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**TELECONFERENCE/VIRTUAL  
MEDICAL EXAMINING BOARD  
Room N208, 4822 Madison Yards Way, 2<sup>nd</sup> Floor, Madison  
Contact: Valerie Payne (608) 266-2112  
March 27, 2020**

*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 record of the actions of the Board.*

**AGENDA**

**8:00 A.M.**

**OPEN SESSION – CALL TO ORDER – ROLL CALL**

- A. Adoption of Agenda (1-5)**
- B. Approval of Minutes of February 19, 2020 (6-11)**
- C. Introductions, Announcements and Recognition**
- D. Conflicts of Interest**
- E. Administrative Matters**
  - 1) Board, Department and Staff Updates
  - 2) Board Members – Term Expiration Dates
    - a. Alaa Abd-Elsayed – 7/1/2020
    - b. Milton Bond, Jr. – 7/1/2023
    - c. David A. Bryce – 7/1/2021
    - d. Michael Carton – 7/1/2020
    - e. Clarence Chou – 7/1/2023
    - f. Padmaja Doniparthi – 7/1/2021
    - g. Sumeet Goel – 7/1/2023
    - h. Bradley Kudick – 7/1/2020
    - i. Lee Ann Lau – 7/1/2020
    - j. David Roelke – 7/1/2021
    - k. Kenneth Simons – 7/1/2018
    - l. Sheldon Wasserman – 7/1/2023
    - m. Timothy Westlake – 7/1/2020
  - 3) Appointments, Reappointments, Confirmations, and Committee, Panel and Liaison Appointments
  - 4) Screening Panel and Examination Panel Appointments
  - 5) Wis. Stat. § 15.085 (3)(b) – Affiliated Credentialing Boards’ Biannual Meeting with the Medical Examining Board to Consider Matters of Joint Interest

**F. Legislative and Policy Matters – Discussion and Consideration**

- 1) 2019 Senate Bill 399, Relating to Temporary Practice by Physicians at Camps, Providing an Exemption from Emergency Rule Procedures, and Granting Rule-Making Authority **(12-19)**
- 2) 21 NCAC 32B, .1004 Limited License for Disasters and Emergencies for Physicians and Physician Assistants with Inactive North Carolina Licenses **(20-22)**
- 3) Pearson-Vue Testing Centers – Request for Board Comment and Feedback **(23)**

**G. Administrative Rule Matters – Discussion and Consideration**

- 1) Statement of Scope for Med 13, Relating to Continuing Medical Education for Physicians **(24-26)**
- 2) Pending or Possible Rulemaking Projects

**H. Report of Recommendations from the Medical Examining Board Licensure Forms Committee – Discussion and Consideration**

- 1) Minnesota Reciprocity
- 2) Review of Other Licenses Under Jurisdiction
- 3) Budget Assessment Needs for 2020-2021 Renewal Window as a Result of “Yes” Answers on Applications

**I. Federation of State Medical Boards (FSMB) Matters – Discussion and Consideration**

- 1) Quarterly FSMB Update on USMLE **(27-28)**

J. Controlled Substances Board Report – Timothy Westlake

K. Interstate Medical Licensure Compact Commission (IMLCC) – Report from Wisconsin’s Commissioners

L. Newsletter Matters – Discussion and Consideration

M. Screening Panel Report

**N. CE Broker – Discussion and Consideration**

O. Future Agenda Items

P. Discussion and Consideration of Items Added After Preparation of Agenda:

- 1) Introductions, Announcements and Recognition
- 2) Elections, Appointments, Reappointments, Confirmations, and Committee, Panel and Liaison Appointments
- 3) Administrative Matters
- 4) Election of Officers
- 5) Appointment of Liaisons and Alternates
- 6) Delegation of Authorities
- 7) Education and Examination Matters
- 8) Credentialing Matters
- 9) Practice Matters
- 10) Legislative and Policy Matters
- 11) Administrative Rule Matters
- 12) Liaison Reports
- 13) Board Liaison Training and Appointment of Mentors
- 14) Informational Items

- 15) Division of Legal Services and Compliance (DLSC) Matters
- 16) Presentations of Petitions for Summary Suspension
- 17) Petitions for Designation of Hearing Examiner
- 18) Presentation of Stipulations, Final Decisions and Orders
- 19) Presentation of Proposed Final Decisions and Orders
- 20) Presentation of Interim Orders
- 21) Petitions for Re-Hearing
- 22) Petitions for Assessments
- 23) Petitions to Vacate Orders
- 24) Requests for Disciplinary Proceeding Presentations
- 25) Motions
- 26) Petitions
- 27) Appearances from Requests Received or Renewed
- 28) Speaking Engagements, Travel, or Public Relation Requests, and Reports

Q. Public Comments

**CONVENE TO CLOSED SESSION to deliberate on cases following hearing (s. 19.85(1)(a), Stats.); to consider licensure or certification of individuals (s. 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (ss. 19.85(1)(b), and 448.02(8), 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.).**

**R. Deliberation on DLSC Matters**

**1) Stipulations and Final Decisions and Orders**

- a. 16 MED 014 – John W.P. Horan, M.D. **(29-36)**
- b. 16 MED 224 – Steven M. Kotsonis, M.D. **(37-44)**
- c. 16 MED 271 – Waleed S. Najeeb, M.D. **(45-52)**

**2) Administrative Warnings**

- a. 19 MED 027 – R.J.K. **(53-55)**

**3) Case Closings**

- a. 17 MED 344 – T.J.S. **(56-81)**
- b. 18 MED 203 – Unknown **(82-85)**
- c. 18 MED 325 – J.B. **(86-92)**
- d. 19 MED 027 – S.C.R. **(93-110)**
- e. 19 MED 211 – M.F., T.S. **(111-120)**
- f. 19 MED 213 – C.L. **(121-130)**
- g. 19 MED 382 – R.L. **(131-137)**
- h. 19 MED 527 – C.B. **(138-143)**
- i. 19 MED 547 – J.B. **(144-151)**
- j. 19 MED 290 – D.M.M. **(152-160)**
- k. 19 MED 484 – L.A.B. **(161-165)**

**4) Monitoring**

- a. Raymond Watts, M.D. – Requesting Reinstatement of Full Licensure **(166-188)**

**S. Deliberation on Proposed Final Decision and Orders**

- 1) James A. Puerner, M.D., Respondent (DHA Case Number SPS-19-0060/DLSC Case Number 18 MED 331) **(189-199)**

T. Deliberation of Items Added After Preparation of the Agenda

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

U. Open Cases

V. Consulting with Legal Counsel

**RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION**

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

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

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

**ADJOURNMENT**

**ORAL EXAMINATION OF CANDIDATES FOR LICENSURE**

**ROOM N207**

**10:00 A.M. OR IMMEDIATELY FOLLOWING THE FULL BOARD MEETING**

**CLOSED SESSION** – Reviewing Applications and Conducting Oral Examination of zero (0) (at time of agenda publication) Candidates for Licensure – **Dr. Simons** and **Dr. Westlake**

**NEXT DATE: APRIL 15, 2020**

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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.

**MEDICAL EXAMINING BOARD  
MEETING MINUTES  
FEBRUARY 19, 2020**

**PRESENT:** Alaa Abd-Elsayed, M.D.; Milton Bond, Jr. (*arrived at 8:03 a.m.*), David Bryce, M.D.; Michael Carton (*joined via Skype at 8:30 a.m.*); Clarence Chou, M.D.; Padmaja Doniparthi, M.D.; Sumeet Goel, D.O.; Bradley Kudick; Lee Ann Lau, M.D.; David Roelke, M.D.; Kenneth Simons, M.D.; Sheldon Wasserman, M.D.; Timothy Westlake, M.D.

**STAFF:** Valerie Payne, Executive Director; Jameson Whitney, Legal Counsel; Megan Glaeser, Bureau Assistant; and other Department staff

**CALL TO ORDER**

Kenneth Simons, Chairperson, called the meeting to order at 8:01 a.m. A quorum was confirmed with eleven (11) members present.

**ADOPTION OF AGENDA**

**MOTION:** David Roelke moved, seconded by Lee Ann Lau, to adopt the Agenda as published. Motion carried unanimously.

**APPROVAL OF MINUTES OF JANUARY 15, 2020**

**Amendment to the Minutes**

- Credentialing Matters; Application Review; David Kuester, M.D. – Physician License Renewal Applicant
  - Amend to add: “...to **deny a Full License and** approve...”

**MOTION:** Bradley Kudick moved, seconded by David Roelke, to adopt the Minutes of January 15, 2020 as amended. Motion carried unanimously.

(*Milton Bond, Jr. arrived at 8:03 a.m.*)

**LEGISLATION AND POLICY MATTERS**

**2019 Senate Bill 399, Relating to Temporary Practice by Physicians at Camps, Providing an Exemption from Emergency Rule Procedures, and Granting Rule-Making Authority**

**MOTION:** Timothy Westlake moved, seconded by Sheldon Wasserman, to strongly oppose SB 399, the “Camp Physician’s Bill”, due to concerns over section 1 (a) relating to granting substantial equivalence to foreign licensees. We believe this could present a precedent setting significant danger to the safety of the public and patients in our state and wish to voice the strongest opposition possible. Motion carried unanimously.

**REPORT OF RECOMMENDATIONS FROM THE MEDICAL EXAMINING BOARD  
LICENSURE FORMS COMMITTEE**

(*Michael Carton joined via Skype at 8:30 a.m.*)

**MOTION:** Lee Ann Lau moved, seconded by David Roelke, to pursue legislative changes to modify the automatic renewal period from five years to one year and to authorize the legislative liaisons to take any action necessary to effect this change. Motion carried unanimously.

**MOTION:** Lee Ann Lau moved, seconded by Alaa Abd-Elseyed, to approve the initial application form 570 as amended and recommend to the department to adopt. Motion carried unanimously.

**MOTION:** Lee Ann Lau moved, seconded by David Bryce, to approve the medicine and surgery renewal application form as amended and recommend to the department to adopt. Motion carried unanimously.

## **FEDERATION OF STATE MEDICAL BOARDS MATTERS**

### ***FSMB 2020 Annual Meeting – April 29-May 2, 2020 – San Diego, CA***

**MOTION:** Sumeet Goel moved, seconded by Clarence Chou, to authorize Kenneth Simons to designate a Physician member, as the Board's delegate, and a public member as the Board's alternate delegate, to attend the FSMB 2020 Annual Meeting on April 29-May 2, 2020 in San Diego, CA and to authorize travel. Motion carried unanimously.

## **CE BROKER**

**MOTION:** Milton Bond, Jr. moved, seconded by Lee Ann Lau, to request the department draft a scope statement regarding MED 13 pertaining to the use of electronic continuing medical education tracking and reporting. Motion carried unanimously.

**MOTION:** Lee Ann Lau moved, seconded by Sheldon Wasserman, to request the department move forward with a request for bids related to procurement of an electronic continuing medical education tracking and reporting system and to designate David Roelke and Bradley Kudick to work with the Executive Director, Board Legal Counsel, and Budget & Policy Manager and other department staff as necessary. Motion carried unanimously.

## **CLOSED SESSION**

**MOTION:** Bradley Kudick moved, seconded by David Roelke, to convene to Closed Session to deliberate on cases following hearing (§ 19.85 (1) (a), Stats.); to consider licensure or certification of individuals (§ 19.85 (1) (b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85 (1) (b), Stats. and § 448.02 (8), Stats.); to consider individual histories or disciplinary data (§ 19.85 (1) (f), Stats.); and to confer with legal counsel (§ 19.85 (1) (g), Stats.). Kenneth Simons, the Chairperson, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: Alaa Abd-Elseyed-yes; Milton Bond, Jr.-yes; David Bryce-yes; Michael Carton-yes; Clarence Chou-yes; Padmaja Doniparthi-yes; Sumeet Goel-yes; Bradley Kudick-yes; Lee Ann

Lau-yes; David Roelke-yes; Kenneth Simons-yes; Sheldon Wasserman-yes; and Timothy Westlake-yes. Motion carried unanimously.

The Board convened into Closed Session at 9:54 a.m.

## **CREDENTIALING MATTERS**

### **Waiver of Post-Graduate Training**

*Jose Exaire*

**MOTION:** Lee Ann Lau moved, seconded by Timothy Westlake, to approve the waiver of the 24 months of approved post-graduate training for Jose Exaire. Motion carried unanimously.

*Michael Perez Rodriguez*

**MOTION:** Doniparthi moved, seconded by Kudick, to deny the waiver of the 24 months of approved post-graduate training for Michael Perez Rodriguez.  
**Reason for Denial:** Documented education and training is not substantially equivalent pursuant to MED 1.02(3)(c). Motion carried unanimously.

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

### **Stipulations, Final Decisions and Orders**

*18 MED 001 – Douglas J. Woida, P.A.*

**MOTION:** Sumeet Goel moved, seconded by Clarence Chou, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Douglas J. Woida, P.A., DLSC Case Number 18 MED 001. Motion carried unanimously.

*18 MED 199 – Michael J. Melby, M.D.*

**MOTION:** Bradley Kudick moved, seconded by David Roelke, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Michael J. Melby, M.D., DLSC Case Number 18 MED 199. Motion carried unanimously.

*18 MED 238 – Michael J. Schneider, M.D.*

**MOTION:** Lee Ann Lau moved, seconded by Padmaja Doniparthi, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Michael J. Schneider, M.D., DLSC Case Number 18 MED 238. Motion carried unanimously.

***18 MED 327 – David J. Schwartz, M.D.***

**MOTION:** Timothy Westlake moved, seconded by David Bryce, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against David J. Schwartz, M.D., DLSC Case Number 18 MED 327. Motion carried unanimously.

***19 MED 081 – Amy L. Groff, D.O.***

**MOTION:** Lee Ann Lau moved, seconded by Bond, Jr., to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Amy L. Groff, D.O., DLSC Case Number 19 MED 081. Motion carried unanimously.

***19 MED 398 – James F. Tierney, M.D.***

**MOTION:** Timothy Westlake moved, seconded by Sheldon Wasserman, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against James F. Tierney, M.D., DLSC Case Number 19 MED 398. Motion carried unanimously.

**Administrative Warnings**

***18 MED 199 – C.C.T.***

**MOTION:** Timothy Westlake moved, seconded by David Bryce, to issue an Administrative Warning in the matter of C.C.T., DLSC Case Number 18 MED 199. Motion carried unanimously.

***18 MED 301 – R.M.***

**MOTION:** David Roelke moved, seconded by Sumeet Goel, to issue an Administrative Warning in the matter of R.M., DLSC Case Number 18 MED 301. Motion carried unanimously.

***18 MED 553 – A.S.***

**MOTION:** Lee Ann Lau moved, seconded by Timothy Westlake, to issue an Administrative Warning in the matter of A.S., DLSC Case Number 18 MED 553. Motion carried unanimously.

***19 MED 018 – R.S.***

**MOTION:** Padmaja Doniparthi moved, seconded by Lee Ann Lau, to issue an Administrative Warning in the matter of R.S., DLSC Case Number 19 MED 018. Motion carried unanimously.

***19 MED 310 – P.B.D.***

**MOTION:** Clarence Chou moved, seconded by Padmaja Doniparthi, to issue an Administrative Warning in the matter of P.B.D., DLSC Case Number 19 MED 310. Motion carried unanimously.

***19 MED 356 – J.M.D.***

**MOTION:** Lee Ann Lau moved, seconded by Milton Bond, Jr., to issue an Administrative Warning in the matter of J.M.D., DLSC Case Number 19 MED 356. Motion carried unanimously.

***19 MED 378 – M.R.L.***

**MOTION:** Lee Ann Lau moved, seconded by Alaa Abd-Elsayed, to issue an Administrative Warning in the matter of M.R.L., DLSC Case Number 19 MED 378. Motion carried unanimously.

***19 MED 432 – J.B.M.C.***

**MOTION:** Lee Ann Lau moved, seconded by Sumeet Goel, to issue an Administrative Warning in the matter of J.B.M.C., DLSC Case Number 19 MED 432. Motion carried unanimously.

**Case Closings**

**MOTION:** Timothy Westlake moved, seconded by David Bryce, to close the following DLSC Cases for the reasons outlined below:

1. 17 MED 042 – H.W. – Prosecutorial Discretion (P5)
2. 17 MED 508 – J.M. – Insufficient Evidence
3. 18 MED 199 – D.D. – No Violation
4. 19 MED 018 – R.K.M. & G.D.N. – No Violation

Motion carried unanimously.

***17 MED 473 – S.D.***

**MOTION:** Milton Bond, Jr. moved, seconded by Sumeet Goel, to close DLSC Case Number 17 MED 473, against S.D., for No Violation. Motion carried unanimously.

***18 MED 406 – D.W.***

**MOTION:** Clarence Chou moved, seconded by David Bryce, to close DLSC Case Number 18 MED 406, against D.W., for Insufficient Evidence. Motion carried unanimously.

***19 MED 481 – L.J.Z.***

**MOTION:** David Roelke moved, seconded by Bradley Kudick, to close DLSC Case Number 19 MED 481, against L.J.Z., for No Violation. Motion carried unanimously.

***19 MED 483 – M.D.H. & L.B.R.***

**MOTION:** Bradley Kudick moved, seconded by Milton Bond, Jr., to close DLSC Case Number 19 MED 483, against M.D.H. & L.B.R., for No Violation. Motion carried unanimously.

***19 MED 488 – O.F.***

**MOTION:** Lee Ann Lau moved, seconded by Bradley Kudick, to refer DLSC Case Number 19 MED 488, against O.F., back to the department for further investigation. Motion carried unanimously.

**MONITORING MATTERS**

***Jesse Van Bommel – Requesting Termination of Order #2362***

**MOTION:** Bradley Kudick moved, seconded by Sheldon Wasserman, to deny the request of Jesse Van Bommel, M.D. for termination of order #2362.  
**Reason for Denial:** Failure to show continuous compliance with order for at least five years. Motion carried unanimously.

*(Kenneth Simons recused himself and left the room for deliberation and voting in the matter concerning Jesse Van Bommel, requesting termination of order #2362.)*

**RECONVENE TO OPEN SESSION**

**MOTION:** Alaa Abd-Elseyed moved, seconded by Clarence Chou, to reconvene to Open Session. Motion carried unanimously.

The Board reconvened to Open Session at 11:12 a.m.

**VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION**

**MOTION:** David Bryce moved, seconded by Sumeet Goel, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

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

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

**MOTION:** David Roelke moved, seconded by Timothy Westlake, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

**ADJOURNMENT**

**MOTION:** Bradley Kudick moved, seconded by Padmaja Doniparthi, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 11:13 a.m.

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

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Valerie Payne, Executive Director, on behalf of Dr. Kenneth Simons		<b>2) Date when request submitted:</b> 1/13/2020 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
<b>3) Name of Board, Committee, Council, Sections:</b> Medical Examining Board			
<b>4) Meeting Date:</b> 1/15/2020	<b>5) Attachments:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Under Legislative and Policy Matters 2019 Senate Bill 399, Relating to Temporary Practice by Physicians at Camps	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>	
<b>10) Describe the issue and action that should be addressed:</b> Discuss proposed bill, 2019 Senate Bill 399, relating to: temporary practice by physicians at camps, providing an exemption from emergency rule procedures, and granting rule-making authority.  This bill allows a person to practice for up to 90 days a year as a physician for campers and staff at a recreational and educational camp licensed in this state if two considerations are satisfied.			
<b>11) Authorization</b>			
Valerie Payne		1/13/2020	
<b>Signature of person making this request</b>		<b>Date</b>	
<b>Supervisor (if required)</b>		<b>Date</b>	
<b>Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date</b>			
<b>Directions for including supporting documents:</b> 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.			



## 2019 SENATE BILL 399

September 16, 2019 - Introduced by Senators PETROWSKI, BEWLEY, TIFFANY, JACQUE, KAPENGA, KOOYENGA, MARKLEIN, OLSEN and STROEBEL, cosponsored by Representatives EDMING, FELZKOWSKI, JAMES, MAGNAFICI, OLDENBURG, BALLWEG, DITTRICH, HORLACHER, KNODL, KULP, MILROY, MURSAU, NEYLON, PETRYK, PLUMER, QUINN, RAMTHUN, RODRIGUEZ, SKOWRONSKI, SPIROS, STAFSHOLT, TUSLER and WICHGERS. Referred to Committee on Elections, Ethics and Rural Issues.

1     **AN ACT to create** 448.033 of the statutes; **relating to:** temporary practice by  
2             physicians at camps, providing an exemption from emergency rule procedures,  
3             and granting rule-making authority.

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### *Analysis by the Legislative Reference Bureau*

This bill allows a person to practice for up to 90 days a year as a physician for campers and staff at a recreational and educational camp licensed in this state if both of the following are satisfied: 1) the person is licensed in good standing to practice medicine and surgery by another state or territory of the United States or a foreign country or province and the licensure standards in that jurisdiction are substantially equivalent to the requirements of this state; and 2) the person is not under active investigation by a licensing authority or law enforcement authority in any state, federal, or foreign jurisdiction. A person is required to submit a form to the Medical Examining Board before practicing as allowed under the bill.

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

4             **SECTION 1.** 448.033 of the statutes is created to read:  
5             **448.033 Temporary practice at camps.** (1) Notwithstanding s. 448.03 (1)  
6             (a), a person may at a recreational and educational camp licensed under s. 97.67 (1)

**SENATE BILL 399****SECTION 1**

1 practice medicine and surgery to provide treatment to campers and staff for not more  
2 than 90 days in any year without holding a license granted under this subchapter  
3 if all of the following apply:

4 (a) The person is licensed in good standing to practice medicine and surgery by  
5 another state or territory of the United States or a foreign country or province and  
6 the licensure standards in the jurisdiction where the person is licensed are  
7 substantially equivalent to the requirements for licensure as a physician under s.  
8 448.04 (1) (a).

9 (b) The person is not under active investigation by a licensing authority or law  
10 enforcement authority in any state, federal, or foreign jurisdiction.

11 (2) A person shall submit to the board a form provided by the board before  
12 practicing under sub. (1). The board may promulgate rules establishing the form to  
13 be submitted under this subsection.

14 **SECTION 2. Nonstatutory provisions.**

15 (1) Using the procedure under s. 227.24, the medical examining board may  
16 promulgate rules establishing the form that a person shall submit before practicing  
17 under s. 448.033 (1). Notwithstanding s. 227.24 (1) (a) and (3), the medical  
18 examining board is not required to provide evidence that promulgating a rule under  
19 this subsection is necessary for the preservation of the public peace, health, safety,  
20 or welfare and is not required to provide a finding of emergency for a rule  
21 promulgated under this subsection. Notwithstanding s. 227.24 (1) (c) and (2),  
22 emergency rules promulgated under this subsection may remain in effect until May  
23 1, 2020, or the date on which permanent rules take effect, whichever is sooner, and  
24 the effective period may not be further extended under s. 227.24 (2).



# Assembly Bill 870: Wisconsin Summer Camp Doctor Licensing

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January 25, 2018

Representative Joe Sanfelippo  
The Committee on Health  
In Support of Assembly Bill 870

Mr. Chairman,

I have been a camp doctor at North Star Camp for Boys in Hayward, Wisconsin for over twenty years. I volunteer one week of my time to contribute to the overall healthcare of the campers and staff. My role is mostly that of triage and support for the full-time healthcare team at the camp. I am a licensed physician in Minnesota and my need to maintain a full or temporary license in Wisconsin is onerous. I know this restricts other physicians from volunteering their time as camp doctors in Wisconsin. I firmly believe that if Wisconsin were to pass legislation similar to that of Minnesota for camp doctor licensure, more physicians would fill that role. This, in turn, would improve the overall healthcare for countless campers and staff.

William N. Lisberg, MD



## MEMORANDUM

**TO:** Representative Edming  
**FROM:** Konrad Paczuski, legislative attorney  
**DATE:** March 11, 2020  
**SUBJECT:** AB 428 / SB 399

### **Assembly Bill 428 and Senate Bill 399**

Assembly Bill 428, and its companion, Senate Bill 399, authorize physicians not licensed in Wisconsin to temporarily practice at camps, if among other things, the following conditions are satisfied: 1) the physician is licensed in good standing by another state or a foreign country or province and 2) the standards in the physician's licensing jurisdiction are substantially equivalent to Wisconsin's physician licensure requirements. Thus, if the physician licensure standards of a foreign country are not substantially equivalent to Wisconsin's, AB 428 would not authorize a physician licensed by that country to practice.

This provision of AB 428, s. 448.033(1), is similar to the provision authorizing temporary practice by psychologists in s. 455.03. That provision allows a psychologist licensed in a foreign country or province to practice if the Psychology Examining Board determines that the licensing standards are equivalent or higher than Wisconsin's licensure requirements.<sup>1</sup> Also, s. 441.115(2) authorizes certain nurses who hold a credential granted by a foreign country or province to temporarily practice in Wisconsin if the Board of Nursing determines that the requirements are substantially equivalent to Wisconsin's requirements.

The statutes contain no applicable definition of "foreign country" or "foreign province." Courts typically construe terms that are not defined in the statutes according to their plain meaning, and would likely interpret "foreign country" to mean something similar to "any country outside the United States."

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<sup>1</sup> A related rule exists at s. Psy 2.14, Wis. Adm. Code.

AB 428 also contains a rulemaking provision in s. 448.033(2) that authorizes the Medical Examining Board to promulgate rules establishing the form that physicians not licensed in Wisconsin must submit before practicing at a camp. Upon enactment of AB 428, the Medical Examining Board would also appear to have authority to promulgate rules consistent with s. 448.033(1)(a) of AB 428 that identify particular foreign countries that either have or don't have physician licensure standards that are substantially equivalent to Wisconsin's.

You are welcome to contact me at 608-504-5814 or [konrad.paczuski@legis.wisconsin.gov](mailto:konrad.paczuski@legis.wisconsin.gov) regarding any further questions.



# NORTH STAR CAMP FOR BOYS

EST. 1945

January 25, 2018

Representative Joe Sanfelippo  
The Committee on Health  
In Support of Assembly Bill 870

Mr. Chairman,

My name is Andy Shlensky and I am the owner and director of North Star Camp for Boys in Hayward, Wisconsin. This summer will be North Star's 74th summer in operation and we are anticipating campers and staff to travel to Hayward from over 25 states and 15 countries to enjoy the Northwoods of Wisconsin.

Many camps like ours rely on volunteer doctors to oversee the health and wellness of our camp community. With many of these doctors traveling in from out of state, their options for obtaining a license do not seem to fit the situation. The requirements of the temporary license, including the paperwork and examination process, has proven it can take up to six months. They also have the option of obtaining a permanent Wisconsin license, which involves almost the same process as the temporary one, but requires as many hours of continuing education than the hours that they are practicing in their one week of volunteering. These hurdles have caused us to have a shortage of doctors willing and able to volunteer at camp.

With each of these physicians licensed in their own state and subject to the standards of continuing education and updated background checks, I ask for your support of Assembly Bill 870 to help keep our campers safe. This would bring Wisconsin in line with other states like Minnesota and Maine who also have rich traditions in camping in streamlining the licensing process.

Though we're mostly treating jammed fingers and skinned knees, having a doctor at camp allows us to provide our campers and staff with the optimal level of medical supervision during their campers and staff. Thank you for your support in reforming this process to help keep our campers safe.

Thank you,

  
Andy Shlensky



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

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Valerie Payne, Executive Director on behalf of Kenneth Simons, Chairperson		<b>2) Date when request submitted:</b> 3/16/2020 <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>	
<b>3) Name of Board, Committee, Council, Sections:</b> Medical Examining Board			
<b>4) Meeting Date:</b> 3/18/2020	<b>5) Attachments:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Under Legislation and Policy Matters <b>21 NCAC 32B .1004 Limited License for Disasters and Emergencies for Physicians and Physician Assistants with Inactive North Carolina Licenses</b>	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>	
<b>10) Describe the issue and action that should be addressed:</b> Discussion and review of adopted emergency procedures put in place in North Carolina for physicians and physician assistants who do not have an active medical license issued by any jurisdiction, but who at one time had a full and unrestricted North Carolina medical license. The Board waived the requirements for licensure in the circumstances set forth in G.S. 90-12.5 and provided a list of conditions for which a limited emergency license could be applied.			
<b>11) Authorization</b>			
Valerie Payne		3/16/2020	
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			
<b>Directions for including supporting documents:</b> 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.			

1 21 NCAC 32B .1004 is adopted under emergency procedures as follows:

2  
3 **21 NCAC 32B .1004 LIMITED LICENSE FOR DISASTERS AND EMERGENCIES FOR**  
4 **PHYSICIANS AND PHYSICIAN ASSISTANTS WITH INACTIVE NORTH CAROLINA**  
5 **LICENSES.**

6  
7 (a) The Board shall waive the requirements for licensure in the circumstances set forth in G.S. 90-12.5.

8 (b) Limited Emergency License: Physicians and physician assistants who do not have an active medical license  
9 issued by any jurisdiction, but who at one time had a full and unrestricted North Carolina medical license, may apply  
10 for a limited emergency license on the following conditions:

11 (1) The applicant must certify and provide information sufficient to prove that he or she has practiced  
12 clinical medicine for at least eighty hours within the past two years;

13 (2) The applicant must have maintained an active and unrestricted medical license continuously for the  
14 ten-year period prior to going inactive;

15 (3) The applicant shall not have received any public discipline or inactivated his or her license while  
16 under investigation with such inactivation being reported to the National Practitioner Data Bank;  
17 and

18 (4) During the declared state of emergency, the physician or physician assistant shall limit his or her  
19 medical practice to the area of practice that he or she engaged in prior to going inactive or another  
20 area in which he or she is competent to provide medical care.

21 (c) The applicant must complete a limited emergency license application.

22 (d) The Board may verify that the applicant practiced clinical medicine for at least eighty hours in the immediate  
23 two-year period.

24 (e) In response to a declared disaster or state of emergency and in order to best serve the public interest, the  
25 Board may limit the physician's or physician assistant's scope of practice.

26 (f) The Board shall have jurisdiction over all physicians and physician assistants practicing under this  
27 Emergency Rule for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General  
28 Statutes, and such jurisdiction shall continue in effect even after such physician has stopped practicing medicine under  
29 this Emergency Rule or the Limited Emergency License has expired.

30 (g) This license shall be in effect for the shorter of:

31 (1) ninety days from the date it is issued; or

32 (2) a statement by an appropriate authority is made that the emergency or disaster declaration has been  
33 withdrawn or ended and, at such time, the license issued shall become inactive.

34 (h) The physician assistant must practice under the direct supervision of an on-site physician and the supervising  
35 physician must be licensed in this State, approved to practice in this State during a disaster or state of emergency  
36 pursuant to G.S. 90-12.5, or approved under this Rule;

1 (i) Physician assistants and physicians practicing pursuant to this Rule are not required to maintain onsite  
2 documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required  
3 by 21 NCAC 32S .0213.

4

5 *History Note:* Authority G.S. 90-5.1(a)(3); G.S. 90-12.5

6 *Eff.* \_\_\_\_\_

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

**AGENDA REQUEST FORM**

<b>1) Name and title of person submitting the request:</b> Valerie Payne, Executive Director		<b>2) Date when request submitted:</b> March 24, 2020 <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>	
<b>3) Name of Board, Committee, Council, Sections:</b> Medical Examining Board			
<b>4) Meeting Date:</b> March 27, 2020	<b>5) Attachments:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Under Legislative and Policy Matters Person-Vue Testing Centers – Request for Board Comment and Feedback	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <i>(If yes, please complete <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>	
<b>10) Describe the issue and action that should be addressed:</b> Discussion of the impact of Pearson-Vue testing center closing testing centers: <ul style="list-style-type: none"> <li>• The Pearson-Vue testing centers are the only approved test sites for administering the NCLEX-RN and NCLEX-PN exams.</li> <li>• All testing centers were closed throughout the country through April 16.</li> <li>• Late Sunday evening, they moved to re-open test centers in “major metropolitan locations” beginning on March 25 – no determination of where those locations are.</li> <li>• For centers that will be open, specific practices are in place to provide for social distancing, hand sanitizer and thorough disinfecting of surfaces and test areas between uses.</li> </ul>			
<b>11) Authorization</b>			
Valerie Payne		March 24, 2020	
<b>Signature of person making this request</b>		<b>Date</b>	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date			
<b>Directions for including supporting documents:</b> <ol style="list-style-type: none"> <li>1. This form should be attached to any documents submitted to the agenda.</li> <li>2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director.</li> <li>3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.</li> </ol>			

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

**AGENDA REQUEST FORM**

1) Name and Title of Person Submitting the Request:  <b>Dale Kleven</b> <b>Administrative Rules Coordinator</b>		2) Date When Request Submitted:  <b>3/6/20</b> Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections:  <b>Medical Examining Board</b>			
4) Meeting Date:  <b>3/18/20</b>	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? <b>Administrative Rule Matters – Discussion and Consideration:</b> <b>1. Statement of Scope for Med 13, Relating to Continuing Medical Education for Physicians</b> <b>2. Pending or Possible Rulemaking Projects</b>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes ( <a href="#">Fill out Board Appearance Request</a> ) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed:   			
11) Signature of person making this request  <b><i>Dale Kleven</i></b>		Authorization	Date  <b><i>March 6, 2020</i></b>
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.			

# STATEMENT OF SCOPE

## Medical Examining Board

**Rule No.:** Med 13

**Relating to:** Continuing Medical Education for Physicians

**Rule Type:** Permanent

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

N/A

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

The objective of the proposed rule is to clarify that a physician's use of electronic continuing medical education tracking and reporting is permitted.

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

The Board has identified the need for an update of its rules as identified above to ensure clarity and consistency with current methods for tracking and reporting continuing medical education. The alternative of not updating the rules would be less beneficial to affected entities.

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

Section 15.08 (5) (b), Stats., provides an examining board "[s]hall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . ."

Section 448.40 (1), Stats., provides that the Medical Examining Board "may promulgate rules to carry out the purposes of this subchapter, including rules requiring the completion of continuing education, professional development, and maintenance of certification or performance improvement or continuing medical education programs for renewal of a license to practice medicine and surgery."

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

80 hours

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

Wisconsin licensed physicians and providers of continuing medical education for physicians

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

None.

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

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

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

Approved for publication:

Approved for implementation:

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Authorized Signature

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Authorized Signature

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Date Submitted

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Date Submitted

# Quarterly FSMB Update on USMLE

March 2020 - First Edition



## FSMB and NBME Announce Upcoming Policy Changes to USMLE

### Upcoming Policy Changes

On February 12, 2020, the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®), co-sponsors of the United States Medical Licensing Examination® (USMLE®), announced the following upcoming policy changes to the USMLE program -

- Changing Step 1 score reporting from a three-digit numeric score to reporting only pass/fail;
- Reducing the allowable number of exam attempts on each Step or Step Component from six to four; and
- Requiring all examinees to successfully pass Step 1 as a prerequisite for taking Step 2 Clinical Skills.

### Change to Pass/Fail Reporting for Step 1

**What it means:** The USMLE program will change score reporting for Step 1 from a three-digit numeric score to reporting only a pass/fail outcome.

**Implementation:** No earlier than January 1, 2022.

The FSMB and NBME believe that changing Step 1 score reporting to pass/fail can help reduce some of the current overemphasis on USMLE performance, while also retaining the ability of licensing authorities to use the exam for its primary purpose of licensure eligibility. They also believe that moving to pass/fail reporting of Step 1 while retaining a scored Step 2 CK represents a positive step toward system-wide change, while limiting large-scale disruption to the overall educational and licensing environment. Finally, they view this change as an important first step toward facilitating broader, system-wide changes to improve the transition from undergraduate to graduate medical education.

### Change to the USMLE Attempt Limit Policy

**What it means:** An examinee will be ineligible to take a Step or Step Component if the examinee has made four (4) or more prior attempts on that Step or Step Component, including incomplete attempts.

**Implementation:** No earlier than January 1, 2021.

The USMLE Composite Committee voted to change the number of allowed attempts to protect the integrity of the exam and more closely match the attempt limits imposed by state medical boards in the majority of states. As part of its review, the committee reviewed information showing that it is uncommon for individuals with multiple repeated attempts on to complete the examination sequence successfully, gain access to postgraduate training and, ultimately, receive a license to practice medicine in the United States.

### Exam Prerequisite for Step 2 Clinical Skills

**What it means:** All examinees will be required to pass Step 1 in order to take Step 2 CS.

**Implementation:** No earlier than March 1, 2021.

In taking this action, the USMLE Composite Committee considered multiple factors to ensure that the program fulfills its ongoing mission to protect the public by providing medical licensing authorities with a secure, high-quality assessment of prospective physicians.

### Want More Information?

**Available now - Podcast & additional details:**

<https://www.usmle.org/announcements/?ContentId=264>

**Join us for an upcoming webinar:**

Monday, April 13 from 3:00 - 4:00 pm (Central)

Webinar link: <https://fsmb.adobeconnect.com/usmle041320/>

Audio: (866) 228-5702; passcode: 645993

## Questions About USMLE?

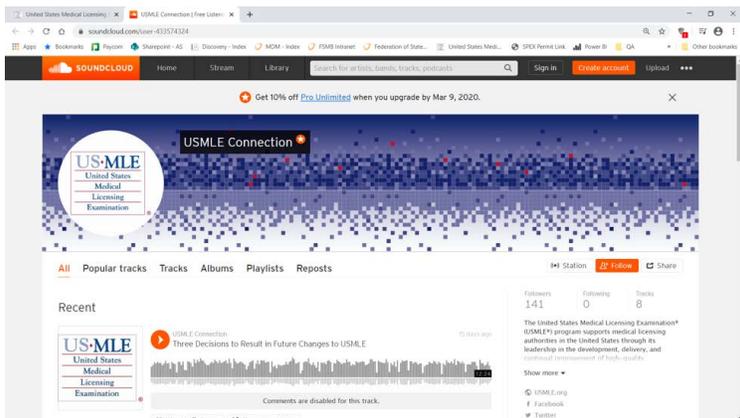
Contact Frances Cain, Director of Assessment Services, at [fcain@fsmb.org](mailto:fcain@fsmb.org) or (817) 868-4022 for more information.

## Podcasts: USMLE Connection

The USMLE has a series of podcasts - USMLE Connection - available to interested listeners.

Current podcasts focus on the topic of USMLE scoring and the Invitational Conference on USMLE Scoring (InCUS) that was held in March 2019, as well as the three upcoming USMLE policy changes.

The podcasts are available on the USMLE's Soundcloud page at: <https://soundcloud.com/user-433574324>



## Change in Step 3 Minimum Passing Score

In December 2019, the USMLE Management Committee decided to raise the Step 3 minimum passing score from 196 to 198. As part of its decision, the committee considered information from multiple sources including:

- Recommendations from independent groups of physicians from medical schools and state medical boards who participated in content-based standard-setting activities in 2019;
- Results of surveys of various groups (e.g., state licensing representatives, medical school faculty, examinees) concerning the appropriateness of current passing requirements for the Step 3 examination;
- Data on trends in examinee performance; and
- Data on precision of pass/fail classifications.

This change will apply to Step 3 examinees who take a Step 3 examination that began on or after January 1, 2020.

## Calendar

### March 2020

USMLE Committee for Individualized Review Meeting (review of irregular behavior cases)

### April 2020

USMLE Budget Committee Meeting  
USMLE Management Committee Meeting

## Key Policies

### Time Limit

The USMLE program's time limit recommendation is not changing.

The USMLE program recommends that the USMLE sequence be passed within a seven-year time period that begins when the examinee passes his/her first Step. State boards should consider exceptions for students engaged in dual-degree programs (e.g., MD/PhD, DO/PhD). More information is available in the Eligibility FAQs at:

<https://www.usmle.org/frequently-asked-questions/>

### Attempt Limit

Examinees are currently limited to 6 attempts per Step or Step Component. Additional attempts are allowed only at the request of a state medical board. On or after January 1, 2021, this will be reduced to 4 attempts per Step or Step Component. State boards may experience an increase in the number of requests for an exception to the 6-attempt limit as the implementation date of the 4-attempt limit nears.

## Resources

### Website

[www.usmle.org](http://www.usmle.org)

### Score Interpretation Guidelines

[https://www.usmle.org/pdfs/transcripts/USMLE\\_Step\\_Examination\\_Score\\_Interpretation\\_Guidelines.pdf](https://www.usmle.org/pdfs/transcripts/USMLE_Step_Examination_Score_Interpretation_Guidelines.pdf)

### Performance Data

<https://www.usmle.org/performance-data/>

### Bulletin of Information

<https://www.usmle.org/bulletin/>

### Social Media

 [facebook.com/usmle/](https://facebook.com/usmle/)

 [twitter.com/TheUSMLE](https://twitter.com/TheUSMLE)

 [linkedin.com/company/usmle](https://linkedin.com/company/usmle)

### May 2020

USMLE Composite Committee Meeting

### August 2020

USMLE Management Committee Meeting