“License” means a state of Wisconsin-issued occupational license, credential, certification, or registration. “License” does not include permits, facility or establishment licenses, business licenses (such as a liquor license or vending license), or licenses required by a local or municipal ordinance.

“Main job or occupation” means your current and main occupation or job, job from which you are on layoff, or job at which you last worked if you are between jobs.

*** Do you have a currently active occupational or professional license or credential that is issued by the state of Wisconsin?**

- Yes, I have an active license that is issued by the State of Wisconsin.
- No, my license application is pending.
- No, my license is inactive or expired.
- No, I do not hold a Wisconsin state-issued license.

*** Specify the type of active license that you hold. If you hold multiple licenses, select the category type that best describes the license you use for your primary/main occupation.**

- Animal or Agriculture related
- Banking and Financial related (includes investments, insurance, lenders, collectors, tax assessor, charitable fundraising)
- Business related
- Chemical, Environmental, or Utilities Dealer, Supplier, or Applicator (includes fuel, gas, oil, water, power, pesticides, asbestos, hazardous materials, or waste products)
- Educator or School related (includes instructor, teacher, administrator, or service provider of elementary, secondary, postsecondary education)
- Food or Restaurant related
- Health or Medical related
- Legal, Security, or Enforcement related (i.e. attorney, investigator, inspector, tester, certifier, private detective, notary, etc.)
- Product or Vehicle Manufacturer, Broker, or Dealer
- Sales related
- Sports related
- Social Services (includes child and adult care services)
- Trades related
- Other (please specify)

*** How useful is your license for each of the following?**

a. Getting a job?

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

*** b. Keeping a job?**

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

*** c. Keeping you marketable to employers or clients?**

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

*** d. Improving your work skills?**

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

*** e. Increasing your wages/salary?**

- Extremely useful
- Very useful
- Somewhat useful
- Not so useful
- Not at all useful

*** Which of the following was required to obtain your license associated with your primary occupation? (Check all that apply.)**

- High school diploma or equivalent
- Passing a test
- Demonstrating certain skills
- Completing an internship or apprenticeship
- Previous job-related experience
- Technical certification (Less than 2 years)
- Some college, no degree
- Associate degree
- Master's degree
- Doctoral or professional degree
- None of the above
- Other (please specify)

*** About how many hours of instruction did you complete to obtain your license associated with your primary occupation?**

- Less than 40 hours
- 40-159 hours
- 160 to 479 hours
- 480 hours (half a full-time school year) to 959 hours
- 960 hours (1 full-time school year) or more

* **Select the category that best describes the *initial* costs you incurred to *obtain* your license associated with your *primary* occupation.** (Include costs for initial education/tuition, registration fees, initial licensing fees, exam fees, required association fees, or other required costs you incurred to obtain your license.)

- Zero to \$200
- \$201 to \$500
- \$201 to \$500
- \$501 to \$1,000
- \$1,001 to \$5,000
- \$5,001 to \$10,000
- \$10,001 to \$50,000
- \$50,001 to \$100,000
- Greater than \$100,000

* **Select the category that best describes the *ongoing* costs you incur to *retain* your license associated with your *primary* occupation.** (Include costs for continuing education, registration fees, renewal licensing fees, exam fees, required association fees, or other required costs you incur in order to keep your license.)

- Zero to \$200
- \$201 to \$500
- \$201 to \$500
- \$501 to \$1,000
- \$1,001 to \$5,000
- \$5,001 to \$10,000
- \$10,001 to \$50,000
- \$50,001 to \$100,000
- Greater than \$100,000

*** Rate the level of hardship or barriers you faced to *obtain* your initial license.**

- None at all
- A small amount
- A moderate amount
- A large amount
- A great amount that resulted in my inability to get a license.

*** Rate the level of hardship or barriers you face to *retain* your license.**

- None at all
- A small amount
- A moderate amount
- A large amount
- A great amount that resulted in my inability to maintain my license.

*** Rate the importance that your license serves in protecting public citizens from harm or danger.**

- Extremely important. It's a matter of life or death.
- Very important. The public would be at risk for significant harm or danger if a license wasn't required for this occupation.
- Somewhat important. It's possible the public could be exposed to some risk if a license wasn't required for this occupation.
- Not so important. It's unlikely the public would be exposed to harm or danger if a license wasn't required for this occupation.
- Not at all important. There is no risk of harm or danger to the public if a license wasn't required for this occupation.

*** Do you hold a similar occupational license in another state(s)?**

- Yes
- No

*** Select the category that best describes the *initial* requirements to *obtain* your out of state license compared to Wisconsin's initial licensing requirements. (Compare educational and other requirements, fees and other costs.)**

- Way more than Wisconsin
- Somewhat more than Wisconsin
- About the same as Wisconsin
- Somewhat less than Wisconsin
- Way less than Wisconsin

*** Select the category that best describes the *ongoing* requirements to *retain* your out of state license compared to Wisconsin's *ongoing* licensing requirements. (Compare educational and other requirements, fees and other costs.)**

- Way more than Wisconsin
- Somewhat more than Wisconsin
- About the same as Wisconsin
- Somewhat less than Wisconsin
- Way less than Wisconsin

*** Rate the level of hardship or barriers you faced to *obtain* your *initial* out of state license.**

- The state has way more hardships and barriers than Wisconsin.
- The state has somewhat more hardships and barriers than Wisconsin.
- The state has about the same as Wisconsin.
- The state has somewhat less hardships and barriers than Wisconsin.
- The state has way less hardships and barriers than Wisconsin.

*** Rate the level of hardship or barriers you face to *retain* your out of state license.**

- The state has way more hardships and barriers than Wisconsin.
- The state has somewhat more hardships and barriers than Wisconsin.
- The state has about the same as Wisconsin.
- The state has somewhat less hardships and barriers than Wisconsin.
- The state has way less hardships and barriers than Wisconsin.

*** Are you aware of any instances where occupational licensing regulations have impacted the cost or availability of consumer goods or services? [i.e. increased costs for goods or services, decreased availability of practitioners]**

- Yes
- No

*** Please provide specific examples where state licensing regulations have impacted the cost or availability of consumer goods or services.**

*** How important is it to regulate Wisconsin's occupations in order to protect public citizens from harm or danger?**

- Extremely important. It's a matter of life or death.
- Very important. The public would be at risk for significant harm or danger if a license wasn't required for this occupation.
- Somewhat important. It's possible the public could be exposed to some risk if a license wasn't required for this occupation.
- Not so important. It's unlikely the public would be exposed to harm or danger if a license wasn't required for this occupation.
- Not at all important. There is no risk of harm or danger to the public if a license wasn't required for this occupation.

*** Indicate what types of licenses should be regulated in order to protect public citizens from harm or danger. Check all that apply.**

- Animal or Agriculture related
- Banking and Financial related (includes investments, insurance, lenders, collectors, tax assessor, charitable fundraising)
- Business related
- Chemical, Environmental, or Utilities Dealer, Supplier, or Applicator (includes fuel, gas, oil, water, power, pesticides, asbestos, hazardous materials, or waste products)
- Educator or School related (includes instructor, teacher, administrator, or service provider of elementary, secondary, postsecondary education)
- Food or Restaurant related
- Health or Medical related
- Legal, Security, or Enforcement related (i.e. attorney, investigator, inspector, tester, certifier, private detective, notary, etc.)
- Product or Vehicle Manufacturer, Broker, or Dealer
- Sales related
- Sports related
- Social Services (includes child and adult care services)
- Trades related
- No occupations should be regulated
- Other (please specify)

Please provide any information you would like to share.

VIII. Resources

1. State of Vermont - Application for Preliminary Sunrise Review Assessment
www.sec.state.vt.us/professional-regulation/sunrise-review.aspx
2. Occupational Licensing Review Act Model Legislation
www.ncsl.org/Portals/1/Documents/Labor/Licensing/Knepper_OccupationalLicensingReviewAct_31961.pdf
3. The National Occupational Licensing Database
www.ncsl.org/research/labor-and-employment/occupational-licensing-statute-database.aspx#Additional%20Resources
4. Policymaker Questions to Ask When Considering Occupational Licensing Proposals
www.ncsl.org/Portals/1/HTML_LargeReports/occupationallicensing_final.htm
5. Fact Sheet: New Steps to Reduce Unnecessary Occupation Licenses that are Limiting Worker Mobility and Reducing Wages
obamawhitehouse.archives.gov/the-press-office/2016/06/17/fact-sheet-new-steps-reduce-unnecessary-occupation-licenses-are-limiting
6. Occupational Licensing: A Framework for Policymakers, July 2015
obamawhitehouse.archives.gov/sites/default/files/docs/licensing_report_final_nombargo.pdf
7. Framework for Developing Consistent Descriptions of Regulatory Models - CLEAR (Council on Licensure, Enforcement, and Regulation)
www.clearhq.org/resources/Regulatory_Model_United_States.pdf

IX. References

1. *States Take on Occupational Licensing Reform*; Billy Culleton, Strategic Government Relations Coordinator
2. *License to Work – A National Study of Burdens from Occupational Licensing - 2nd Edition*; Institute for Justice
3. *Occupational Licensing in Wisconsin Has Grown and Has Costs* – Collen Roth, Research Fellow, Wisconsin Institute for Law and Liberty
4. *A Fresh Start – Wisconsin’s Atypical Expungement Law and Options for Reform* – Public Policy Forum
5. *Regulation of Professional Occupations by the Department of Safety and Professional Services* – Information Paper 97, January 2015
6. *Occupational Licensing: Ranking the States and Exploring Alternatives* – Adam B. Summers, Reason Foundation
7. *The De-licensing of Occupations in the United States* - Robert J. Thornton and Edward J. Timmons, "Monthly Labor Review, U.S. Bureau of Labor Statistics, May 2015
8. National Conference of State Legislatures - www.ncsl.org
9. *The State of Occupational Licensing: Research, State Policies and Trends, Occupational Licensing: Assessing State Policy and Practice* - National Conference of State Legislatures
10. *Occupational Licensing: A Framework for Policymakers* - U.S. Department of Treasury Office of Economic Policy, Council of Economic Advisers and Department of Labor, (Washington, D.C., The White House) 2015
11. *The Costs and Benefits of Occupational Regulation* - Carolyn Cox and Susan Foster, Federal Trade Commission, (Washington, D.C.), 1990
12. *Hearing on License to Compete: Occupational Licensing and State Action Doctrine,*" United States Committee on the Judiciary - Testimony presented by Jason Furman, February 2016
13. *The Right to Earn a Living Act: A Well-Considered Answer to Licensing* – Jon Sanders, March 2018
14. *Buttermaker License* – Jeanne Carpenter, CheeseUnderground.com, March 2010

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This Wisconsin Occupational Licensing Study Report
was produced by the Department of Safety and Professional Services,
pursuant to 2017 Wisconsin Act 59.



Wisconsin Department of Safety and Professional Services

Laura Gutiérrez, Secretary

Office of the Secretary
4822 Madison Yards Way
PO Box 8363
Madison WI 53708-8368

Phone: 608-266-1352
Web: <http://dsps.wi.gov>
Email: dsps@wisconsin.gov

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Maximilian Turner, Bureau Assistant, on behalf of Tom Ryan, Executive Director		2) Date When Request Submitted: 1/18/2019 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 1/31/2019	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Speaking Engagements, Travel, or Public Relation Requests, and Reports 1) Consider Attendance at the Federation of Chiropractic Licensing Boards (FCLB) 2019 Annual Education Congress, May 1-5, 2019, Mission Bay, CA	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: The Board should consider assigning a delegate and alternate delegate for attendance at the FCLB 2019 Annual Education Congress from May 1-5, 2019 in Mission Bay, CA. MOTION LANGUAGE: To designate <INSERT NAME> (as the Board's delegate) to attend the FCLB 2019 Annual Education Congress on May 1-5, 2019 in Mission Bay, CA and to authorize travel.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			



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Meetings 2019 - Mission Bay

Search...

Vision Statement: The FCLB is the premier international resource for information and consolidated services for ensuring the safe, ethical practice of chiropractic.

Mission Statement: Protecting the public by promoting excellence in chiropractic regulation through service to our member boards.

Quick Links

- [Delegates](#)
- [Elections & Bylaws](#)
- [Hotel & Travel](#)
- [Awards & Grants](#)
- [AGENDA - Updated 1/16/19](#)
- [Register](#)

FCLB 2019 Annual Educational Congress

REGISTER NOW
 May 1-5, 2019
 Mission Bay, California

[Hilton San Diego Resort and Spa](#)
 Room rate: \$219 +tax single/double

deadlines

- January 15, 2019
Registration Opens
- February 3, 2019
Bylaws Amendments Due
Liewer-Cohen Grant App Due
CBLAC Grant App Due
Award Nominations Due
- March 5, 2019
Intent to Run Due
Early Bird Registration Ends

2019 Meeting Checklist

- Put delegate designations and travel approval on your board agenda
- Submit your board's voting delegate designation form to NBCE
- Submit your board's **voting delegate designation form** to FCLB
- Book your hotel room and make travel arrangements
- Register to attend
- Brush up on elections and issues
- Complete and submit your [Member Board Report](#)

- April 2, 2019
Room Block Closes

Special thanks to our Conference Partner:



- April 4, 2019
Voting Delegate & Alternate Designations Due
Late Registration Begins

2019 Draft Schedule (subject to change) [CLICK HERE TO DOWNLOAD A DETAILED AGENDA](#)

REGISTRATION OPENS JANUARY 15, 2019

Wednesday, May 1 - Recommended travel day - arrive at your leisure

- 8:00 AM - 5:00 PM FCLB Board of Directors Meeting
- 2:00 - 4:00 PM Conference Registration and Check-in; pick up your materials
- 2:00 - 4:00 PM FCLB Committee Meetings - contact your committee chair
- 5:00 PM Deadline to submit FCLB resolutions

Thursday, May 2

- 7:00 - 8:00 AM Conference Registration and Check-in; pick up your materials
- 7:00 AM New Attendee Orientation and Breakfast
- 7:15 AM General Continental Breakfast (for meeting attendees only)
- 8:15 AM Welcome and Opening Remarks

9:00 - 1:15 PM Educational Sessions
 Committee Meetings (contact your committee chair)
 2:00 - 4:30 PM Workshops
 5:30 - 7:00 PM Reception sponsored by NBCE

Friday, May 3 (National Board Day)

7:00 - 8:00 AM FCLB Committee Meetings (contact your committee chair)
 7:30 AM Chiropractic Board Administrators Committee (CBAC) Breakfast and Meeting (*separate fee applies*)
 7:30 AM General Continental Breakfast (for meeting attendees only)
 8:00 AM FCLB Credentials Committee Meeting
 NBCE Events Schedule not available
 2:15 - 3:15 PM FCLB Committee Meetings - as determined by chairs
 2:15 - 4:15 PM Chiropractic Board Legal Advisers Committee (CBLAC) Meeting
 4:30 - 5:00 PM FCLB Resolutions and Bylaws Committee Meeting
 4:45 - 10:00 PM NBCE Friday Evening Social Event - Details TBA

Saturday, May 4

7:15 AM District Caucuses and Breakfast (for meeting attendees only)
 8:00 - 9:00 AM Introduction, Awards Presentation
 9:15 AM - 10:45 AM Educational Sessions Resume
 11:00 AM - 12:45 PM FCLB Annual Business Meeting
 1:30 - 2:00 PM FCLB Board of Directors Meeting

Sunday, May 5 - Recommended travel day - depart at your leisure

8:30 - 9:30 AM Week in Review



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Meetings 2019 - Mission Bay 2019 - Hotel and Travel

Search...

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Mission Statement: Protecting the public by promoting excellence in chiropractic regulation through service to our member boards.

Quick Links

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deadlines

- January 15, 2019
 - Registration Opens
- February 3, 2019
 - Bylaws Amendments Due
 - Liewer-Cohen Grant App Due
 - CBLAC Grant App Due
 - Award Nominations Due
- March 5, 2019
 - Intent to Run Due
 - Early Bird Registration Ends
- April 2, 2019
 - Room Block Closes
- April 4, 2019
 - Voting Delegate & Alternate Designations Due
 - Late Registration Begins

hotel

**Hilton San Diego Resort & Spa
in Mission Bay**
[CLICK HERE TO BOOK ONLINE](#)

1775 East Mission Bay Drive
San Diego, CA 92109
(877) 313-6645

Room rate: \$219 + tax single/double

- room rate available 3 days prior and following our meeting

Resort amenities included - (charges waived for attendees in FCLB room block)

- unlimited guest room internet access
- unlimited local and 1-800 phone calls
- 24-hour access to fitness center
- Tennis court access
- Recreational activities including volleyball, basketball, ping pong, board games
- Seasonal activities (Dive-in movies, S'mores night)
- Passport book of discounts in all Resort's outlets

Parking

- Discounted rate of \$20 per night (currently \$36)

Complimentary shuttle to SeaWorld

- available daily
- departs 10 am, returns 5 pm
- [reservations required](#) (619) 887-7827

Shuttle service to local destinations

- [click here to view destinations and rates](#)

Early departure fee

- \$75
- Advise hotel at check-in of changes in departure dates to avoid this fee

travel

Air

San Diego Int'l-Lindbergh Field (SAN)
6 miles from the hotel

Ground

Shuttle
reservations: (619) 887-7827
sedan rate: 1-4 passengers \$35
SUV rate: 5+ passengers \$50



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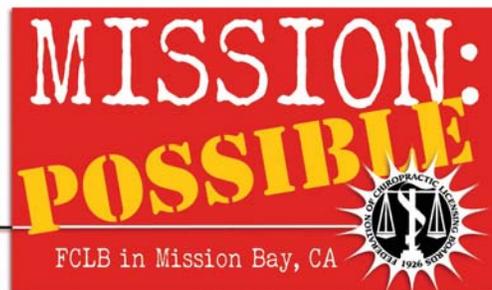


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FCLB's 93rd Annual Educational Congress

May 1-5, 2019



With thanks to our conference partner: NBCE

Updated 1/16/2019 Agenda subject to change

Wednesday · May 1 FCLB Office - ~ NBCE Office -

- 8:00 AM - 5:00 PM **FCLB BOARD OF DIRECTORS MEETING**
- 2:00 - 4:00 PM **FCLB COMMITTEE MEETINGS** - determined by chairs
- 2:00 - 4:00 PM **FCLB CONFERENCE CHECK-IN**
- 5:00 PM **DEADLINE TO SUBMIT FCLB RESOLUTIONS**
- Wednesday evening on your own.

Thursday · May 2

- 7:00 - 8:00 AM **FCLB CONFERENCE CHECK-IN**
- 7:15 AM **BREAKFAST**
Full breakfast for registrants.
- 7:00 AM **NEW ATTENDEE ORIENTATION & BREAKFAST**
Is this your first meeting? Learn more about the missions and work you are taking part in.

EDUCATIONAL PROGRAM -

Guest Host - Robert Friedman, D.C., (CA)

WELCOME & OPENING REMARKS

8:15 AM Maggie Colucci, D.C. (NV) - FCLB President

8:30 AM **SYLVA ASHWORTH AWARD INTRODUCTION**

Carl S. Cleveland, III, D.C.

9:00 AM **29th ANNUAL JOSEPH JANSE LECTURE**

ABOUT THE LECTURE SERIES...Speakers for the Janse Lecture series are chosen by a committee of the FCLB board based on their oratory skills, ability to envision future possibilities, and to encourage the audience of regulators to consider new points of view, new perspectives in their approaches to public protection.

The Janse Lecture is successful if the speaker presents a different viewpoint and rekindles passion.

9:45 AM **EDUCATIONAL SESSION -**
Daniel Murphy, D.C.

10:30 AM **MIDMORNING BREAK**

10:45 AM **CONCURRENT PRESENTATIONS**

THE OPIOID EPIDEMIC -

Dr. George Khoury, (PA) and Dr. Kirk Shilts, (MA)

Discuss the rapid increase in the use of prescription drugs

CONCURRENT SESSION

BOARD MEMBER TRAINING -

What your board staff wants you to know

11:30 AM **EDUCATIONAL SESSION**

ATTORNEY PANEL -

Ajay Gohill, Esq., (DC) - Moderator

Mona Baskin, Esq., (AZ), Luis Ling, Esq. (NV) and

Christopher Gerard, Esq., (WA)

The panel will discuss CBD Products, as well as the Sports Medicine Licensure Clarity Act of 2018

12:15 PM **NATIONAL UPDATES -**
COCSA - CCE-US - ICA - ACA - FCC - ICRS

1:00 PM **LUNCH ON YOUR OWN**

AFTERNOON SESSIONS

2:00 - 2:45 PM **COLLEGE PRESIDENT'S PANEL -**

2:45 - 3:30 PM **EVALUATIONS OF INTERNATIONAL TRANSCRIPTS -**

2:00 PM **FCLB FINANCE COMMITTEE MEETING**

Carol Winkler, D.C. (ND) - FCLB Treasurer, Chair

2:30 - 3:30 PM **WORKSHOP: FCLB SERVICES**

Ms. Kelly Webb (FCLB) & Ms. Jannelle Grier (FCLB)

Discover the services your board may access through FCLB membership. Learn more about CIN-BAD, PACE, CCCA, PowerPolls, meetings, and more.

3:30 - 4:30 PM **MEMBERSHIP FORUM**

Moderator: Robert Daschner, D.C. (MN)

- Review proposed bylaws and resolutions
- Meet President, Vice President and Treasurer candidates, District III & IV Director and Alternate Director, as well as Nominating Committee candidates
- Learn about committee and task force service

5:30 - 7:00 PM **RECEPTION**

Come catch up with your regulatory friends for a light reception and some heavy reminiscing.

**The reception is generously sponsored by the
National Board of Chiropractic Examiners**

Friday · May 3 NATIONAL BOARD DAY - AGENDA NOT AVAILABLE

7:00 - 8:00 AM **FCLB COMMITTEE MEETINGS** - determined by chairs of the standing Committees or Task Forces

7:30 AM **CHIROPRACTIC BOARD ADMINISTRATORS COMMITTEE (CBAC)
BREAKFAST & MEETING**

See separate Agenda Ms. Beth Carter (OK) - Chair & Ms. Patricia Oliver (LA) FCLB Board Liaison

7:30 AM **BREAKFAST**
Full breakfast for registrants

8:00 AM **FCLB CREDENTIALS COMMITTEE MEETING**

2:15 - 4:15 PM **CHIROPRACTIC BOARD LEGAL ADVISORS COMMITTEE MEETING
(CBLAC)**

Mr. Ajay Gohill, Esq., (DC) and Mona Baskin, Esq., (AZ) Co-Chairs

2:15 - 3:15 PM **FCLB COMMITTEE MEETINGS** - determined by chairs of the standing Committees or Task Forces

4:30 - 5:00 PM **FCLB RESOLUTIONS & BYLAWS COMMITTEE MEETING**
Kevin Fogarty, D.C. (FL), Chair
Open session review of proposed bylaws amendments and resolutions.

Saturday · May 4

7:15 AM **DISTRICT BREAKFASTS
ELECTIONS**

Hosts: FCLB District Directors

- District Director & Alternate Director elections for Districts III & IV
- Updates from your district director
- Fall meeting information

EDUCATIONAL PROGRAM CONTINUED -

Guest Host: Heather Dehn, D.C., (CA)

8:00 AM **INTRODUCTION - WELCOME BACK TO THE FCLB PROGRAM**
Maggie Colucci, D.C. (NV), FCLB President

2019 Friends of FCLB - Foundation 4 Chiropractic Progress Program
“Drug Free Pain Management”

8:15 AM **ANNUAL AWARDS PRESENTATION**
Maggie Colucci, D.C. (NV), FCLB President

9:00 AM **CONCURRENT PRESENTATIONS**

DEREGULATION AND TOP CASES -
Dale Atkinson, Esq., Atkinson & Atkinson

STEM CELL THERAPY -
Do these practices need greater regulatory scrutiny?

10:00 AM **PRESENTATION: Call to Action**
Farrel Grossman, D.C., (SC)

Now that you’ve learned the information, commit to use it. Transform education in action.

10:30 AM **MIDMORNING BREAK**

ANNUAL MEETING OF THE DELEGATE ASSEMBLY

10:45 AM **DISTRIBUTION OF VOTING PADDLES** - Tellers Committee

11:00 AM **FCLB ANNUAL BUSINESS MEETING**

Maggie Colucci, D.C. (NV), FCLB President, Meeting Chair

- Seating of the Delegates
- Financial Report
- Resolutions & Bylaws
- Elections: President, Vice President, Treasurer and Nominating Committee
- Announcements
- New Business
- Installation of the New FCLB Board of Directors

12:45 PM **LUNCH ON YOUR OWN**

1:00 - 1:30 PM **POST-CONFERENCE BOARD OF DIRECTORS MEETING**
FCLB Board of Directors

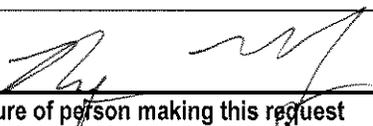
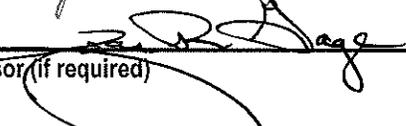
Sunday · May 5

8:30 - 9:30 AM **WEEK IN REVIEW** -
Host: James Buchanan, D.C., (WY)

Plan for 2020 in Denver, Colorado · April 22 - 26, 2020
Grand Hyatt Denver · Room rate: \$229/night + taxes - single/double

**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Ryan Zeinert Licensing Examination Specialist		2) Date When Request Submitted: 1/11/19 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Chiropractic Examining Board			
4) Meeting Date: 1/31/19	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? WCA Request for Approval of CT Course of Study	
7) Place item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: Determine approval status of attached course of study.			
11) Authorization			
 Signature of person making this request		1-11-19 Date	
 Supervisor (if required)		1-11-19 Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date			
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8366
Madison, WI 53703-8366

FAX #: (608) 266-2602
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53703

E-Mail: web@dps.wi.gov
Website: <http://dps.wi.gov>

REQUEST FOR APPROVAL OF A CHIROPRACTIC RADIOLOGICAL TECHNICIAN or CHIROPRACTIC TECHNICIAN PRE-CERTIFICATION COURSE OF STUDY

Completion of this form is required for all providers applying for approval of a Chiropractic Technician or Chiropractic Radiological Technician pre-certification course of study. You must submit a proposal of the course of study with this form which will be used by the Chiropractic Examining Board to determine whether to approve the course of study.

Chiropractic Technician/Chiropractic Radiological Technician pre-certification course of study information:

School/Provider Name: Wisconsin Chiropractic Association, 521 East Washington Ave, Madison, WI 53703

Street Address:

City, State, Zip Code: _____

School/Provider Administrator: Andrea Murray

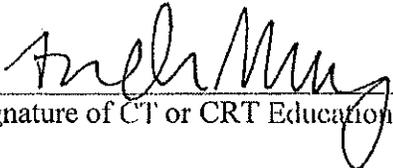
Contact Telephone: 608-256-7023

Contact Email Address: awmurray@wichiro.org

*Please attach the written course of study proposal including course outline, description/rationale, measured outcomes, instructor qualifications, etc.

You will be contacted if additional information is required. If the course of study is approved by the Chiropractic Examining Board, the school/provider is required to inform the department in advance of any changes to the course of study or instructor qualifications to determine if the change will require review for re-approval.

NOTE: You may make no plans for admission of students or release publicity until you have received notice in writing from the department that the chiropractic radiological technician or chiropractic technician course of study has been approved.



Signature of CT or CRT Educational Program Administrator

1/4/19

Date

Fundamentals of Exercise Rehabilitation-Certification Course of Study for CTs

Course Objectives/Outcomes

1. This 24-hour education course is taught in 2 12-hour modules and is designed to train and allow delegation of exercise to chiropractic assistants in compliance with Wisconsin's Administrative Code.
2. Session 1 will cover scope of practice, basic functional anatomy, principles of physical exercise, indications and contraindications, baseline screening, outcomes and goal-setting, and physical exercise options for core stabilization.
3. Session 2 will cover record keeping and reporting, functional anatomy, kinesiology and joint movement, principles of extremity rehabilitation, and Range of Motion exercise options.
4. This course is designed to provide CTs with practical training in physical exercise rehabilitation.
5. Course will include a final assessment of competency.

Approved Instructors – CVs attached

- Dr. Steven Yeomans
- Dr. Jeffrey Sargent
- Dr. Eric Kirk

Hour By Hour Outline

Exercise Rehabilitation Session I	HOUR #
DAY 1	
PRE-TEST	
1. Overview of CT course	0
2. Purpose/Goals of the Physical exercise training	
3. Delegation to unlicensed persons (Chir 10.01 to 10.02) Scope of Practice	
4. Research: Evidence supporting the training of exercise in the clinical setting	
5. Survey of Fitness Trends; Active Care Progression Model; Fitness & Mortality	
6. Physical Activities Guidelines for Americans (US Dept of Health & Human Services)	1 hr
7. Basic Physical Exercise Terminology	
8. Basic functional anatomy	
9. Soft Tissue Injury and Phases of Healing	
10. Effects of Scar Tissue	
11. Muscles of the Spine	2 hr
12. Rehabilitation Defined and "Time Line"	
13. Physical Exercise Concepts	
14. The Pain Cycle	
15. Indications for Physical Exercise	
16. Contraindications for Physical Exercise	3 hr
17. Par-Q Screen	
18. Overview of tracking progress (subjective & objective means)	
19. Subjective Outcomes: Bournemouth Questionnaires	
20. Outcome Assessment Record	
21. 3-Steps to become Outcomes Based	4 hr
22. Physical exercise coding options and record keeping & reporting	
23. Objective Outcomes: Physical Exercise Screen	
24. Review Documentation/Forms and Objective Pain Scale (Wolfe, et al)	
25. Physical Exercise Screen	5 hr
26. Exercises associated with the exercise screen	
27. 3-Minute Step screen and exercise options (Workshop from this point forward)	
28. Horizontal Side Bridge and physical exercise options	
29. One-Leg Balance screen and physical exercise options	6 hr

DAY 2	
30. Repetitive Squat screen and physical exercise options	0 hr
31. Cervical Spine Strength screen and physical exercise options	
32. Repetitive Sit-Up screen and physical exercise options	
33. Straight Leg Raise screen and physical exercise options	2 hr
34. Static Back Endurance / extensor endurance screen and physical exercise options	
35. Hip Rotation Muscle Length screen and physical exercise options	
36. Grip Strength screen and physical exercise options	
37. Pass/Fail screens: 4-Point Quadraped; Lunge; Squat – Hip Hinge concept	6 hr
<i>NOTE: Homework: All CT's must perform 2 screens between 1st and 2nd weekends</i>	
TOTAL HOURS	12

Exercise Rehabilitation Session II	
DAY 1	HOUR #
1. Review Spinal Exercise Screen and homework assignments – Q&A	0
2. Core Stabilization: Ball Exercises (Workshop 2-4 people per ball)	
3. Core Stabilization: Floor Exercises (Workshop 2-4 people per group)	
4. Extremity Rehabilitation – Introduction: Anatomy, Kinesiology & Joint Movement	3 hr
5. Upper & Lower Extremity Assessment Forms (Subjective OA Tool and Objective OA)	
6. Record keeping & Reporting	
7. Shoulder ROM and physical exercise options (Level I, II, III)	6 hr
DAY 2	0 hr
8. Elbow & Wrist ROM	
9. Elbow and Wrist Rehab (Level I, II, III)	
10. Hip ROM and physical exercise options (Level I, II, III)	2 hr
11. Knee and Ankle ROM and physical exercise options (Level I, II, III)	
12. Temporomandibular Joint (TMJ) - YouTube & handout	
13. Pelvic Floor Rehab – YouTube & handout	4 hr
14. Dizziness/BPPV - Handout	
15. Ocular Exercise options	
16. Conclusion	6 hr
POST-TEST	
TOTAL HOURS	12

CURRICULUM VITAE STEVEN G. YEOMANS, D. C., FACO
404 Eureka St., Ripon, WI 54971-0263

EDUCATION:

- 1) North Central College 1973-1975
- 2) National College of Chiropractic 1975-1979
- 3) Clerkship/rotation in Orthopedics - Back & Foot Service Cook County Hospital, Chicago, IL 1977
- 4) Bachelor of Science Degree National College of Chiropractic 1977
- 5) Graduate (cum laude) Doctor of Chiropractic, D.C. National College of Chiropractic April, 1979
- 6) Post-Graduate 100 Hour Course in Acupuncture and Meridian Therapy 1979
- 7) Post-Graduate National College of Chiropractic Division 300 (plus) Hours in Chiropractic Orthopedics 1979-1985
- 8) Diplomate Status Board Certified in Chiropractic Orthopedics 1985; re-certified 2000
- 9) State License: Wisconsin (#1513) and North Carolina (#1082)

PROFESSIONAL MEMBERSHIP:

- 1) Wisconsin Chiropractic Association (WCA); Northeast district president
- 2) American Chiropractic Association (ACA)
- 3) Council of Chiropractic Orthopedics (CCO)
- 4) American Board of Chiropractic Orthopedics (ABCO)
- 5) Diplomate of the American Board of Chiropractic Orthopedics (DABCO) 1985
- 6) Fellow in the Academy of Chiropractic Orthopedics (FACO) (1985-present)
- 7) Fellow of the American Back Society (1990-present)
- 8) Clinical Advisory Committee - WCA - Chairperson 1991 - 2000
- 9) International Academy of Chiropractic Occupational Health Consultants (1988-present)
- 10) Foundation of Chiropractic Education and Research (FCER) (1980-present)
- 11) Industrial Consultants Committee Wisconsin Chiropractic Association (WCA) (1986-present)
- 12) Steering Committee member and faculty member of the Wisconsin Back Society (Fall 1993 to present)
Diplomate status in the American College of Chiropractic Consultants (certificate number 100, 11/20/97) (DABCC)

FACULTY POSITIONS & EDITORIAL BOARD POSITIONS:

- 1) Post-Graduate faculty position: National College of Chiropractic, Accepted May, 1989 (Orthopedic Department)
- 2) Post-Graduate faculty position: Northwestern College of Chiropractic, June, 1991 (Orthopedic and Occupational Health Departments)
- 3) Post-graduate faculty position: Los Angeles College of Chiropractic, October, 1994 (Orthopedic and, Physical Therapy and Rehabilitation Departments)
- 4) Post-graduate faculty position: Canadian Memorial College of Chiropractic, Nov. 1994 (Physical Therapy and Rehabilitation Department)
- 5) Post-Graduate faculty position: Northwestern College of Chiropractic, April, 1999 (Physical Therapy and Rehabilitation Department)
Wisconsin Back Society - Faculty member (presented at 5/94, 5/96, 5/98, 9/99, 12/00 meetings).
- Post-Graduate faculty position: Texas College of Chiropractic, Spring 2000
- Post-Graduate faculty position: Palmer College of Chiropractic, Spring 2002
- Editorial board: Journal of Rehabilitation Outcomes Measurement, 1996 to present.
- Editorial board: Journal of Rehabilitation Outcomes Measurement, 1996 to present.

Editorial board: Journal of Chiropractic Medicine, 2001 to present

PROFESSIONAL OFFICE:

1)1987 - 1988 Vice President

Northeast District Wisconsin Chiropractic Association (WCA)

2)1988 - 1989 President Northeast District (WCA)

3)1991 - 2000 Chairperson of the WCA Clinical Advisory Committee and re-appointed 2002 to present

4)Peer Review committee member for Medicaid, State of Wisconsin

Served in a 5-person insurance review panel for Department of Workforce Development, 12-11-92-Present

Member of steering committee: Documentation Committee, Standards Committee, WCA

Member WI board of Chiropractic Examiners, 1997-present

President of the Wisconsin Back Society, May 1996-199

Secretary of the Wisconsin Back Society, May 1998-present

President, Thrasher Opera House, Green Lake, WI 2003-present

SELECTED PUBLICATIONS:

1) Participated in research at the California Spine Surgical Medical Group, Inc., Long Island, California (1985) with Dr. Michael Zindrick, M.D. and Leon Wiltse, M.D. which led to the publication entitled: "A Biomechanical Study of Intrapuduncular Screw Fixation in the Lumbosacral Spine" published in Clinical Orthopedics and Related Research No. 203, February, 1986.

2) Participated in a professional exchange with the Chinese Medical Association through the U.S. Government, Peoples to Peoples Citizen Ambassador Program, 1987. Presented paper in Beijing entitled, "The Utilization of Cervical Stress Radiography and its Correlation with Spinal Manipulative Therapy - A Preliminary Study." This was published in the journal, People to People Chiropractic Delegation: To The People's Republic of China, May 15-28, 1987.

3) Post-Graduate Education: It Can Change Your Life! The WI Chiropractor. 1990; 26:22. (This was also published in the J. Miss. Assoc. Chiro. 1990; 6:9).

4) Published: Yeomans S. The Assessment of Cervical Intersegmental Mobility Before and After Spinal Manipulative Therapy. J. Manipulative Physiol Ther 1992; 15(2):106-114.

5) Publication: "Carpal Tunnel Syndrome - A Chiropractic Perspective". Aspen Publishing; July, 1993 and included as a chapter (21-6) in the text "Chiropractic Family Practice", editor Joseph Sweere.

6) Published: "DC Tracts" Chiropractic Management of Carpal Tunnel Syndrome. Published spring, 1996 (Aspen Publishing).

7) Published: Yeomans S, Liebenson C. Quantitative functional Capacity Evaluation: The Missing Link to Outcomes Assessment. Top Clin Chiro 1996; 3(1): 32-43.

8) Published: Yeomans S, Liebenson C. Functional Capacity Evaluation and Chiropractic Case Management. Top Clin Chiro 1996;3(3):15-25.

9) Published: Liebenson C, Yeomans, S. Outcomes Assessment in Musculoskeletal Medicine. Manual Therapy 1997;2:67-74.

10) Published: Yeomans S, Liebenson C. Applying Outcomes Management into Clinical Practice. J. Neuromusculoskel.System. Spring 1997; 5(1):1-14.

11) Text Chapter 5: Yeomans S, Fitzthum J. Proving the Existence of Chronic Pain. Wiley Law Publications. 1998 Wiley Expert Witness Update: New Developments in Personal Injury Litigation. 1998, pp5.1-5.20.

Text: The Clinical Application of Outcomes Assessment. Ed.: Yeomans, SG. (Stamford, CT) Appleton &

Lange. 2000. ISBN #: 0-8385-1528-2. (9/99 release)

Text Chapter 15: Outcomes Management of Cervical Spine Complaints. Ed.: Murphy, D. In: Conservative Management of Cervical Spine Syndromes. (Stamford, CT) Appleton & Lange. 2000. ISBN #: 0-8385-6386-4.

14) Text Chapter 10. Advanced Issues of Functional Testing and Patient Outcomes Assessment. Ed. David Stude, D.C. In : Spinal Rehabilitation, Appleton & Lange Publishers, Stamford, CT, 2000. ISBN #: 0-8385-3685-9.

15) Published: Liebenson, C, Chapman S, Yeomans SG. How do I justify the medical necessity of my care? Part 1: Overview. Dynamic Chiropractic 5-17-99; 17(11):18-21.

Published: Yeomans SG, Fitzthum J, Edinger M. "DC Tracts" Industrial Work Injuries: Carpal Tunnel Syndrome Published summer, 1999 (Aspen Publishing).

Liebenson C, Yeomans S. Yellow flags: early identification of risk factors of chronicity in acute patients. J Rehab Outcomes Measures 2000;2:36-45

Quantitative Functional Capacity Evaluation (QFCE) – work book and video. First edition: 1995; second edition 2000

Exercise manual and CD regarding QFCE specific exercise prescriptions 2002

Published: April, 2003. J Am Chiro Assoc. Outcomes Assessment-Based Chiropractic Care: What & Why.

SELECTED ACADEMIC AWARDS/ACHIEVEMENTS:

- 1) Achievement Award in Anatomy (1979)
- 2) Who's Who Among Students in American Universities and Colleges(1978-1979)
- 3) Graduated "Cum Laude" from National College of Chiropractic(1979)
- 4) Who's Who Among Rising Young Americans(1992)
- 8) "President's Award", 7-22-95 awarded for "outstanding work and achievement in WCA."

SELECTED LECTURES:

Lecture: LACC Rehabilitation. "Functional Testing of the Lumbar Spine"

- a) Chicago, IL 11-11,12-95
- b) San Jose, CA 2-10,11-96
- c) Los Angeles, CA 5-4,5-96
- d) Philadelphia, PA 6-8,9-96
- e) Atlanta, GA 8-24,25-96
- f) Sacramento, CA 12-7,8-96
- g) Seattle, WA 1-11,12-97
- h) Boston, MA 3-25,16-97
- i) Portland, OR 6-21,22-97
- j) Austin, TX 9-6,7-97
- k) Las Vegas, NV 1-10,11-98
- l) Meridan, CT 3-7,8-98
- m) Denver, CO 3-21,22-98
- n) Oakland, CA 4-25,26-98
- o) Newark, NJ 1-9,10-99
- p) Toledo, OH 2-27/28-99
- q) Chicago, IL 6-26/27-99
- r) Los Angeles, CA 9-18/19-99
- s) Long Island, NY 2-26/27-2000

t) Philadelphia, PN 1-20-2001
Lecture: 2-1,2-97 Seattle, WA. Washington State Chiropractic Association - "Outcomes Assessment: Preparing Yourself for the 21st Century.
WI Academy of Trial Lawyers, 3-13-98. How to Utilize Chiropractic as an Expert Witness
29) Lecture: 3-26-98: Network Health, LaSalle Clinic, Menasha, WI: Severity Indexing
30) American College of Chiropractic Consultants (ACCC): 9-18-98 Rehabilitation: What the Consultant Needs to Know
Lecture: WCA Rehabilitation: 10-22-98 Milwaukee; 10-29-98 Stevens Point
Lecture: WCA Whiplash: 10-22-98 Madison; 10-29-98 Appleton; 11-8-98 Eau Claire, WI
Lecture: LACC Impairment and Disability Evaluation
Montreal (Feb-April, 1999)
WI Academy of Trial Lawyers, 3-19-99 An Introduction To Chiropractic For The Trial Lawyer
Lecture: Northeast Seminars – Vladimir Janda, MD Sensory-motor training of the locomotor system – Detroit, MI 4-23/24-1999
Lecture: Wisconsin Back Society - " Spine Care in the 90's. Focus on spinal rehabilitation - Grand Rounds." Madison, WI. September 2, 1999.
Lecture: ACES/CMCC (Rehab Program) – "Outcome Assessment Measures & Low Cost Functional (Physical) Capacity Evaluations And It's Role In Clinical Practice." Edmonton, Alberta Canada 11-20/21-1999
Lecture: NWCC (Rehab Program) – "Outcome Assessment Measures & Low Cost Functional (Physical) Capacity Evaluations and It's Role In Clinical Practice." Madison, WI 1-22/23-2000.
Lecture: Northwest Ohio Chiropractic Association. "Rehabilitation and Outcomes Assessment of the Cervical and Lumbar Spine - Documentation Options for Chiropractic. Toledo, OH 3-3/4-2000.
Lecture: ACES/CMCC (Rehab Program) – "Outcome Assessment Measures & Low Cost Functional (Physical) Capacity Evaluations and It's Role In Clinical Practice." Houston, TX 9-9/10-2000.
Lecture: ACES/CMCC (Rehab Program) – "Outcome Assessment Measures & Low Cost Functional (Physical) Capacity Evaluations and It's Role In Clinical Practice." New York, NY 10-14/15-2000
Lecture: NWCC (Rehab Program) – "Integrating Subjective and Functional Outcomes Assessment with Return to Work Criteria." Madison, WI 10-21/22-2000.
Louisiana Chiropractic Association Fall Seminar - Rehabilitation and Outcomes Assessment of the Cervical and Lumbar Spine - Documentation Options for Chiropractic. 11-18/19-00.
WI Back Society. "The Aging Spine." Case Studies. Madison, 12-7-00.
National University of Health Sciences (formerly NCC) – Independent Medical Examination – Rehabilitation of the Cervical and Lumbar Spine. 12- 16/17-00.
Australia – Chiropractic Education Association, 2-3/4 and 2-10/11 – 2001.
Texas Chiropractic College sponsored Rehabilitation of the Spine course:
a) Dallas, TX 4 -7, 8 - 2001
b) Columbus, OH 4-28, 29 - 2001
Allied Health, Wausau, WI Spring Seminar: Rehabilitation of the Cervical and Lumbar Spine, 5-3-2001 .
2001 Wisconsin Chiropractic Association documentation seminar series:
General documentation
1) 5-10 Eau Claire
2) 5-17 Madison
3) 5-31 Appleton
4) 6-7 Brookfield
Personal Injury
1) 6-14 Lacrosse
2) 6-21 Madison

3) 6-28 Eau Claire

Lecture: NWCC (Rehab Program) – “Integrating Subjective and Functional Outcomes Assessment with Return to Work Criteria.” Minneapolis, MN 1-5/6-2002.

Washington State Chiropractic Association Winter Conference: Bullet-Proof Documentation Strategies. 2 – 23/24 – 2002

Parker College of Chiropractic sponsored Rehabilitation: Chronic Pain & Case Management course:

a) Columbus, OH 3 - 9/10 – 2002

b) Dallas, TX 10-12/13-2002

Palmer College of Chiropractic sponsored Rehabilitation: Chronic Pain & Case Management course:

a) Columbus, OH 4-17/18 – 2004

b) Pittsburgh, PA 5-15/16-2004

c) Allentown, PA 6-12/13-2004

WI Chiropractic Association sponsored Impairment Rating course:

Madison, WI 35 hours: 2-16/17; 3-16/17; 4-6/7 2002

Chiropractic Documentation – Q & A Worker’s Compensation Case Manager Presentation; 8-7-2003: Appleton, WI

12-6 & 7-2003. Columbus OH. Impairment Rating 12 hour update on the 5th Edition of the Guides to the Evaluation of Permanent Impairment.

11-20-2003 WI Back Society. Case Study presentation for multi-disciplinary panel including physiatrist, neurosurgeon, physical therapist, occupational medicine specialist panel.

12-6 & 7-2003. Columbus OH. Impairment Rating 12 hour update on the 5th Edition of the Guides to the Evaluation of Permanent Impairment.

WCA sponsored courses: Chiropractic X-ray Regulation Guide: Wisconsin Administrative Code HFS 157.74 (Radiation Protection) (Dates: 10-16, 10-21, 10-30, 11-13, 2003) This is offered at different locations throughout the State of WI in 2003 and 2004 (total of 16x).

Salt Lake City, UT 2-7/8-04 Outcomes Assessment & Rehab

2-27-04 WI Academy of Trial Lawyers, 3-19-99 An Introduction To Chiropractic For The Trial Lawyer

10-2-04 WI Chiropractic Association, Fall convention X-ray QA course

10-16/17 Springfield, IL. IL Chiropractic Society Fall convention: Outcomes Assessment

CURRICULUM VITAE

Eric J. Kirk, B.S., D.C., D.A.C.O

HOME: 3832 Thoma Park Drive
West Bend, WI 53095
Res: 262-677-1546
Cell: 262-388-0741

OFFICE: Aurora Health Center
205 Valley Avenue
West Bend, WI 53095
Tel: 262-338-1123
Fax: 262-338-7142
E-mail: eric.kirk@aurora.org

Aurora Health Center
1640 East Sumner Street
Hartford, WI 53027
Tel: 262-670-4000
Fax: 262-670-4071

BIOGRAPHICAL DATA: DOB: February 12, 1968
Citizenship: U.S.A.

EDUCATION:

1990 – 94: Doctor of Chiropractic
Palmer College of Chiropractic
Davenport, IA

1994: Bachelor of Science – Science Studies
Palmer College of Chiropractic

1987 – 90: UW- LaCrosse
LaCrosse, WI
Major: Biology
Minor: Chemistry

1986 – 87: UW – Green Bay
Green Bay, WI
Major: Biology
Minor: Chemistry

1982 – 86: Algoma High School
Algoma, WI

POST GRADUATE TRAINING:

- 2004 –2009 Chiropractic Orthopedic Diplomate Program
- 1999 - 2004: Chiropractic Rehabilitation Diplomate Program
- 1998: Advanced Whiplash Topics
Spine Research Institute of San Diego
Los Angeles Chiropractic College
- Chiropractic Claims Review and IME Certification
Texas Chiropractic College
- Record Keeping in the 1990's
Wisconsin Chiropractic Association
- 1997: Interdisciplinary Symposium
Spinal Injuries related to Sports
Medical College of Wisconsin
- Chiropractic Record Keeping, Utilization
Review and IME Certification
Texas Chiropractic College
- 1996: Biomechanics and Low Tech Rehab of the Spine
Northwestern College of Chiropractic
- Interdisciplinary Symposium
Scientific Evidence in Spine Care
National College of Chiropractic
- 1995: On the Job: A Chiropractic Approach
Resource for Employees
K. Jeffrey Miller, D.C., D.A.B.C.O.
Chicago, Illinois
- Interdisciplinary Symposium
Whiplash Injuries
Medical College of Wisconsin
- Neurology and the Vertebral Subluxation
Motion Palpation Institute
Cleveland Chiropractic College

POST GRADUATE TRAINING:

- Rehabilitation Protocols
Chiropractic Rehabilitation Assoc.
Los Angeles Chiropractic College
- 1994: Neurological Rehabilitation Protocols
Chiropractic Rehabilitation Association
Philadelphia, Pennsylvania
- Documenting the Effectiveness of Spinal Care
Cleveland College of Chiropractic
- An Interdisciplinary Symposium For:
Professionals Interested in Spinal
Diagnosis and Treatment
“Spine Care in the 90’s”
Medical College of Wisconsin
- Whiplash and Spinal Trauma
Life Chiropractic College West

PRACTICE HISTORY:

- 2005 – present Aurora Health Care/Aurora Health Center
1640 East Sumner Street
Hartford, WI 53027
- 12/2000 – present Aurora Health Care/Aurora Health Center
205 Valley Avenue
West Bend, WI 53095
- 11/1998 – 11/2000 Eric J. Kirk, D.C, S.C
Germantown, WI 53022
- 4/1994 – 10/1998 Schaarschmidt Chiropractic Health Center
235 N. 18th Avenue
West Bend, WI 53095

HOSPITAL PRIVILEGES:

St. Luke’s Medical Center

FACULTY APPOINTMENTS:

2009 Adjunct Faculty/Internship Coordinator - Masters of Science in Sports
Medicine Program
Logan University/College of Chiropractic

2009 Adjunct Faculty - Osteopathic and Family Practice Residency Program
University of Wisconsin - School of Medicine

ADDITIONAL POSITIONS / TITLES:

Fellow of Academy of Chiropractic Orthopedists
Clinical Director of Chiropractic Aurora Health Care
Lead for Chiropractic Network Development for Aurora Health Care
Committee Lead for Chiropractic Credentialing for Aurora Health Care
Committee Member for Quality Assurance for Aurora Health Care
Member of Wisconsin Chiropractic Association

LICENSURE:

1994 – Present State of Wisconsin # 3052
1993 – Present National Board of Chiropractic Examiners

LECTURES BY INVITATION: (Abridged)

“Chiropractic and Medicine: What works and when.”

“Understanding Headaches: Treatment options and self-care mechanisms.”

“Oh my Aching Back: Understanding treatment options and low back exercises.”

“Intergrated Management of Lower Back conditions.”

“Preventing Lower Back Injuries”

“The Complexity of Shoulder Injuries and Restoration of Function”

“Complexity of Lower Extremity Injury and Restoration of Function”

Jeffrey A. Sergent, DC

(734) 558-6878

4843 N. Santa Monica Blvd. Whitefish Bay, WI 53217

JSergent@mmtmke.com

Education

National University of Health Science (NUHS), Lombard, IL

Doctorate in Chiropractic (D.C)

Graduated 2008

- Science oriented – Evidence Based Practice
- Extensive Hands-on curriculum
- Functional nutrition
- Functional Rehabilitation
- Global approach

Internship included family care, child care and sports care; rotations at Northwestern University and Depaul University working with their athletes.

Board certified,

Parts I-IV, 2008

Physiotherapy, 2007

Licensed, state of Wisconsin 2011-Present

Licensed, state of Michigan, 2009-2012

Post Doctoral

-Dynamic Neuro Stabilization, certified exercise trainer, (DNS-EXT)

- Dynamic Neuro Stabilization, Clinical(DNS) A-C, sports 1-3

-Selective Functional Movement Assessment, (SFMA) 2012

-Certified, Functional Movement Screen, (FMS level 1 and 2), 2012

-Certified, Active Release Technique(ART) – Spine, Lower extremity and Upper extremity

2008-2015

-Certified, Kinesio Taping Practitioner (CKTP)

2009-present

-Manipulation Under Anesthesia (MUA)

Certified 2009-2013

Privileges at Greater Lakes Ambulatory Center 2009-2011

-McKenzie Mechanical Diagnosis and Therapy (MDT)

-Courses A and B (lumbar and cervical spine), 2009, C (advanced spine) 2010

-Functional Rehabilitation Training, DACRB *testing not complete

400+ hours training toward Diplomate American Chiropractic Board of Rehabilitation

Includes courses with Stuart McGill Ph.D., Gary Grey, PT and Craig Liebenson DC.

Post-ceptor with Ryan VanMarte, DC,MS. Currently in the process of completing the diplomat.

The Lyman Briggs School (LBS) at Michigan State University (MSU), East Lansing, MI
Environmental Science, members of the MSU College of Natural Science
Graduated December 2004, Bachelor of Science

Michigan State University, Study Abroad, United States Virgin Islands/British Virgin Islands

Natural Science and Environmental Issues
Winter – 2002

Kellogg Biological Center, Kalamazoo, MI
Ecology and in-the-field Ecology Lab
Summer – 2003

Professional Experience

Muscle and Movement Therapy, Cedarburg, WI 53012
Owner and Chiropractor
March 2016-Present

Fusion Gym, Glendale WI 53217

Personal Trainer

May 2013 – Present

- 1 on1 training
- Small group training
- Specialty classes in Kettle bell training, battle ropes, and lifting technique

Goodyear Health Center, Glendale, WI 53217

Chiropractic Physician and Physical Rehab specialist

August 2011-June 2017

- Patient care included a variety of manual therapies, joint mobilization/manipulation and active care
- Work with an intergrated team of MD, PT, LMT
- Directed care with chiropractic rehab assistance

- Taught and instructed team on various approaches and techniques to improve our overall care for patients.

Loranger Chiropractic Body Balance Center, Trenton, MI

February 2011-August 2011

Chiropractic Physician

Full time fill in position while Dr. Loranger was out on disability.

- Responsible for continued care of patients
- Introduction of active care and soft tissue work
- Responsible for day to day activities

Porter and Clark Chiropractic Flat Rock, MI

December 2008-August 2011

Chiropractic Physician

- Exams – functional and basic
- Chiropractic Manipulation
- Functional rehabilitation
- McKenzie MDT
- Community talks
- Sponsored local athletes
- Community Core class
- X-rays

National University of Health Sciences Research Dept. Lombard, IL

August 2007-December 2008

Research assistant

- Answering and calling patients for appointments and advertisement
- Assisting doctors with patients and protocol
- Baseline visits with patients
- Input of Data
- Stenosis study "Chiropractic Dosage for Lumbar Stenosis" utilizing Cox flexion distraction
- Spinal Manipulation study, comparing zygapophysial joints pre and post manipulation in acute care

Memberships and Affiliations

Member, Wisconsin Chiropractic Association, 2017- present

Member, Rehab 2 performance, 2010-present

Member, Michigan Association of Chiropractors, Lansing, MI 2005-2011

Member, American Chiropractic Association 2009-Present

Member, American Public Health Association 2008-Present

Member, International Society of Clinical Rehab Specialists 2009-present

Member, Michigan Public Health Association 2009-2011

Member, National Strength and Conditioning Association, 2010-present

Member, Student American Chiropractic Association (SACA), NUHS, Lombard, IL
2005 – 2008, treasurer 2007

Zeinert, Ryan - DSPS

From: Andrea Murray <awmurray@wichiro.org>
Sent: Friday, January 04, 2019 3:55 PM
To: Zeinert, Ryan - DSPS; DSPS
Cc: Andrea Murray
Subject: Emailing: CT Exercise Rehab Pre-Certification Course of Study_WCA_Jan 2019, Approval Request-CT Exercise Rehab 24 Hr _2019, CV, Steven Yeomans Brief, CV_Eric Kirk, CV_jsergent 2018

Attachments: CT Exercise Rehab Pre-Certification Course of Study_WCA_Jan 2019.docx; Approval Request-CT Exercise Rehab 24 Hr _2019.pdf; CV, Steven Yeomans Brief.pdf; CV_Eric Kirk.pdf; CV_jsergent 2018.pdf

Dear Ryan,
Please find attached a request for course approval for CT Exercise Rehab. Thank you for your consideration. Don't hesitate to let me know if you have questions or need additional information.

Regards,

--Andrea

Andrea Murray
WCA Education and Convention Manager
521 E. Washington Avenue
Madison WI 53703
P: 608-256-7023

Your message is ready to be sent with the following file or link attachments:

CT Exercise Rehab Pre-Certification Course of Study_WCA_Jan 2019
Approval Request-CT Exercise Rehab 24 Hr _2019
CV, Steven Yeomans Brief
CV_Eric Kirk
CV_jsergent 2018

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.