



CONTROLLED SUBSTANCES BOARD
Room N208, 4822 Madison Yards Way, 2nd Floor, Madison
Contact: Christian Albouras (608) 266-2112
July 12, 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 and deliberations of the Board.

AGENDA

10:30 A.M.

OR IMMEDIATELY FOLLOWING THE REFERRAL CRITERIA WORK GROUP MEETING
OPEN SESSION – CALL TO ORDER – ROLL CALL

- A. Adoption of Agenda**
- B. Approval of Minutes of May 10, 2019 (4-5)**
- C. Administrative Matters - Discussion and Consideration**
 - 1. Department, Staff and Board Updates
 - 2. Board Members
- D. Prescription Drug Monitoring Program (PDMP) Update – Discussion and Consideration**
 - 1. WI ePDMP Operations Update **(6-7)**
 - 2. ePDMP Outreach **(8-11)**
 - 3. Dispenser Compliance Status **(12)**
 - 4. Referral Criteria Work Group Report
- E. Legislative and Administrative Rule Matters – Discussion and Consideration (13)**
 - 1. Scheduling Brexanolone and Solriamfetol **(14)**
 - 2. CSB 3, Relating to Special Use Authorizations **(15-16)**
 - 3. CSB 4, Relating to Operation of the Prescription Drug Monitoring Program **(17-23)**
 - 4. Scope Statement Designating Gabapentin as a Monitored Controlled Substance
 - 5. Executive Order # 228 – Annual Law Enforcement Hearing Planning
 - 6. Legislation and Pending or Possible Rulemaking Projects
- F. Special Use Authorizations Application Procedures – Discussion and Consideration**
- G. Informational Items**
 - 1. 2019-2021 Fee and Credential Schedule **(24-31)**
- H. Board Member Reports**
 - 1. Medical Examining Board – Timothy Westlake
 - 2. Dentistry Examining Board – Leonardo Huck

3. Board of Nursing – Peter Kallio
4. Pharmacy Examining Board – John Weitekamp

I. Liaison Reports

1. SCAODA Liaison – Subhadeep Barman
2. Special Use Authorizations Liaisons – Yvonne Bellay and Alan Bloom

J. Special Use Authorizations – Discussion and Consideration

K. Discussion and Consideration of Items Received After Preparation of the Agenda:

1. Introductions, Announcements, and Recognition
2. Administrative Matters
3. Election of Officers
4. Appointment of Liaisons and Alternates
5. Delegation of Authorities
6. Informational Items
7. Division of Legal Services and Compliance (DLSC) Matters
8. Education and Examination Matters
9. Credentialing Matters
10. Practice Matters
11. Legislative and Administrative Rule Matters
12. Liaison Reports
13. Appearances from Requests Received or Renewed
14. Speaking Engagements, Travel, or Public Relations Requests, and Reports
15. Consulting with Legal Counsel

L. 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 individual histories or disciplinary data (s. 19.85(1)(f), Stats.); and to confer with legal counsel (s. 19.85(1)(g), Stats.).

M. Special Use Authorizations (SUA) – Discussion and Consideration

1. Jean Lord – SUA Renewal **(32-59)**

N. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

ADJOURNMENT

NEXT MEETING: SEPTEMBER 13, 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.

**CONTROLLED SUBSTANCES BOARD
MEETING MINUTES
MAY 10, 2019**

PRESENT: Subhadeep Barman (*arrived at 9:36 a.m.*), Alan Bloom (*arrived at 9:36 a.m.*), Doug Englebert, Leonardo Huck, Sandy Koresch, Timothy Westlake (*via teleconference*), and John Weitekamp

EXCUSED: Yvonne Bellay and Peter Kallio

STAFF: Christian Albouras, Executive Director; Sharon Henes, Administrative Rules Coordinator; Kate Stolarzyk, Bureau Assistant; and other DSPS Staff

CALL TO ORDER

Doug Englebert, Chairperson, called the meeting to order at 9:33 a.m. A quorum of five (5) members was confirmed.

ADOPTION OF AGENDA

MOTION: Leonardo Huck moved, seconded by John Weitekamp, to adopt the agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES OF MARCH 15, 2019

MOTION: Leonardo Huck moved, seconded by John Weitekamp, to approve the minutes of March 15, 2019 as published. Motion carried unanimously.

(Subhadeep Barman and Alan Bloom arrived at 9:36 a.m.)

PRESCRIPTION DRUG MONITORING PROGRAM (PDMP) UPDATE

Dispenser Compliance Audit Update

MOTION: John Weitekamp moved, seconded by Alan Bloom, to refer to the Pharmacy Examining Board any pharmacies that are not submitting data or zero reports to the PDMP as required under CSB 4.06, have not filed for an exemption as allowed under CSB 4.08, and have not replied to the previous two attempts to be brought into compliance. Motion carried unanimously.

LEGISLATIVE AND ADMINISTRATIVE RULE MATTERS

Adopt CR 18-055 Relating to Scheduling of Oral Solutions Containing Dronabinol

MOTION: Leonardo Huck moved, seconded by Subhadeep Barman, to approve the Adoption Order for Clearinghouse Rule 18-055, relating to scheduling of oral solutions containing dronabinol; Clearinghouse Rule 18-024, relating to excluding from scheduling naldemine; Clearinghouse Rule 18-023, relating to scheduling of ortho-fluorofentanyl; Clearinghouse Rule 18-022, relating to scheduling FUB-AMB; Clearinghouse Rule 18-069, relating to MT-45; and Clearinghouse Rule 18-070, relating to para-chloroisobutyryl fentanyl. Motion carried unanimously.

Scope CSB 2.66, Relating to Synthetic Cannabinoids

MOTION: Sandy Koresch moved, seconded by Leonardo Huck, to approve the Scope Statement revising CSB 2.66, relating to synthetic cannabinoids, for submission to the Department of Administration and Governor's Office and for publication. Additionally, the Board authorizes the Chair to approve the Scope Statement for implementation no less than 10 days after publication. Motion carried unanimously.

ADJOURNMENT

MOTION: Alan Bloom moved, seconded by Subhadeep Barman, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 11:00 a.m.

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Andrea Magermans		2) Date When Request Submitted: 7/2/2019 <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: Controlled Substances Board			
4) Meeting Date: 7/12/2019	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Prescription Drug Monitoring Program (PDMP) Update – Discussion and Consideration	
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: <ol style="list-style-type: none"> 1. WI ePDMP Operations Update <ol style="list-style-type: none"> a. Recent and Upcoming Releases b. Interstate data sharing <ol style="list-style-type: none"> i. RxCheck connection live with WA and UT ii. New states added or pending: DE, AL, ID iii. WI currently sharing data with 21 state PDMPs c. EHR Integration Status <ol style="list-style-type: none"> i. 14 health systems currently live; 44% of patient queries come from EHR ii. 3 health systems in testing: Aspirus (go-live mid July), HSHS (go-live mid July), Mercyhealth d. Quarterly Report Q2 2019 <ol style="list-style-type: none"> i. On track for delivery by July 30, as required by statute 2. WI ePDMP Outreach Calendar 3. Dispenser Compliance Audit Update 4. Referral Workgroup Update 			
11) Signature of person making this request Andrea Magermans 7/2/19		Authorization	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 ePDMP

2019 Development and Release Summary

updated 7.5.2019

	Description
R17 Feb 2020 (tentative)	New Design Enhancements <ul style="list-style-type: none">• Updated layout and design of Patient Report including alerts and dispensing details, based on user feedback• Additional data elements for Patients Panel• MME calculator• Better access to history of recent Patient Reports for Delegates• Additional data element on overdose alerts entered by law enforcement to capture administration of Naloxone
R16 Nov/Dec 2019 (tentative)	Pharmacy-Related Enhancements <ul style="list-style-type: none">• Improvements to workflow for error corrections/void• Display of Date Sold, if provided in the submission
R15 July/Aug 2019	User Management Enhancements <ul style="list-style-type: none">• Annual acceptance of Term and Conditions of the WI ePDMP• Renewal process for Medical Coordinator access to metrics• Periodic review of linked delegates
R14 April 2019	RxCheck <ul style="list-style-type: none">• Technical tasks to establish connection to RxCheck interstate data sharing hub
R12 and R13 March 2019	Data Quality Software Stability Work <ul style="list-style-type: none">• Technical tasks to simplify workflows and improve identification/resolution of workflow issues
R11 February 2019	DHS Extract <ul style="list-style-type: none">• Addition of patient geocode latitude and longitude Quality Assurance and Support Items

2019 - WI ePDMP Outreach Calendar

JANUARY		FEBRUARY		MARCH	
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
6		6		6	
7		7		7	
8		8		8	
9		9		9	
10		10		10	
11		11		11	
12		12		12	
13		13		13	<ol style="list-style-type: none"> 1. PSW Legislative Day 2. WHA Physician Leaders Council
14	Platteville Roundtable	14		14	
15		15		15	
16		16		16	
17		17		17	
18		18		18	DHS OTP Business Meeting
19		19		19	<ol style="list-style-type: none"> 1. DHS Opioid Forum 2. DOJ DCI Narcotics Investigators School
20		20		20	DHS Opioid Forum
21		21		21	
22		22		22	
23		23		23	
24		24		24	
25		25		25	
26		26		26	
27		27		27	
28		28		28	
29				29	
30				30	
31				31	

2019 – WI ePDMP Outreach Calendar

APRIL		MAY		JUNE	
1		1		1	
2		2	RxCheck Meeting-Washington, DC	2	
3		3	RxCheck Meeting-Washington, DC	3	
4	Law Enforcement Training-M Marshfield	4		4	
5		5		5	
6		6		6	
7		7		7	
8		8		8	
9		9		9	
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15		15		15	
16		16		16	
17		17		17	
18		18		18	
19		19		19	
20		20		20	
21		21	Waukesha County Heroin Task Force presentation	21	
22	Rx Abuse Summit - Atlanta	22		22	
23	Rx Abuse Summit - Atlanta	23		23	
24	Rx Abuse Summit - Atlanta	24		24	
25	Rx Abuse Summit - Atlanta	25		25	
26		26		26	Harold Rogers National PDMP Meeting-Washington, DC
27		27		27	Harold Rogers National PDMP Meeting-Washington, DC
28		28		28	
29		29		29	
		30		30	
		31			

2019 - WI ePDMP Outreach Calendar

JULY		AUGUST		SEPTEMBER	
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
6		6		6	
7		7	Winnebago County Overdose Fatality Review Meeting	7	
8		8	Milwaukee County Behavioral Health Division Provider Meeting	8	
9		9		9	
10		10		10	
11		11		11	
12		12		12	WI DOJ Crime Information Bureau Conference (Green Bay)
13		13		13	
14		14		14	
15		15		15	
16		16		16	
17		17		17	
18		18		18	
19		19		19	PDMP Training for Dental Providers (Eau Claire)
20		20		20	
21		21		21	
22		22		22	
23		23		23	
24		24		24	
25		25		25	
26		26	Hope Consortium Conference (Rhinelander)	26	
27		27	Hope Consortium Conference (Rhinelander)	27	
28		28		28	
29		29		29	
30		30		30	
31		31			

2019 - WI ePDMP Outreach Calendar

OCTOBER		NOVEMBER		DECEMBER	
1		1		1	
2		2		2	
3		3		3	
4		4		4	
5		5		5	
6		6		6	
7		7		7	
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10		10		10	
11		11		11	
12		12		12	
13		13		13	
14		14		14	
15	WI DOJ Opioid/Meth Forum (Lake Geneva)	15		15	
16	WI DOJ Opioid/Meth Forum (Lake Geneva)	16		16	
17		17		17	
18		18		18	
19		19		19	
20		20		20	
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31				31	

Wisconsin ePDMP Dispenser Compliance Audit Update

updated 6.21.2019

June 2019 audit of PDMP Dispenser Compliance, based on submissions in May 2019

Total licensed pharmacies	2,358
Total non-exempt pharmacies	1,654
In-state non-exempt pharmacies	1,101
In-state non-exempt with submissions	1,071
In-State Compliance Percentage	97.28%
In-state with no submissions in May	30
Out-of-state non-exempt pharmacies	553
Out-of-state non-exempt with submissions	448
Out-of-State Compliance Percentage	81.01%
Out-of-state with no submissions in May	105
Total Compliance Percentage (All Non-Exempt Pharmacies)	91.84%
Non-compliant pharmacies in May	135
Non-compliant pharmacies referred to PEB in June 2019, based on motion from May 10, 2019 meeting (May audit of April submissions)	46 (4 in-state)
Non-compliant pharmacies in May having received two previous communications (to be referred to PEB)	17
Non-compliant pharmacies in May to receive second communication	20
Non-compliant pharmacies in May to receive initial communication	54

MOTION from 5/10/19: John Weitekamp moved, seconded by Alan Bloom, to refer to the Pharmacy Examining Board any pharmacies that are not submitting data or zero reports to the PDMP as required under CSB 4.06, have not filed for an exemption as allowed under CSB 4.08, and have not replied to the previous two attempts to be brought into compliance. Motion carried unanimously.

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

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Sharon Henes Administrative Rules Coordinator		2) Date When Request Submitted: 28 June 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: Controlled Substances Board			
4) Meeting Date: 12 July 2019	5) Attachments: <input type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Legislative and Administrative Rule Matters 1. Scheduling Brexanolone and Solriamfetol 2. CSB 3 Relating to Special Use Authorizations 3. CSB 4 Relating to Operation of the Prescription Drug Monitoring Program 4. Legislation and Pending or Possible Rulemaking Projects	
7) Place Item in: <input type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:			
11) Authorization			
<i>Sharon Henes</i>		6/28/19	
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	
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STATE OF WISCONSIN
CONTROLLED SUBSTANCES BOARD

IN THE MATTER OF RULE-MAKING : AFFIRMATIVE ACTION
PROCEEDINGS BEFORE THE : ORDER OF THE
CONTROLLED SUBSTANCES BOARD : CONTROLLED SUBSTANCES BOARD

FINDINGS

1. On June 17, 2019, the Department of Justice, Drug Enforcement Administration published its final rules in the Federal Register placing Brexanolone and Solriamfetol into schedule IV of the federal Controlled Substances Act. The scheduling actions are effective June 17, 2019.
2. The Controlled Substances Board did not receive an objection to similarly treating Brexanolone and Solriamfetol as schedule IV under ch. 961, Stats. within 30 days of the date of publication in the federal register of the final order designating Brexanolone and Solriamfetol as controlled substances.
3. The Controlled Substances Board will promulgate a final rule, without making the determinations or findings required by ss. 961.11(1), (1m), (1r) and (2) or s. 961.19 and omitting the notice of proposed rule making, designating Brexanolone and Solriamfetol as schedule IV controlled substances.

ORDER

Pursuant to s. 961.11(4), Stats., the Controlled Substances Board by affirmative action similarly treats Brexanolone and Solriamfetol under chapter 961, Stats. by creating the following:

CSB 2.67 Addition of Brexanolone and Solriamfetol to schedule IV. Section 961.20 (2) (p) and (2m) (g), Stats., are created to read:

961.20 (2) (p) Brexanolone.
(2m) (g) Solriamfetol.

This order shall take effect on July 22, 2019 to allow for publication in the Administrative Register. The order expires upon promulgation of a final rule.

Dated _____

Doug Englebert, Chair
Controlled Substances Board

Chapter CSB 3

SPECIAL USE AUTHORIZATION

CSB 3.01	Authority.
CSB 3.02	Definitions.
CSB 3.03	Permits generally.
CSB 3.04	SUA permit application.
CSB 3.045	Limited special use authorization.

CSB 3.05	Limitations on narcotic dog trainer drugs and drug quantities.
CSB 3.06	Amendment.
CSB 3.07	Record-keeping; records retention; disclosure.
CSB 3.08	Violations.

CSB 3.01 Authority. The provisions in this chapter are adopted under the authority in s. 961.335 (8), Stats.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

CSB 3.02 Definitions. In this chapter:

- (1) "Board" means the controlled substances board.
- (2) "Controlled substance" has the meaning given in s. 961.01 (4), Stats.
- (3) "Humane shelter" means a facility that is intended to provide for and promote the welfare, protection, shelter, and humane treatment of animals, and that is operated by a humane society, animal welfare society, animal rescue group or other non-profit group. "Humane shelter" includes a shelter that provides foster care to animals.
- (4) "Special use" means to manufacture, obtain, possess, use, administer, or dispense a controlled substance for purposes that include, but are not limited to, scientific research, instructional activities, chemical analysis, drug-detecting animal training, and euthanasia in humane shelters.
- (5) "Special use authorization" or "SUA" means permission from the board to manufacture, obtain, possess, use, administer, or dispense a controlled substance for a special use.
- (6) "SUA permit" means a special use authorization permit granted to an individual by the board.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

CSB 3.03 Permits generally. (1) No individual may manufacture, obtain, possess, use, administer, or dispense a controlled substance for a special use without a valid SUA permit for such purpose.

(2) An SUA permit may be issued to an individual only. Entities are not eligible to receive an SUA permit, except that an individual may be designated and authorized to receive the permit for a college or university department, research unit, or similar administrative organization unit. Students, laboratory technicians, research specialists, or chemical analysts under the designee's supervision may possess and use the substances named in the designee's permit for the authorized purposes without obtaining an individual permit.

(3) An SUA permit authorizes the holder to manufacture, obtain, possess, use, administer, or dispense the controlled substances specified in the permit and in the amounts specified in the permit. A permit holder shall use the authorized controlled substances only in the manner delineated in the SUA permit application, and as approved by the board. Any deviation from the permit's specifications and subsequent amendments shall constitute a violation of the permit, and may result in revocation or suspension of the permit as set forth in s. CSB 3.08 (2).

(4) An SUA permit is valid for one year from the date of issuance. An SUA permit shall not be extended or renewed. A new application shall be completed and a new permit shall be granted to continue authorization beyond an existing permit's expiration date.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

CSB 3.04 SUA permit application. (1) Every applicant for an SUA permit shall:

(a) Submit a completed application and any required checklists using forms provided by the board. A complete application shall include a detailed description of the anticipated uses for each identified controlled substance in Schedules I to V of ch. 961, Stats., including each identified controlled substance by name and schedule and the protocols for such uses.

Note: Application forms and checklists are available upon request to the board office at 1400 E. Washington Ave., P.O. Box 8935, Madison, Wisconsin 53708, or online at <http://dsps.wi.gov>, under "Professions," then "Controlled Substance Special Use Authorization."

(b) Pay the applicable permit fee of \$25 as set forth in s. 961.335, Stats. No fee for an SUA permit may be charged to an employee of a state agency or institution if the permit is necessary to perform employment functions.

(c) Provide proof that the applicant has submitted an application for registration with the federal drug enforcement administration.

(d) Provide proof of the applicant's compliance with the board's requirements for maintaining the physical security of the controlled substances identified in the application.

(e) Provide the calculations that led to the amounts requested in the application.

(f) Any individual applying for an SUA permit shall provide any other information or documentation requested by the board.

(2) In addition to sub. (1), researchers shall also provide the following:

(a) A detailed one-page description of each research protocol that involves the use of controlled substances.

(b) For research involving animals, verification of Institutional Animal Care and Use Committee approval.

(c) For research involving human subjects, verification of Institutional Review Board approval.

(3) In addition to sub. (1), humane shelters shall also provide all of the following:

(a) Estimates as to the number of animals and dosage per animal.

(b) Documentation of completion of a board-approved euthanasia by injection course by each staff member performing euthanasia.

(4) In addition to sub. (1), narcotic dog trainers shall also provide the following:

(a) Unless other documentation is required by the board, a letter from the sheriff or chief of police, in the jurisdiction where the controlled substances are stored, that includes all of the following for dog training purposes:

1. Authorizing possession of controlled substances.
2. Accepting responsibility for the narcotic dog trainer.
3. Agreeing to supervise the narcotic dog trainer's storage and use of controlled substances.

(b) Verification of membership in a board-approved national or Wisconsin police dog association for each narcotic dog trainer.

(c) For private narcotic dog trainers, an appearance before the board shall be required.

(5) In addition to sub. (1), municipal law enforcement animal control shall also provide all of the following:

(a) Unless other documentation is required by the board, a letter from the sheriff or chief of police, in the jurisdiction where the controlled substances are stored, that includes all of the following for euthanasia purposes:

1. Authorizing possession of controlled substances.
2. Accepting responsibility for the animal control officer.
3. Agreeing to supervise the animal control officer's storage and use of controlled substances.

(b) Documentation of completion of a board-approved euthanasia course by the officer performing euthanasia.

(6) In addition to sub. (1), analytical labs shall also provide all of the following:

(a) An inventory listing the total weight in grams if solid, or volume and concentration if liquid, of each controlled substance in the lab or intended for purchase for the lab.

(b) Whenever the lab purchases or otherwise adds to its inventory a new controlled substance or an additional amount of a controlled substance that was not previously authorized in a permit, an amended SUA application that includes the total weight in grams if solid, or volume and concentration if liquid, for each such new or additional substance.

(c) A detailed description of standard operating procedures relating to the use of controlled substances that includes the receipt, use, and disposition of controlled substances.

(7) The board may request an appearance before the board if additional information is required.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12; CR 15-083: am. (6) (a), (b) Register August 2016 No. 728, eff. 9-1-16.

CSB 3.045 Limited special use authorization. The board may grant a limited SUA or deny a SUA based upon consideration of public health and safety including any of the following reasons:

(1) An act constituting a violation under s. CSB 3.08 (1).

(2) Making any materially false statement or giving any materially false information in connection with an application for a SUA.

(3) Violating any federal or state statute or rule which substantially relates to the ability to manufacture, obtain, possess, use, administer, or dispense a controlled substance for a special use.

(4) An act which shows the person to be unable to safely use the SUA permit due to alcohol or other substance use.

History: CR 14-009: cr. Register July 2014 No. 703, eff. 8-1-14; correction in (title) made under s. 13.92 (4) (b) 2., Stats., Register July 2014 No. 703.

CSB 3.05 Limitations on narcotic dog trainer drugs and drug quantities. (1) Narcotic dog trainers shall be limited to having possession of the following drugs and quantities at any given time during the permit period:

(a) Up to 2 kilograms of marijuana. Marijuana may require periodic replacement during the permit period. Total use per year, taking into account replacement, shall be requested.

(b) Up to 30 grams of cocaine.

(c) Up to 30 grams of cocaine base, commonly known as crack cocaine.

(d) Up to 30 grams of heroin.

(e) Up to 30 grams of methamphetamine.

(2) A trainer may request, and the board may approve, with appropriate justification by the trainer, other controlled substances or different quantities of controlled substances.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

CSB 3.06 Amendment. (1) A permit shall be effective only for the individual, substances, and project specified on its face and for additional projects which derive directly from the stated project. An individual holding a valid SUA permit may apply for an amendment to the permit by filing a written request with the board indicating the justification for the amendment and by paying a \$5 fee. The board may approve a request to amend a permit for any of the following reasons:

(a) A change to the original permit holder.

(b) The addition of new individuals to the permit who are participating in the functions for which the authorization was approved.

(c) An increase in the amount of a previously authorized controlled substance.

(d) The addition of specific controlled substances or schedules not previously authorized.

(e) The addition of further activity in accordance with s. 961.335 (5), Stats.

(2) An application for an amendment shall be submitted to the department and approved by the board prior to a permit holder operating under the terms of the amendment.

(3) Individuals applying for an amendment shall provide any other information or documentation requested by the board including information and documentation related to previous special use authorization permits.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

CSB 3.07 Record-keeping; records retention; disclosure. (1) A permit holder shall maintain updated and accurate records of all of the following:

(a) The purchase of controlled substances pursuant to the permit, including receipts.

(b) The disbursement, use, and disposition of all controlled substances authorized by the permit.

(c) The total weight in grams if solid, or volume and concentration if liquid, of each controlled substance on hand.

(d) Documentation related to any discrepancies in a controlled substance inventory and usage, and all documentation related to investigation of such discrepancies.

(2) A permit holder shall retain the records described in sub. (1) for 4 years after the expiration of the special use authorization permit.

(3) A permit holder shall provide copies of the original records upon request of the board or the department of safety and professional services, except for those that are protected from disclosure by s. 961.335 (7), Stats.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12; CR 15-083: am. (1) (c) Register August 2016 No. 728, eff. 9-1-16.

CSB 3.08 Violations. (1) The following acts shall constitute a violation of an SUA permit:

(a) Any deviation from the permit's specifications related to controlled substances, schedules of drugs, or amounts authorized.

(b) Failure to comply with this chapter or s. 961.335, Stats.

(c) Failure to maintain physical security requirements for controlled substances as required by state and federal law.

(d) Failure to comply with board-approved euthanasia standards.

Note: The board considers the most current version of the euthanasia standards as stated in the American Veterinary Medical Association (AVMA) panel on euthanasia available at <http://www.avma.org>.

(e) Failure to notify the board of the revocation or limitation of a drug enforcement administration registration, within 3 business days of the revocation or limitation.

(2) Any violation of a special use authorization permit may, in the board's discretion, result in the suspension or revocation of the special use authorization permit.

History: CR 12-010: cr. Register October 2012 No. 682, eff. 11-1-12.

Chapter CSB 4

PRESCRIPTION DRUG MONITORING PROGRAM

<p>CSB 4.01 Authority and scope. CSB 4.02 Definitions. CSB 4.03 Drugs that have a substantial potential for abuse. CSB 4.04 Compilation of dispensing data. CSB 4.05 Electronic submission of dispensing data. CSB 4.06 Frequency of submissions. CSB 4.07 Correction of dispensing data. CSB 4.08 Exemptions from compiling and submitting dispensing data. CSB 4.09 Access to monitored prescription drug history reports and PDMP data about a patient. CSB 4.093 Monitored prescription drug history reports and audit trails about</p>	<p>healthcare professionals. CSB 4.097 Deny, suspend, revoke or otherwise restrict or limit access. CSB 4.10 Requests for review. CSB 4.105 Practitioners' requirement to review monitored prescription drug history reports. CSB 4.11 Methods of obtaining monitored prescription drug history reports. CSB 4.12 Use of PDMP data by the board and department. CSB 4.13 Confidentiality of PDMP records. CSB 4.14 Exchange of PDMP data. CSB 4.15 Disclosure of suspicious or critically dangerous conduct or practices.</p>
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Note: Chapter Phar 18 was renumbered chapter CSB 4 under s. 13.92 (4) (b) 1., Stats., Register September 2015 No. 717.

CSB 4.01 Authority and scope. The rules in this chapter are adopted under authority in ss. 227.11 (2) (a) and 961.385, Stats., for the purpose of creating a prescription drug monitoring program to collect and disclose information relating to the prescribing and dispensing of monitored prescription drugs.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; correction made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; EmR1706: emerg. am., eff. 4-1-17; CR 17-028: am. Register December 2017 No. 744, eff. 1-1-18.

CSB 4.02 Definitions. As used in this chapter:

(1) "Access" means to have the ability to view monitored prescription drug history reports, audit trails, and PDMP data as authorized by s. CSB 4.09.

(2) "Administer" has the meaning given in s. 961.385 (1) (a), Stats.

(2m) "Agent" has the meaning given in s. 961.385 (1) (ab), Stats.

(3) "Animal" has the meaning given in s. 89.02 (1m), Stats.

(3m) "ASAP" means the American Society for Automation in Pharmacy.

Note: Contact: American Society for Automation in Pharmacy, 492 Norristown Road, Suite 160; Blue Bell, PA 19422; phone: (610) 825-7783; fax: (610) 825-7641; webpage: <http://asapnet.org/index.html>.

(3s) "Audit trail" means the log that contains information about each time the PDMP system discloses PDMP data, monitored prescription drug history reports, and prescribing metrics reports.

(4) "Board" means the Controlled Substances Board.

(4m) "Business day" has the meaning given in s. 961.385 (1) (ad), Stats.

(5) "Controlled substance" means a drug, substance, analog, or precursor described in any of the following:

(a) Schedule I, II, III, IV, or V in the federal controlled substances act, 21 USC 812 (b) (1) to (b) (5) and (c), as changed and updated by 21 CFR 1308.

(b) Schedule I, II, III, IV, or V in subch. II of ch. 961, Stats., as amended by ch. CSB 2.

(5m) "Deliver" or "delivery" has the meaning in s. 961.385 (1) (ae), Stats.

(6) "Department" means the department of safety and professional services.

(7) "Dispense" has the meaning given in s. 961.385 (1) (af), Stats.

(8) "Dispenser" means all of the following:

(a) A pharmacy.

Note: A site of remote dispensing authorized under s. 450.062, Stats., and s. Phar 7.095 is under the supervision of a pharmacy.

(b) A practitioner who dispenses a monitored prescription drug.

(9) "Dispenser delegate" means any of the following:

(a) A managing pharmacist of a pharmacy.

(b) An agent or employee of a practitioner who has been delegated the task of satisfying the data compilation and submission requirements of ss. CSB 4.04 and 4.05.

(10) "Dispensing data" means data compiled pursuant to s. CSB 4.04.

(11) "Drug" has the meaning given in s. 450.01 (10), Stats.

(11c) "Healthcare Professional" means a pharmacist, practitioner, registered nurse licensed under s. 441.06, Stats., substance abuse counselor, as defined in s. 440.88 (1) (b), Stats., or individual authorized under s. 457.02 (5m), Stats., to treat alcohol or substance dependency or abuse as a specialty.

(11g) "Hospital" has the meaning given in s. 50.33 (2), Stats.

(11n) "Law enforcement agency" has the meaning given in s. 165.77 (1) (b), Stats.

(11r) "Managing pharmacist" means a pharmacist designated by the pharmacy owner to have responsibility for and direct control of pharmaceutical operations in a pharmacy.

(11w) "Medical coordinator" means a person who medically coordinates, directs, supervises, or establishes standard operating procedures for a healthcare professional.

(12) (a) "Monitored prescription drug" means all of the following:

1. A controlled substance included in s. 961.385 (1) (ag), Stats.

2. A drug identified by the board as having a substantial potential for abuse in s. CSB 4.03.

(b) "Monitored prescription drug" does not mean a controlled substance that by law may be dispensed without a prescription order.

(12m) "Monitored prescription drug history report" means all of the following information about a patient, patient address, practitioner, or dispenser compiled by the PDMP system and disclosed as authorized in ss. CSB 4.09 and 4.11:

(a) PDMP data.

(b) Reports submitted to the program pursuant to s. 961.37, Stats.

(c) Information submitted to the program by a healthcare professional.

(d) Information from the analytics platform.

(13) "Patient" has the meaning given in s. 961.385 (1) (aj), Stats.

(14e) "PDMP" means the Wisconsin prescription drug monitoring program.

(15) "PDMP data" means the information compiled and analyzed by the PDMP system from dispensing data submitted to it by dispensers

(15b) “PDMP system” means the web-based application, analytics platform, and all related hardware and software that facilitates the submission of dispensing data and the access to and disclosure of PDMP data, monitored prescription drug history reports, audit trails, and prescribing metrics reports.

(15e) “Personally identifiable information” means information that can be associated with a particular person through one or more identifiers or other information or circumstances.

(15g) “Pharmacist” has the meaning given in s. 961.385 (1) (aL), Stats. For the purposes of this program, the board recognizes a pharmacist licensed by another state that engages in the practice of pharmacy within the contiguous borders of this state or who practices at a pharmacy licensed under s. 450.065, Stats. as a person authorized to engage in the practice of pharmacy.

(15r) “Pharmacist delegate” means an agent of a pharmacist to whom the pharmacist has delegated the task of accessing monitored prescription drug history reports.

(16) “Pharmacy” has the meaning given in s. 961.385 (1) (an), Stats., including a pharmacy that chooses to solely dispense to animal patients.

(17) “Practitioner” has the meaning given in s. 961.385 (1) (ar), Stats. For the purposes of this program, the board recognizes a practitioner licensed by another state that engages in the practice of their credentialed profession within the contiguous borders of this state as a person authorized to prescribe and administer drugs.

(18) “Practitioner delegate” means an agent of a practitioner to whom the practitioner has delegated the task of accessing monitored prescription drug history reports.

(18m) “Prescribing metrics report” means all of the following information about a practitioner compiled by the PDMP system and disclosed as authorized in s. CSB 4.09:

(a) PDMP data.

(b) Audit trails.

(c) Reports submitted to the program pursuant to s. 961.37, Stats., about a patient to whom the practitioner has issued a prescription order.

(d) Information from the analytics platform.

(19) “Prescription” has the meaning given in s. 450.01 (19), Stats.

(20) “Prescription order” has the meaning given in s. 961.385 (1) (b), Stats.

(21) “Program” means the prescription drug monitoring program established under this chapter.

(21m) “Prosecutorial unit” has the meaning given in s. 978.001 (2), Stats.

(23) “Zero report” means a report that indicates that a dispenser has not dispensed a monitored prescription drug since the previous submission of dispensing data or a zero report.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; correction in (5) (b) made under s. 13.92 (4) (b) 7., Stats., Register October 2012 No. 682; CR 13-065: cr. (3m), (13e), am. (16), (17), r. (22) Register February 2014 No. 698, eff. 3-1-14; (13e) renum. to (14e) under s. 13.92 (4) (b) 1., Stats., Register February 2014 No. 698; correction in (17) made under s. 13.92 (4) (b) 7., Stats., Register February 2014 No. 698; CR 14-003: am. (8) (a), renum. (9) to (9) (intro.) and am., cr. (9) (a), (b), (11g), (11r), am. (15) (intro.), cr. (15g), (15r), am. (17) Register August 2014 No. 704, eff. 9-1-14; correction in (3), (9) (b), (10), (12) (a) 1., 2., (15) (b), (15g), (17), (20) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; CR 15-101: am. (4) Register June 2016 No. 726, eff. 7-1-16; EmR1706: emerg. am. (1), (2), cr. (2m), (3s), (4m), (5m), am. (7), cr. (11c), (11n), am. (11r), cr. (11w), am. (12) (a) 1., cr. (12m), am. (13), r. (14), cons. and renum. (15) (intro.) and (a) to (15) and am., r. (15) (b), cr. (15b), (15e), am. (15g), (15r), (16), (17), (18), cr. (18m), (21m), eff. 4-1-17; CR 17-028: am. (1), (2), cr. (2m), (3s), (4m), (5m), am. (7), cr. (11c), (11n), am. (11r), cr. (11w), am. (12) (a) 1., cr. (12m), am. (13), r. (14), cons. and renum. (15) (intro.) and (a) to (15) and am., r. (15) (b), cr. (15b), (15e), am. (15g), (15r), (16), (17), (18), cr. (18m), (21m) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.03 Drugs that have a substantial potential for abuse. Pursuant to s. 961.385 (1) (ag), Stats., the board has identified all of the following drugs as having a substantial potential for abuse:

(1) A controlled substance identified in schedule II, III, IV or V in the federal controlled substances act, 21 USC 812 (b) (2) to (b) (5) and (c), as changed and updated by 21 CFR 1308.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; correction in (2) made under s. 13.92 (4) (b) 7., Stats., Register October 2012 No. 682; CR 13-065: am. (intro.) Register February 2014 No. 698, eff. 3-1-14; correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register February 2014 No. 698; correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; CR 15-101: r. (3) Register June 2016 No. 726, eff. 7-1-16; EmR1706: emerg. r. (2), eff. 4-1-17; CR 17-028: r. (2) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.04 Compilation of dispensing data. (1) As used in this section:

(a) “DEA registration number” means the registration number issued to a dispenser or practitioner by the federal department of justice, drug enforcement administration.

(c) “NDC number” means national drug code number, the universal product identifier used in the U.S. to identify a specific drug product.

(2) Subject to s. CSB 4.08, a dispenser shall compile dispensing data that contains all of the following information each time the dispenser dispenses a monitored prescription drug:

(a) The dispenser’s full name.

(b) The dispenser’s DEA registration number.

(c) The date dispensed.

(d) The prescription number.

(e) The NDC number of the monitored prescription drug.

(f) The quantity dispensed.

(g) The estimated number of days of drug therapy.

(ge) The classification code for payment type.

(gm) The number of refills authorized by the prescriber.

(gs) The refill number of the prescription.

(h) The practitioner’s full name.

(i) The practitioner’s DEA registration number.

(j) The date prescribed.

(L) The patient’s full name or if the patient is an animal, the animal’s name and the owner’s last name.

(m) The patient’s address, or if the patient is an animal, patient’s owner’s address, including street address, city, state, and ZIP code.

(n) The patient’s date of birth, or if the patient is an animal, patient’s owner’s date of birth.

(o) The patient’s gender.

(p) The name recorded under s. 450.11 (1b) (bm), Stats.

(4) The board may refer a dispenser and dispenser delegate that fail to compile dispensing data as required by sub. (2) to the appropriate licensing or regulatory board for discipline.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 13-065: am. (1) (b), (e), (3) (b), (d), (i), (k) Register February 2014 No. 698, eff. 3-1-14; CR 14-003: am. (title), renum. (2) to (2) (intro.) and am., cr. (2) (ge), (gm), (gs), renum. (3) (a) to (g) and (h) to (j) to (2) (a) to (g) and (h) to (j), r. (3) (k), renum. (3) (L) to (o) to (2) (L) to (o) and am. (L) to (n), am. (4) Register August 2014 No. 704, eff. 9-1-14; correction in (2) (intro.) made under s. 35.17, Stats., and in (4) made under s. 13.92 (4) (b) 7., Stats., Register August 2014 No. 704; correction in (2) (intro.) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; CR 15-070: cr. (2) (p) Register April 2016 No. 724, eff. 4-9-17; numbering correction in (2) (p) under s. 13.92 (4) (b) 1. Register April 2016 No. 724; republished to correct CR 15-070: cr. (2) (p) effective date Register May 2016 No. 725; EmR1706: emerg. r. (1) (b), (d), (e), am. (2) (b), (e), (i), (4), eff. 4-1-17; CR 17-028: r. (1) (b), (d), (e), am. (2) (b), (e), (i), (4) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.05 Electronic submission of dispensing data. (1) Unless exempt under s. CSB 4.08, a dispenser shall electronically submit dispensing data to the PDMP in any of the following ways:

(a) As a file that complies with the data standards identified in version 4 and release 2 of ASAP implementation guide for prescription monitoring programs.

(b) Using the prescription record entry functions of the PDMP system.

Note: The guide for dispensers which specifies the data standards in version 4 release 2 of the ASAP implementation guide for prescription monitoring programs and other electronic formats identified by the board may be obtained online at <https://pdmp.wi.gov> or obtained at no charge from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8366, Madison, WI 53708.

(4) The board may refer a dispenser and dispenser delegate that fail to submit dispensing data as required by sub. (1) to the appropriate licensing or regulatory board for discipline.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 13-065: am. (2) Register February 2014 No. 698, eff. 3-1-14; CR 14-003: am. (1), (4) Register August 2014 No. 704, eff. 9-1-14; correction in (intro.) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; EmR1706: emerg. renum. (1) to (1) (intro.), cr. (1) (a), (b), (3), r. and recr. (4), eff. 4-1-17; CR 17-028: renum. (1) to (1) (intro.), cr. (1) (a), (b), (r. (2), (3), r. and recr. (4) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.06 Frequency of submissions. (1) A dispenser shall submit dispensing data to the PDMP no later than 11:59 p.m. of the next business day after the monitored prescription drug is dispensed.

(2) If a dispenser does not dispense a monitored prescription drug on a business day, the dispenser shall submit no later than 11:59 p.m. of the next business day a zero report to the PDMP that accounts for each business day on which the dispenser did not dispense a monitored prescription drug.

(3) If a dispenser is not able to submit dispensing data zero report before 11:59 p.m. of the next business day as required by subs. (1) or (2), the board may grant an emergency waiver to a dispenser who satisfies all of the following conditions:

(a) The dispenser is not able to submit dispensing data or a zero report because of circumstances beyond its control.

(b) The dispenser files with the board a written application for an emergency waiver on a form provided by the board prior to the required submission of dispensing data or zero report.

Note: The application for an emergency waiver may be obtained online at www.dsp.wi.gov or obtained at no charge from the Department of Safety and Professional Services, 1400 East Washington Avenue, P.O. Box 8366, Madison, WI 53708.

(4) Unless otherwise specified by the board, an emergency waiver granted under sub. (3) shall only be effective for 7 days.

(5) The board may refer a dispenser and dispenser delegate that fail to submit dispensing data or a zero report as required by subs. (1) and (2), or be granted an emergency waiver under sub. (3), or a dispenser and a dispenser delegate that submit false information to the PDMP to the appropriate licensing or regulatory board for discipline.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 13-065: am. (1), (2), (3) (intro.), r. (4) to (6), (9), renum. (7) to (4) and am., renum. (8) to (5) Register February 2014 No. 698, eff. 3-1-14; CR 14-003: am. (2), (5) Register August 2014 No. 704, eff. 9-1-14; EmR1706: emerg. am. (1), (2), (3), (5), eff. 4-1-17; CR 17-028: am. (1), (2), (3), (5) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.07 Correction of dispensing data. (1) A dispenser shall electronically correct dispensing data in the PDMP system within 5 business days of discovering an omission, error, or inaccuracy in previously submitted dispensing data.

(2) The board may refer a dispenser and dispenser delegate that fail to correct dispensing data as required by sub. (1) to the appropriate licensing or regulatory board for discipline.

Note: The written notice to the board may be submitted through an account with the board, sent by electronic mail or sent by U.S. mail to the Department of Safety and Professional Services 1400 East Washington Avenue, P.O. Box 8366, Madison, WI 53708.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: am. Register August 2014 No. 704, eff. 9-1-14; EmR1706: emerg. r. and recr. eff. 4-1-17; CR 17-028: r. and recr. Register December 2017 No. 744, eff. 1-1-18.

CSB 4.08 Exemptions from compiling and submitting dispensing data. (1) The board shall exempt a dispenser from compiling and submitting dispensing data and from submitting a zero report as required under this chapter until the dispenser is required to renew its license, or until the dispenser dispenses a monitored prescription drug, if the dispenser satisfies all of the following conditions:

(a) The dispenser provides evidence sufficient to the board that the dispenser does not dispense monitored prescription drugs.

(b) The dispenser files with the board a written request for exemption on a form provided by the board.

Note: The application for an exemption may be obtained online at www.dsp.wi.gov or at no charge from the Department of Safety and Professional Services 1400 East Washington Avenue, P.O. Box 8366, Madison, WI 53708. A dispenser who is already exempt can renew his or her exemption as part of the licensure renewal process.

(2) A dispenser is not required to compile or submit dispensing data when the monitored prescription drug is administered directly to a patient.

(2m) A dispenser is not required to compile or submit dispensing data when the monitored prescription drug is compounded, packaged, or labeled in preparation for delivery but is not delivered.

(3) A dispenser is not required to compile or submit dispensing data when the monitored prescription drug is a substance listed in the schedule in s. 961.22, Stats., and is not a narcotic drug, as defined in s. 961.01 (15), Stats., and is dispensed pursuant to a prescription order for a number of doses that is intended to last the patient 7 days or less.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: am. (1) (a), cr. (3) Register August 2014 No. 704, eff. 9-1-14; CR 15-101: am. (1) Register June 2016 No. 726, eff. 7-1-16; EmR1706: emerg. cr. (2m), eff. 4-1-17; CR 17-028: cr. (2m) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.09 Access to monitored prescription drug history reports and PDMP data about a patient.

(1) Healthcare professionals may access monitored prescription drug history reports about a patient for any of the following reasons:

(a) The healthcare professional is directly treating or rendering assistance to the patient.

(b) The healthcare professional is being consulted regarding the health of the patient by an individual who is directly treating or rendering assistance to the patient.

(2) Pharmacist delegates and practitioner delegates may access monitored prescription drug history reports about a patient for any of the following reasons:

(a) A pharmacist or practitioner who is directly treating or rendering assistance to the patient has delegated the task of obtaining monitored prescription drug history reports about the patient to the pharmacist delegate or practitioner delegate.

(b) A pharmacist or practitioner who is being consulted regarding the health of the patient by an individual who is directly treating or rendering assistance to the patient has delegated the task of obtaining monitored prescription drug history reports about the patient to the pharmacist delegate or practitioner delegate.

(3) Healthcare professionals, pharmacist delegates, and practitioner delegates may only disclose a monitored prescription drug history report about a patient obtained pursuant to sub. (1) or (2) in the following situations:

(a) To the patient as part of treating or rendering assistance to the patient.

(b) To another healthcare professional or a medical coordinator for consultation about the health of the patient or as part of treating or rendering assistance to the patient.

(c) To the pharmacist or practitioner who is directly treating or rendering assistance to the patient.

(d) To a law enforcement agency as required by s. 146.82, Stats.

(4) To obtain access to monitored prescription drug history reports as authorized in subs. (1) and (2), healthcare professionals, pharmacist delegates, and practitioner delegates shall do one of the following:

(a) Create an account with the PDMP system.

(b) Create an account with a prescription monitoring program operated by a relevant agency in another jurisdiction with which

the board exchanges monitored prescription drug history reports or PDMP data pursuant to s. CSB 4.14.

(c) Create an account with a pharmacy or other entity at which pharmacists dispense or administer monitored prescription drugs in the course of professional practice with which the board has determined to have at least equivalent capability to maintain the confidentiality of monitored prescription drug history reports or that is connected to and lawfully obtains data from the state-designated entity under ch. 153, Stats.

(d) Create an account with a hospital or other entity at which practitioners prescribe, dispense, or administer monitored prescription drugs in the course of professional practice with which the board has determined to have at least equivalent capability to maintain the confidentiality of monitored prescription drug history reports or that is connected to and lawfully obtains data from the state-designated entity under ch. 153, Stats.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: am. (1), renum. (2) to (2) (intro.) and am., cr. (2) (a) to (d), am. (3) Register August 2014 No. 704, eff. 9-1-14; corrections in (1), (2) (b), (3) (a) Register September 2015 No. 717; EmR1706: emerg. r. and recr., eff. 4-1-17; CR 17-028: r. and recr. Register December 2017 No. 744, eff. 4-1-17; s. 35.17 corrections in (3) (intro.), (4) (intro.), Register December 2017 No. 744.

CSB 4.093 Monitored prescription drug history reports and audit trails about healthcare professionals.

(1) Healthcare professionals may access audit trails about themselves and their practitioner delegates or pharmacist delegates.

(2) A practitioner may access the audit trails accessible to healthcare professionals and a prescribing metrics report about himself.

(3) Medical coordinators may access prescribing metrics reports and audit trails about a healthcare professional whom the medical coordinator coordinates, directs, or supervises or for whom the medical coordinator establishes standard operating procedures that contain no personally identifiable information about a patient if the medical coordinator is conducting any of the following activities:

(a) Evaluating the job performance of the healthcare professional.

(b) Performing quality assessment and improvement activities, including outcomes evaluation or development of clinical guidelines for the healthcare professional.

(4) To obtain access to prescribing metrics reports and audit trails as authorized in subs. (1) and (2), healthcare professionals, pharmacist delegates, and practitioner delegates shall create an account with the PDMP system

(5) To obtain access to prescribing metrics reports, and audit trails about a healthcare professional, a medical coordinator shall create an account with the PDMP system.

History: EmR1706: emerg. cr. eff. 4-1-17; CR 17-028: cr. Register December 2017 No. 744, eff. 4-1-17; s. 35.17 correction in (4), Register December 2017 No. 744.

CSB 4.097 Deny, suspend, revoke or otherwise restrict or limit access.

(1) The board may deny, suspend, revoke, or otherwise restrict or limit a healthcare professional's, pharmacist delegate's, practitioner delegate's, or medical coordinator's access to monitored prescription drug history reports, prescribing metrics reports, PDMP data, and audit trails for any of the following reasons:

(a) The healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator is suspected of attempting to access, accessing, or disclosing a monitored prescription drug history report, prescribing metrics report, PDMP data, or audit trail in violation of s. 146.82 or 961.385, Stats., this chapter, or other state or federal laws or regulations relating to the privacy of patient health care records.

(b) The healthcare professional is no longer licensed in this state or in another state and recognized by this state as a person to

whom the board may grant access pursuant to s. CSB 4.09 or 4.093.

(c) The board, or other licensing board, or regulatory agency takes adverse action against the healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator.

(d) A licensing board or equivalent regulatory agency in another jurisdiction takes adverse action against the healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator.

(e) The federal department of justice, drug enforcement administration takes adverse action against the healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator.

(f) The healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator is convicted of a crime substantially related to the prescribing, administering, or dispensing of a monitored prescription drug.

(g) The pharmacist delegate or practitioner delegate is no longer delegated the task of accessing monitored prescription drug history reports.

(h) The medical coordinator no longer coordinates, directs, supervises, or establishes standard operating procedures for a healthcare professional.

(2) The board may temporarily suspend access to monitored prescription drug history reports, prescribing metrics reports, PDMP data, and audit trails upon discovering circumstances that indicate a healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator has performed any of the actions identified in sub. (1) (a).

History: EmR1706: emerg. cr., eff. 4-1-17; CR 17-028: cr. Register December 2017 No. 744, eff. 1-1-18.

CSB 4.10 Requests for review. (1) A dispenser, healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator may request that the board review any of the following:

(b) The denial of an emergency waiver requested pursuant to s. CSB 4.06 (3).

(c) The denial, suspension, revocation or other restriction or limitation imposed on the healthcare professional's, pharmacist delegate's, practitioner delegate's, or medical coordinator's account pursuant to s. CSB 4.097.

(2) To request a review, the dispenser, health care professional, pharmacist delegate, practitioner delegate, or medical coordinator shall file a written request with the board within 20 days after the mailing of the notice of the action in sub. (1). The request shall be in writing and include all of the following:

(a) The dispenser's, healthcare professional's, pharmacist delegate's, practitioner delegate's, or medical coordinator's name and address, including street address, city, state and ZIP code.

(b) The citation to the specific statute or rule on which the request is based.

(3) The board shall conduct the review at its next regularly scheduled meeting and notify the dispenser, healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator of the time and place of the review.

(4) No discovery is permitted.

(5) The board shall preside over the review. The review shall be recorded by audio tape unless otherwise specified by the board.

(6) The board shall provide the dispenser, healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator with an opportunity to submit written documentation, make a personal appearance before the board and present a statement. The board may establish a time limit for making a presentation. Unless otherwise determined by the board, the time for making a personal appearance shall be 20 minutes.

(7) If the dispenser, healthcare professional, pharmacist delegate, practitioner delegate, or medical coordinator fails to appear for a review, or withdraws the request for a review, the board may note the failure to appear in the minutes and affirm its original decision without further action.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; correction in (1) (b) made under s. 13.92 (4) (b) 7., Stats., Register February 2014 No. 698; CR 14-003: am. (1) (intro.), (2) (intro.), (b), (3), (6), (7) Register August 2014 No. 704, eff. 9-1-14; correction in (1) (a) to (c) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; CR 15-101: am. (1) (c), (2) (a) Register June 2016 No. 726, eff. 7-1-16; s. 35.17 correction in (1) (c), Register June 2016 No. 726; EmR1706: emerg. am. (1) (intro.), r. (1) (a), am. (1) (c), (2) (intro.), (a), (3), (6), (7), eff. 4-1-17; CR 17-028: am. (1) (intro.), r. (1) (a), am. (1) (c), (2) (intro.), (a), (3), (6), (7) Register December 2017 No. 744, eff. 1-1-18; correction in (1) (c) made under s. 13.92 (4) (b) 7., Stats., December 2017 No. 744.

CSB 4.105 Practitioners' requirement to review monitored prescription drug history reports.

(1) A practitioner, or a practitioner delegate assisting the practitioner in accordance with the standards of practice for the practitioner's profession, shall review the monitored prescription drug history report about a patient before the practitioner issues a prescription order for the patient unless any of the following conditions are met:

- (a) The patient is receiving hospice care, as defined in s. 50.94 (1) (a).
- (b) The prescription order is for a number of doses that is intended to last the patient 3 days or less and is not subject to refill.
- (c) The monitored prescription drug is lawfully administered to the patient.
- (d) The practitioner is unable to review the patient's monitored prescription drug history reports before issuing a prescription order for the patient due to an emergency.
- (e) The practitioner is unable to review the patient's records under their program because the PDMP system is not operational or due to other technological failure that the practitioner reports to the board.

(2) Reviews of reports or other information not provided by the board as part of the program that summarize or analyze PDMP data do not satisfy the requirement to review a monitored prescription drug history report under sub. (1).

(3) The board may refer a practitioner that fails to review a monitored prescription drug history report about a patient prior to issuing a prescription order for that patient to the appropriate licensing or regulatory board for discipline.

History: EmR1706: emerg. cr., eff. 4-1-17; CR 17-028: cr. Register December 2017 No. 744, eff. 1-1-18.

CSB 4.11 Methods of obtaining monitored prescription drug history reports. (1) The board shall disclose the monitored prescription drug history report about a patient to the patient if he or she does all of the following:

- (a) Appears in person at the department with two forms of valid proof of identity, one of which is valid government-issued photographic identification or mails to the department copies of two forms of valid proof of identity, one of which is valid government-issued photographic identification.
- (b) Makes a request for the monitored prescription drug history reports about the patient on a form provided by the board. If the request is mailed, the form shall be notarized.

(2) The board shall disclose the monitored prescription drug history report about a patient to a person authorized by the patient if the person authorized by the patient does all of the following:

- (a) Appears in person at the department with two forms of valid proof of identity, one of which is valid government-issued photographic identification.
- (b) Provides proof sufficient to the board of the authorization or delegation from the patient.
- (c) Makes a request for the monitored prescription drug history report on a form provided by the board.

(5) The board shall disclose the minimum necessary amount of information in a monitored prescription drug history report about a patient, patient address, practitioner, or dispenser to designated staff of a federal or state governmental agency in the same or similar manner, and for the same or similar purposes, as those persons are authorized to access similar confidential patient health care records under ss. 146.82 and 961.385, Stats., this chapter, and other state or federal laws and regulations relating to the privacy of patient health care records if the designated staff does all of the following:

- (a) Creates an account with the PDMP system.
- (b) Provides proof sufficient to the board that the federal or state governmental agency is entitled to the information under s. 146.82 (2) (a) 5., Stats.
- (c) Makes a request for the monitored prescription drug history report through its PDMP system account.
- (d) If the PDMP system is unable to fulfill a request from designated staff through their account with the PDMP system, the board may disclose the minimum necessary amount of information necessary to designated staff of a federal or state governmental agency upon written request that cites the agency's specific authorization to access similar confidential patient health care records under ss. 146.82 and 961.385, Stats., this chapter, and other state or federal laws and regulations relating to the privacy of patient health care records.

(6) The board shall disclose the minimum necessary amount of PDMP data or information in a monitored prescription drug history report about a patient, patient address, practitioner, or dispenser to designated staff of the department who is charged with investigating dispensers, dispenser delegates, pharmacists, pharmacist delegates, practitioners, and practitioner delegates in the same or similar manner, and for the same or similar purposes, as those persons are authorized to access similar confidential patient health care records under ss. 146.82 and 961.385, Stats., this chapter, and other state or federal laws and regulations relating to the privacy of patient health care records if the designated staff does all of the following:

- (a) Creates an account with the PDMP system.
- (b) Provides proof sufficient to the board that the department is entitled to the information under s. 146.82 (2) (a) 5., Stats.
- (c) Makes a request for the monitored prescription drug history report through its PDMP system account.

(7) The board shall disclose the minimum necessary amount of information in a monitored prescription drug history report about a patient or patient address to a prisoner's health care provider, the medical staff of a prison or jail in which a prisoner is confined, the receiving institution intake staff at a prison or jail to which a prisoner is being transferred or a person designated by a jailer to maintain prisoner medical records or designated staff of the department of corrections in the same or similar manner, and for the same or similar purposes, as those persons are authorized to access similar confidential patient health care records under ss. 146.82 and 961.385, Stats., this chapter, and other state or federal laws and regulations relating to the privacy of patient health care records if the person does all of the following:

- (a) Creates an account with the PDMP system.
- (b) Provides proof sufficient to the board that the person is entitled to the information under s. 146.82 (2) (a) 21., Stats.
- (c) Makes a request for the monitored prescription drug history report through its PDMP system account.

(8) The board shall disclose the minimum necessary amount of information in a monitored prescription drug history report about a patient to a coroner, deputy coroner, medical examiner, or medical examiner's assistant following the death of a patient in the same or similar manner, and for the same or similar purposes, as those persons are authorized to access similar confidential patient health care records under ss. 146.82 and 961.385, Stats., this chapter, and other state or federal laws and regulations relating to the

privacy of patient health care records if the person does all of the following:

- (a) Creates an account with the PDMP system.
 - (b) Provides proof sufficient to the board that the person is entitled to the information under s. 146.82 (2) (a) 18., Stats.
 - (c) Makes a request for the monitored prescription drug history report through its PDMP system account with the board.
- (9) The board may disclose PDMP data without personally identifiable information that could be reasonably used to identify any patient, healthcare professional, practitioner delegate, pharmacist delegate, or dispenser for public health and research purposes.
- (10) The board shall disclose the minimum necessary amount of information in a monitored prescription drug history report about a patient, patient address, practitioner, or dispenser to designated staff of a law enforcement agency or prosecutorial unit if the designated staff does all of the following:

- (a) Creates an account with the PDMP system.
- (b) Provides documentation demonstrating the law enforcement agency or prosecutorial unit is engaged in one of the following activities:
 1. An active and specific investigation or prosecution of a violation of any state or federal law involving a monitored prescription drug and that the information being requested is reasonably related to that investigation or prosecution.
 2. The monitoring of a patient as part of a drug court, as defined in s. 165.955 (1).

(c) Makes a request for the monitored prescription drug history report through its account with the PDMP system.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: r. (3), (4), am. (6) (intro.), renum. (9) (intro.) to (9) and am., r. (9) (a) to (c) Register August 2014 No. 704, eff. 9-1-14; correction in (5) (intro.), (6) (intro.), (7) (intro.), (8) (intro.), (10) (intro.) Register September 2015 No. 717; CR 15-101: am. (1) (intro.), (b), (2) (intro.), (c), (7) (intro.), (c), (8) (intro.), (c) Register June 2016 No. 726, eff. 7-1-16; EmR1706: emerg. am. (Title), (1), (2) (intro.), (c), (5) (intro.), (a), (c), cr. (d), am. (6) (intro.), (a), (c), (7) (intro.), (a), (c), (8) (intro.), (a), (c), (9), (10) eff. 4-1-17; CR 17-028: (Title), (1), (2) (intro.), (c), (5) (intro.), (a), (c), cr. (d), am. (6) (intro.), (a), (c), (7) (intro.), (a), (c), (8) (intro.), (a), (c), (9), (10) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.12 Use of PDMP data by the board and department. (1) The board shall develop and maintain a PDMP database to store dispensing data and PDMP data in a secure environment and an encrypted format.

(2m) The board shall develop and maintain a PDMP system to facilitate all of the following:

- (a) The submission of dispensing data to the PDMP database.
- (b) The creation of monitored prescription drug history reports about specific patients, practitioners, and dispensers.
- (c) The access to and the obtaining of monitored prescription drug history reports, prescribing metrics reports, and audit trails.

(3) The board shall maintain audit trails that contain all of the following information:

- (a) A log of dispensing data submitted to the PDMP database by each dispenser.
- (b) A log of persons to whom the Board has granted direct access to the PDMP system under ss. CSB 4.09 or 4.093 and a log of each time a person attempts to access PDMP data or a monitored prescription drug history report.
- (c) A log of prescription monitoring programs operated by a relevant agency in another jurisdiction with which the board exchanges PDMP data pursuant to s. CSB 4.14 and a log of each time a person from another jurisdiction attempts to access PDMP data.
- (d) A log of pharmacies or other entities at which pharmacists dispense or administer monitored prescription drugs in the course of professional practice with which the board has determined to have at least equivalent capability to maintain the confidentiality of monitored prescription drug history reports and a log of each

time a person from a pharmacy or other entity attempts to access PDMP data or a monitored prescription drug history report.

(e) A log of hospitals or other entities at which practitioners prescribe, dispense, or administer monitored prescription drugs in the course of professional practice with which the board has determined to have at least equivalent capability to maintain the confidentiality of monitored prescription drug history reports and a log of each time a person from a hospital or other entity attempts to access PDMP data or a monitored prescription drug history report.

(f) A log of monitored prescription drug history reports and PDMP data disclosed pursuant to s. CSB 4.11, including the name of the person to whom the information was disclosed.

(g) A log of requests for PDMP data or monitored prescription drug history reports even when no information was disclosed.

(6) Staff assigned administrative duties over the PDMP, vendors, contractors, and other agents of the board shall only have access to the minimum amount of PDMP data necessary for all of the following purposes:

(a) The design, implementation, operation, and maintenance of the program, including the PDMP database, PDMP system, the disclosure of information via other entities pursuant to s. CSB 4.09 (4), and the exchange of information pursuant to s. CSB 4.15 as part of the assigned duties and responsibilities of their employment.

(am) The operation of an analytics platform that provides data cleansing and standardization, data integration, advanced analytics, and alert management capabilities as part of the PDMP database and PDMP system.

(b) The collection of dispensing data as part of the assigned duties and responsibilities under s. 961.385, Stats., and this chapter.

(c) Evaluating and responding to legitimate requests for monitored prescription drug history reports, audit trails, and PDMP data.

(cg) Preparing monitored prescription drug history reports, audit trails, and PDMP data for the board to determine whether suspicious or critically dangerous conduct or practices has occurred or is occurring pursuant to s. CSB 4.15.

(cr) Conducting a review of the program as required by s. 961.385 (5), Stats.

(d) Other legally authorized purposes.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: am. (4), cr. (4g), (4r) Register August 2014 No. 704, eff. 9-1-14; correction in (6) (b) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; EmR1706: emerg. am. (title), (1), r. (2), cr. (2m), r. and recr. (3), r. (4), (4g), (4r), (5), am. (6) (intro.), (a), cr. (6) (am), am. (6) (c), cr. (6) (cg), (cr), eff. 4-1-17; CR 17-028: am. (title), (1), r. (2), cr. (2m), r. and recr. (3), r. (4), (4g), (4r), (5), am. (6) (intro.), (a), cr. (6) (am), am. (6) (c), cr. (6) (cg), (cr), Register December 2017 No. 744, eff. 1-1-18; ; correction in (3) (b) made under s. 13.92 (4) (b) 7., Stats., December 2017 No. 744..

CSB 4.13 Confidentiality of PDMP records. (1) The dispensing data, PDMP data, audit trails, monitored prescription drug history reports, and prescribing metrics reports maintained, created, or stored as a part of the program are not subject to inspection or copying under s. 19.35, Stats.

(2) A person who discloses or a person whose delegate discloses dispensing data, PDMP data, audit trails, monitored prescription drug history reports, or prescribing metrics reports in violation of s. 146.82 or 961.385, Stats., this chapter, or other state or federal laws or regulations relating to the privacy of patient health care records, may be referred to the appropriate licensing or regulatory board for discipline, or the appropriate law enforcement agency for investigation and possible prosecution if the board determines that a criminal violation may have occurred.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; correction in (2) made under s. 13.92 (4) (b) 7., Stats., Register September 2015 No. 717; EmR1706: emerg. am., eff. 4-1-17; CR 17-028: am. Register December 2017 No. 744, eff. 1-1-18.

CSB 4.14 Exchange of PDMP data. (1) The board may exchange monitored prescription drug history reports and PDMP

data with a prescription monitoring program operated by a relevant agency in another state or jurisdiction if the prescription monitoring program satisfies all of the following conditions:

(a) The prescription monitoring program is compatible with the program.

(b) The relevant agency operating the prescription monitoring program agrees to exchange similar information with the program.

(2) In determining the compatibility of a prescription monitoring program to the program, the board may consider any of the following:

(a) The safeguards for privacy of patient records and the prescription monitoring program's success in protecting patient privacy.

(b) The persons authorized to access the information stored by the prescription monitoring program.

(c) The schedules of controlled substances monitored by the prescription monitoring program.

(d) The information required by the agency to be submitted regarding the dispensing of a prescription drug.

(e) The costs and benefits to the board of sharing information.

(3) The board may assess a prescription monitoring program's continued compatibility with the program at any time.

History: CR 12-009: cr. Register October 2012 No. 682, eff. 1-1-13; CR 14-003: am. (1) (intro.) Register August 2014 No. 704, eff. 9-1-14; EmR1706: emerg. am. (title), (1) (intro.), eff. 4-1-17; CR 17-028: am. (title), (1) (intro.) Register December 2017 No. 744, eff. 1-1-18.

CSB 4.15 Disclosure of suspicious or critically dangerous conduct or practices. (1) The board may review dispensing data, monitored prescription drug history reports, PDMP data, and data compiled pursuant to s. CSB 4.12 to determine whether circumstances indicate suspicious or critically dangerous conduct or practices of a pharmacist, pharmacy, practitioner, or patient.

(2) The board may include any of the following factors when determining whether circumstances indicate suspicious or critically dangerous conduct or practices of a pharmacist or pharmacy:

(a) The pharmacist or pharmacy's monitored prescription drug dispensing practices deviate from accepted pharmacist or pharmacy practices.

(b) There are unusual patterns in the payment methodology used by patients to whom monitored prescription drugs are dispensed by the pharmacist or pharmacy.

(c) The history of actions taken against the pharmacist or pharmacy by other state agencies, agencies of another state, or law enforcement.

(d) The type and number of monitored prescription drugs dispensed by the pharmacist or at the pharmacy.

(e) The pharmacist or pharmacy has dispensed forged prescription orders for a monitored prescription drug.

(f) The distance patients travel to have monitored prescription drugs dispensed at the pharmacy.

(g) The number of patients dispensed monitored prescription drugs at the pharmacy or by the pharmacist who satisfy any of the criteria identified in sub. (4).

(3) The board may include any of the following factors when determining whether circumstances indicate suspicious or critically dangerous conduct or practices of a practitioner:

(a) The practitioner's monitored prescription drug prescribing practices deviate from accepted prescribing practices.

(b) The practitioner prescribes potentially dangerous combinations of monitored prescription drugs to the same patient.

(c) The type and number of monitored prescription drugs prescribed by the practitioner.

(d) The history of actions taken against the practitioner by other state agencies, agencies of another state, or law enforcement.

(e) The distance patients travel to obtain monitored prescription drug prescriptions from the practitioner.

(f) The number of patients to whom the practitioner prescribed a monitored prescription who satisfy any of the criteria identified in sub. (4).

(4) The board may include any of the following factors when determining whether circumstances indicate suspicious or critically dangerous conduct or practices of a patient:

(a) The number of practitioners from whom the patient has obtained a prescription for a monitored prescription drug.

(b) The number of pharmacies from where the patient was dispensed a monitored prescription drug.

(c) The number of prescriptions for a monitored prescription drug obtained by the patient.

(d) The number of monitored prescription drug doses dispensed to the patient.

(e) Whether the monitored prescription drugs dispensed to the patient include dangerous levels of any drug.

(f) The number of times the patient is prescribed or dispensed a monitored prescription drug before the previously dispensed amount of the same or a similar monitored prescription drug would be expected to end.

(g) The payment methodology used by the patient to obtain controlled substances at a pharmacy.

(5) Upon determining that circumstances indicate suspicious or critically dangerous conduct or practices of a pharmacy, practitioner, or patient, the Board may disclose monitored prescription drug history reports, audit trails, and PDMP data to any of the following:

(a) A relevant patient.

(b) A relevant pharmacist or practitioner.

(c) A relevant state board or agency.

(d) A relevant agency of another state.

(e) A relevant law enforcement agency.

(6) Upon determining that a criminal violation may have occurred, the board may refer a pharmacist, pharmacy, or practitioner to the appropriate law enforcement agency for investigation and possible prosecution. The board may disclose monitored prescription drug history reports, audit trails, and PDMP data to the law enforcement agency as part of the referral.

History: CR 15-101: cr. Register June 2016 No. 726, eff. 7-1-16; CR 17-028: am. (1), (5) (intro.), cr. (6) Register December 2017 No. 744, eff. 1-1-18.

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

AGENDA REQUEST FORM

1) Name and Title of Person Submitting the Request: Kimberly Wood, Program Assistant Supervisor-Adv. On behalf of Executive Directors Christian Albouras or Debra Sybell		2) Date When Request Submitted: 5/15/2019 <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 and Councils			
4) Meeting Date:	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Informational Item 1. 2019-2021 Fee and Credential Schedule	
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: Informational Only			
11) Authorization			
<i>Kimberly Wood</i>		5/15/2019	
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.			



May 2019

Dear State of Wisconsin Boards, Councils and Committee Member,

As you may already know, operation of the Department of Safety and Professional Services (DSPS) is self-funded by the fees associated with the occupation or business credentials it issues and regulates under chapters [440](#) to [480](#) of Wisconsin Statutes.

Wisconsin State Statute § 440.03(9)(a) requires DSPS to conduct a professional licensure fee study every two years to adjust fees for the succeeding fiscal biennium. The purpose of the fee study is to reflect the approximate administrative and enforcement costs of the department that are attributable to the regulation of the referenced credentials.

On February 20, 2019, the Joint Finance Committee approved the FY 2019-2021 professional licensure fee study conducted by the DSPS. I am pleased to provide you with the new fee schedule that will take effect on July 1, 2019.

The new fees are based on actual operating costs and revenues for DSPS for fiscal years 2017 and 2018 (July 1, 2016 to June 30, 2018). A detailed explanation how the fees were recalculated, including licensure/credential participation rates, complaints and investigations, and adjustments for inflation can be found in the Frequently Asked Questions document.

For all regulated professional and medical licenses and credentials (except the renewal fee for one profession noted in the enclosed fee schedule), initial application and renewal fees will be reduced or maintained at the current level, including the following:

- Maintaining initial and renewal fees for 43 licenses/credentials (approximately 25 percent)
- Reducing initial fees for 82 licenses/credentials (approx. 48 percent) with an average reduction of \$26.78
- Reducing renewal fees for 121 licenses/credentials (approx. 71 percent) with an average reduction of \$57.42
- Reducing both the initial and renewal fees for 80 licenses/credentials (approx. 47 percent)
- Providing a fee reduction to at least one of the fees (initial and/or renewal) for 127 licenses/credentials (approx. 75 percent)
- Establishing equal fees for both initial applications and renewals with a maximum fee of \$75 for 163 licenses/credentials (approx. 96 percent) (exceptions per state statute for fees related to Appraisal Management Companies and Transportation Network Companies; exception per administrative code for fees related to Unarmed Combat Sports)
- Providing a reduced fee to an estimated 361,000 Wisconsin licensure/credential applicants over the next biennium, (approx. 96 percent of all applicants)

The new fee schedule will take effect beginning with initial license applications received in the Department and/or postmarked on or after July 1, 2019, and for license renewals that have an effective date of July 1, 2019 or later. It should be noted that if a license holder receives a notice of renewal prior to July 1, 2019, for a renew-by date of after July 1, 2019, the new fees will apply regardless of when the notice is received or when payment is made. If a license holder's renew-by date is before July 1, 2019, and the payment is made after July 1, 2019, the fee noted on the notice of renewal will still apply. If the license holder's renew-by date is on or after July 1, 2019, the new fees will apply.

If you have any questions regarding the information provided, please do not hesitate to contact Yolanda McGowan, Division Administrator, Division of Policy Development.

Sincerely,

A handwritten signature in cursive script that reads "Dawn B. Crim". The signature is written in black ink and is positioned above the typed name and title.

Dawn B. Crim
Secretary-designee, Department of Safety and Professional Services

Enclosure

Board/Admin.	License/Credential Name	Project	Current		Proposed Initial Fee	Proposed Renewal Fee	Initial Fee Change	Renewal Fee Change
			Current Initial Fee	Current Renewal Fee				
Accounting Exam Bd	Accountant CPA	16500P1ACBD001	\$75.00	\$82.00	\$43.00	\$43.00	-\$32.00	-\$39.00
Accounting Exam Bd	Accounting Firm	16500P1ACBD003	\$75.00	\$82.00	\$43.00	\$43.00	-\$32.00	-\$39.00
Acupuncturist	Acupuncturist	16500P1ADLD055	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Architect/Engineer Joint Exam Bd	Architect	16500P1ARCD005	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Architect/Engineer Joint Exam Bd	Architectural or Engineer Corp	16500P1ARCD011	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Architect/Engineer Joint Exam Bd	Designer Engineering Systems	16500P1DSND007	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Architect/Engineer Joint Exam Bd	Engineer Professional	16500P1ENGD006	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Architect/Engineer Joint Exam Bd	Engineer Training	16500P1ENGD500	\$75.00	\$0.00	\$68.00	\$0.00	-\$7.00	\$0.00
Architect/Engineer Joint Exam Bd	Landscape Architect	16500P1LSAD014	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Architect/Engineer Joint Exam Bd	Land Surveyor Professional	16500P1LSRD008	\$75.00	\$82.00	\$68.00	\$68.00	-\$7.00	-\$14.00
Real Estate Appraiser Bd	Appraiser Licensed	16500P1APPD004	\$75.00	\$170.00	\$16.00	\$16.00	-\$59.00	-\$154.00
Real Estate Appraiser Bd	Appraiser Residential Cert	16500P1APPD009	\$75.00	\$170.00	\$16.00	\$16.00	-\$59.00	-\$154.00
Real Estate Appraiser Bd	Appraiser General Cert	16500P1APPD010	\$75.00	\$170.00	\$16.00	\$16.00	-\$59.00	-\$154.00
Real Estate Appraiser Bd	Appraisal Management Company	16500P1APPD900	\$4,000.00	\$2,000.00	\$4,000.00	\$2,000.00	\$0.00	\$0.00
Athletic Agent	Athletic Agent	16500P1ATHD097	\$75.00	\$107.00	\$38.00	\$38.00	-\$37.00	-\$69.00
Auctioneer Bd	Auctioneer	16500P1AUBD052	\$75.00	\$170.00	\$47.00	\$47.00	-\$28.00	-\$123.00
Auctioneer Bd	Auction Company	16500P1AUBD053	\$75.00	\$170.00	\$47.00	\$47.00	-\$28.00	-\$123.00
Barbering Advisory Committee	Barber Establishment	16500P1BRBD180	\$75.00	\$82.00	\$63.00	\$63.00	-\$12.00	-\$19.00
Barbering Advisory Committee	Barber	16500P1BRBD182	\$75.00	\$82.00	\$63.00	\$63.00	-\$12.00	-\$19.00
Barbering Advisory Committee	Barber Instructor	16500P1BRBD183	\$75.00	\$82.00	\$63.00	\$63.00	-\$12.00	-\$19.00
Barbering Advisory Committee	Barber School	16500P1BRBD187	\$75.00	\$82.00	\$63.00	\$63.00	-\$12.00	-\$19.00
Barbering Advisory Committee	Barber Apprentice	16500P1BRBD601	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$0.00
Unarmed Combat Sports	Boxing Contestant	16500P1BXMA263	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Boxing Contest Professional	16500P1BXMA264	\$300.00	\$300.00	\$300.00	\$300.00	\$0.00	\$0.00
Unarmed Combat Sports	Second	16500P1BXMA265	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Boxing Promoter Professional	16500P1BXMA266	\$500.00	\$500.00	\$500.00	\$500.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Judge	16500P1BXMA267	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Referee	16500P1BXMA268	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Matchmaker	16500P1BXMA270	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Unarmed Combat Sports	Physician Ringside	16500P1BXMA271	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Unarmed Combat Sports	Timekeeper	16500P1BXMA272	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Unarmed Combat Sports	Boxing Judge	16500P1BXMA274	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Boxing Referee	16500P1BXMA275	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Amateur Conte	16500P1BXMA276	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Contestant Pr	16500P1BXMA277	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Prof Club	16500P1BXMA278	\$500.00	\$500.00	\$500.00	\$500.00	\$0.00	\$0.00

Board/Admin.	License/Credential Name	Project	Current		Proposed Initial Fee	Proposed Renewal Fee	Initial Fee Change	Renewal Fee Change
			Current Initial Fee	Current Renewal Fee				
Unarmed Combat Sports	Mix Martial Arts Contest Prof	16500P1BXMA279	\$300.00	\$300.00	\$300.00	\$300.00	\$0.00	\$0.00
Unarmed Combat Sports	Mix Martial Arts Promoter Prof	16500P1BXMA280	\$500.00	\$500.00	\$500.00	\$500.00	\$0.00	\$0.00
Unarmed Combat Sports	Unarmed Combat Promoter	16500P1BXMA281	\$500.00	\$500.00	\$500.00	\$500.00	\$0.00	\$0.00
Unarmed Combat Sports	Unarmed Combat Contest	16500P1BXMA282	\$300.00	\$300.00	\$300.00	\$300.00	\$0.00	\$0.00
Unarmed Combat Sports	Kickboxing Contestant Amateur	16500P1BXMA283	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Kickboxing Contestant Prof	16500P1BXMA284	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Muay Thai Contestant Amateur	16500P1BXMA285	\$40.00	\$40.00	\$40.00	\$40.00	\$0.00	\$0.00
Unarmed Combat Sports	Kickboxing Judge	16500P1BXMA287	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Muay Thai Judge	16500P1BXMA288	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Kickboxing Referee	16500P1BXMA289	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Unarmed Combat Sports	Muay Thai Referee	16500P1BXMA290	\$15.00	\$15.00	\$15.00	\$15.00	\$0.00	\$0.00
Crematory Authority	Crematory Authority	16500P1CACD098	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Cemetery Bd	Cemetery Authority Licensed	16500P1CEMD095	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Cemetery Bd	Cemetery Salesperson	16500P1CEMD096	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Cemetery Bd	Cemetery Preneed Seller	16500P1CEMD101	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Cemetery Bd	Cemetery Authority Religious	16500P1CEMD102	\$75.00	\$0.00	\$75.00	\$0.00	\$0.00	\$0.00
Cemetery Bd	Cemetery Authority Registered	16500P1CEMD195	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Chiropractic Exam Bd	Chiropractor	16500P1CHID012	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Chiropractic Exam Bd	Chiropractic Radiological Tech	16500P1CHID113	\$53.00	\$44.00	\$53.00	\$53.00	\$0.00	\$9.00
Chiropractic Exam Bd	Chiropractic Tech	16500P1CHID114	\$53.00	\$44.00	\$53.00	\$53.00	\$0.00	\$9.00
Cosmetology Exam Bd	Aesthetics Establishment	16500P1COSD069	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Electrology Establishment	16500P1COSD070	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Manicuring Establishment	16500P1COSD071	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Aesthetics Instructor	16500P1COSD072	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Electrology Instructor	16500P1COSD073	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Manicuring Instructor	16500P1COSD074	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Cosmetology Establishment	16500P1COSD080	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Cosmetologist	16500P1COSD082	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Cosmetology Instructor	16500P1COSD083	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Electrologist	16500P1COSD084	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Manicurist	16500P1COSD085	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Aesthetician	16500P1COSD086	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Cosmetology School	16500P1COSD087	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Electrology School	16500P1COSD088	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Manicuring School	16500P1COSD089	\$75.00	\$82.00	\$11.00	\$11.00	-\$64.00	-\$71.00
Cosmetology Exam Bd	Cosmetology Apprentice	16500P1COSD600	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$0.00

Board/Admin.	License/Credential Name	Project	Current		Proposed Initial Fee	Proposed Renewal Fee	Initial Fee Change	Renewal Fee Change
			Current Initial Fee	Current Renewal Fee				
Dentistry Exam Bd	Dentist	16500P1DEND015	\$75.00	\$123.00	\$74.00	\$74.00	-\$1.00	-\$49.00
Dentistry Exam Bd	Dental Hygienist	16500P1DEND016	\$75.00	\$123.00	\$74.00	\$74.00	-\$1.00	-\$49.00
Dentistry Exam Bd	Dentistry Mobile Progr Registr	16500P1DEND115	\$75.00	\$123.00	\$74.00	\$74.00	-\$1.00	-\$49.00
DSPS Direct Licensing	DSPS Licensed Midwife	16500P1DSPS049	\$75.00	\$107.00	\$59.00	\$59.00	-\$16.00	-\$48.00
DSPS Direct Licensing	DSPS Firearms Certifier	16500P1DSPS064	\$0.00	\$8.00	\$0.00	\$0.00	\$0.00	-\$8.00
DSPS Direct Licensing	DSPS WI Regis Interior Design	16500P1DSPS109	\$75.00	\$107.00	\$59.00	\$59.00	-\$16.00	-\$48.00
DSPS Direct Licensing	Juvenile Martial Arts Instruct	16500P1DSPS118	\$75.00	\$75.00	\$59.00	\$59.00	-\$16.00	-\$16.00
DSPS Direct Licensing	DSPS Behavior Analyst	16500P1DSPS140	\$75.00	\$75.00	\$59.00	\$59.00	-\$16.00	-\$16.00
DSPS Direct Licensing	DSPS Transportation Network Co	16500P1DSPS184	\$5,000.00	\$5,000.00	\$5,000.00	\$5,000.00	\$0.00	\$0.00
DSPS Direct Licensing	DSPS Temp Educ Training Permit	16500P1DSPS850	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$0.00
DSPS Direct Licensing	DSPS Special License	16500P1DSPS876	\$75.00	\$0.00	\$59.00	\$0.00	-\$16.00	\$0.00
DSPS Direct Licensing	Home Med Oxygen Provider	16500P1HMOP048	\$75.00	\$128.00	\$59.00	\$59.00	-\$16.00	-\$69.00
DSPS Direct Licensing	Special Licenses	DSPS Special License	\$75.00	\$0.00	\$59.00	\$0.00	-\$16.00	\$0.00
Funeral Dir Exam Bd	Funeral Dir Excl Embalm	16500P1FDRD075	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Funeral Dir Exam Bd	Funeral Dir Good Standing	16500P1FDRD076	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Funeral Dir Exam Bd	Funeral Director	16500P1FDRD077	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Funeral Dir Exam Bd	Funeral Establishment	16500P1FDRD078	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Funeral Dir Exam Bd	Agent Burial Agreements	16500P1FDRD107	\$75.00	\$0.00	\$75.00	\$0.00	\$0.00	\$0.00
Funeral Dir Exam Bd	Funeral Dir Apprentice	16500P1FDRD700	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Geo./Hydro./Soil Sci. Exam Bd	Geologist Professional	16500P1GEOD013	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Geo./Hydro./Soil Sci. Exam Bd	Geology Firm	16500P1GEOD201	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Geo./Hydro./Soil Sci. Exam Bd	Hydrologist Professional	16500P1HYDD111	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Geo./Hydro./Soil Sci. Exam Bd	Hydrology Firm	16500P1HYDD202	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Geo./Hydro./Soil Sci. Exam Bd	Soil Scientist Professional	16500P1SSCD112	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Geo./Hydro./Soil Sci. Exam Bd	Soil Scientist Firm	16500P1SSCD203	\$75.00	\$170.00	\$56.00	\$56.00	-\$19.00	-\$114.00
Hearing Speech Examing Bd	Hearing Instrument Spec	16500P1HADD060	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Hearing Speech Examing Bd	Speech Language Pathologist	16500P1HADD154	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Hearing Speech Examing Bd	Audiologist	16500P1HADD156	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Music Art Dance Therapists	Art Therapist	16500P1MADD036	\$75.00	\$107.00	\$68.00	\$68.00	-\$7.00	-\$39.00
Music Art Dance Therapists	Dance Therapist	16500P1MADD037	\$75.00	\$107.00	\$68.00	\$68.00	-\$7.00	-\$39.00
Music Art Dance Therapists	Music Therapist	16500P1MADD038	\$75.00	\$107.00	\$68.00	\$68.00	-\$7.00	-\$39.00
MFT, PC, & SW Exam Bd	Counselor Professional Licen	16500P1CPCD125	\$75.00	\$91.00	\$62.00	\$62.00	-\$13.00	-\$29.00
MFT, PC, & SW Exam Bd	Counselor Professional Trn	16500P1CPCD226	\$75.00	\$0.00	\$62.00	\$0.00	-\$13.00	\$0.00
MFT, PC, & SW Exam Bd	Marriage Family Therapist	16500P1MFTD124	\$75.00	\$85.00	\$62.00	\$62.00	-\$13.00	-\$23.00
MFT, PC, & SW Exam Bd	Marriage Family Therapist Trn	16500P1MFTD228	\$75.00	\$0.00	\$62.00	\$0.00	-\$13.00	\$0.00
MFT, PC, & SW Exam Bd	Social Worker	16500P1SOCD120	\$75.00	\$85.00	\$62.00	\$62.00	-\$13.00	-\$23.00

Board/Admin.	License/Credential Name	Project	Current		Proposed Initial Fee	Proposed Renewal Fee	Initial Fee Change	Renewal Fee Change
			Current Initial Fee	Current Renewal Fee				
MFT, PC, & SW Exam Bd	Social Worker Adv Practice	16500P1SOCD121	\$75.00	\$85.00	\$62.00	\$62.00	-\$13.00	-\$23.00
MFT, PC, & SW Exam Bd	Social Worker Independent	16500P1SOCD122	\$75.00	\$85.00	\$62.00	\$62.00	-\$13.00	-\$23.00
MFT, PC, & SW Exam Bd	Social Worker Lic Clinical	16500P1SOCD123	\$75.00	\$85.00	\$62.00	\$62.00	-\$13.00	-\$23.00
MFT, PC, & SW Exam Bd	Social Worker Training	16500P1SOCD127	\$75.00	\$0.00	\$62.00	\$0.00	-\$13.00	\$0.00
Nursing Home Admin Exam Bd	Nursing Home Administrator	16500P1NHAD065	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Board of Nursing	Nurse Registered	16500P1NURD030	\$75.00	\$82.00	\$73.00	\$73.00	-\$2.00	-\$9.00
Board of Nursing	Nurse Licensed Practical	16500P1NURD031	\$75.00	\$82.00	\$73.00	\$73.00	-\$2.00	-\$9.00
Board of Nursing	Nurse Midwife	16500P1NURD032	\$75.00	\$82.00	\$73.00	\$73.00	-\$2.00	-\$9.00
Board of Nursing	Nurse Adv Practice Prescriber	16500P1NURD033	\$75.00	\$82.00	\$73.00	\$73.00	-\$2.00	-\$9.00
Optometry Board	Optometrist	16500P1OPTD035	\$75.00	\$170.00	\$75.00	\$75.00	\$0.00	-\$95.00
Private Detective	Private Detective Agency	16500P1PDET062	\$75.00	\$107.00	\$8.00	\$8.00	-\$67.00	-\$99.00
Private Detective	Private Detective	16500P1PDET063	\$75.00	\$107.00	\$8.00	\$8.00	-\$67.00	-\$99.00
Pharmacy Exam Bd	Pharmacist	16500P1PHMD040	\$75.00	\$128.00	\$74.00	\$74.00	-\$1.00	-\$54.00
Pharmacy Exam Bd	Pharmacy In State	16500P1PHMD042	\$75.00	\$128.00	\$74.00	\$74.00	-\$1.00	-\$54.00
Pharmacy Exam Bd	Pharmacy Out of State	16500P1PHMD043	\$75.00	\$128.00	\$74.00	\$74.00	-\$1.00	-\$54.00
Pharmacy Exam Bd	Drug Device Manufacturer	16500P1PHMD044	\$75.00	\$128.00	\$74.00	\$74.00	-\$1.00	-\$54.00
Pharmacy Exam Bd	Wholesale Distrib Presc Drugs	16500P1PHMD045	\$75.00	\$128.00	\$74.00	\$74.00	-\$1.00	-\$54.00
Physical Therapy Exam Bd	Physical Therapist Assistant	16500P1PHTD019	\$75.00	\$75.00	\$68.00	\$68.00	-\$7.00	-\$7.00
Physical Therapy Exam Bd	Physical Therapist	16500P1PHTD024	\$75.00	\$75.00	\$68.00	\$68.00	-\$7.00	-\$7.00
Private Security Person	Private Security Person	16500P1PSEC108	\$75.00	\$107.00	\$27.00	\$27.00	-\$48.00	-\$80.00
Psychology Exam Bd	Psychologist	16500P1PSYD057	\$75.00	\$170.00	\$66.00	\$66.00	-\$9.00	-\$104.00
Psychology Exam Bd	School Psychologist Priv Prac	16500P1PSYD058	\$75.00	\$170.00	\$66.00	\$66.00	-\$9.00	-\$104.00
Radiography Exam Bd	Radiographer Licensed	16500P1RADD142	\$75.00	\$82.00	\$65.00	\$65.00	-\$10.00	-\$17.00
Radiography Exam Bd	Ltd Xray Machine Oper Permit	16500P1RADD144	\$75.00	\$82.00	\$65.00	\$65.00	-\$10.00	-\$17.00
Real Estate Exam Bd	Real Estate Broker	16500P1REBD090	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Real Estate Exam Bd	Real Estate Business Entity	16500P1REBD091	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Real Estate Exam Bd	Timeshare Salesperson	16500P1REBD093	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Real Estate Exam Bd	Real Estate Salesperson	16500P1REBD094	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Home Inspector	Home Inspector	16500P1RHID106	\$75.00	\$107.00	\$51.00	\$51.00	-\$24.00	-\$56.00
Substance Abuse Counselors	Subst Abuse Counselor Training	16500P1SAAC130	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Counselor	16500P1SAAC131	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Counselor Clinical	16500P1SAAC132	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Clin Sup Training	16500P1SAAC133	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Intermed Clin Sup	16500P1SAAC134	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Indep Clin Sup	16500P1SAAC135	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Substance Abuse Counselors	Subst Abuse Prev Specialist Tr	16500P1SAAC136	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00

Board/Admin.	License/Credential Name	Project	Current		Proposed Initial Fee	Proposed Renewal Fee	Initial Fee Change	Renewal Fee Change
			Current Initial Fee	Current Renewal Fee				
Substance Abuse Counselors	Subst Abuse Prevent Specialist	16500P1SAAC137	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Sanitarians Registered	Sanitarians Registered	16500P1SAND197	\$75.00	\$107.00	\$75.00	\$75.00	\$0.00	-\$32.00
Sign Language Interpreters Council	Sign Language Interp	16500P1SLID150	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Sign Language Interpreters Council	Sign Lanugage Interpr Restrict	16500P1SLID151	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Tanning	Tanning Establishments	16500P1TANE401	\$10.00	\$10.00	\$10.00	\$10.00	\$0.00	\$0.00
Tattoo Body Art Piercing	Tattoo Body Art Piercing Estab	16500P1TBAP402	\$135.00	\$220.00	\$19.00	\$19.00	-\$116.00	-\$201.00
Tattoo Body Art Piercing	Tattoo Body Art Piercing Pract	16500P1TBAP403	\$60.00	\$60.00	\$19.00	\$19.00	-\$41.00	-\$41.00
Tattoo Body Art Piercing	Body Piercing	16500P1TBAP404	\$60.00	\$60.00	\$19.00	\$19.00	-\$41.00	-\$41.00
Medical Bd Affiliates	Anesthesiology Assist	16500P1ANSO017	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Medical Bd Affiliates	Athletic Trainer	16500P1ATBD039	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Medical Bd Affiliates	Dietician Certified	16500P1DABD029	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Medical Bd Affiliates	DSPS Resident Educ License	16500P1DSPS851	\$10.00	\$0.00	\$10.00	\$0.00	\$0.00	\$0.00
Medical Bd Affiliates	DSPS Special Permit	16500P1DSPS875	\$75.00	\$0.00	\$75.00	\$0.00	\$0.00	\$0.00
Medical Bd Affiliates	Medicine Surgery MD	16500P1MEDD020	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Medicine Surgery DO	16500P1MEDD021	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Administrative Physician MD	16500P1MEDD220	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Administrative Physician DO	16500P1MEDD221	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Medicine Surgery MD Compact	16500P1MEDD320	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Medicine Surgery DO Compact	16500P1MEDD321	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Massage Therapy Bodyworker	16500P1MTBD146	\$75.00	\$82.00	\$75.00	\$75.00	\$0.00	-\$7.00
Medical Bd Affiliates	Occupational Therapist	16500P1OTBD026	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Medical Bd Affiliates	Occupational Therapist Assist	16500P1OTBD027	\$75.00	\$75.00	\$75.00	\$75.00	\$0.00	\$0.00
Medical Bd Affiliates	Physician Assistant	16500P1PHAD023	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Podiatrist	16500P1PODD025	\$75.00	\$91.00	\$75.00	\$75.00	\$0.00	-\$16.00
Medical Bd Affiliates	Perfusionist	16500P1PRFD018	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00
Medical Bd Affiliates	Respiratory Care Practitioner	16500P1RSPD028	\$75.00	\$141.00	\$75.00	\$75.00	\$0.00	-\$66.00