



**VIRTUAL/TELECONFERENCE
MEDICAL EXAMINING BOARD
Virtual, 4822 Madison Yards Way, Madison
Contact: Tom Ryan (608) 266-2112
February 19, 2025**

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 January 15, 2025 (6-13)**
- C. Introductions, Announcements and Recognition
- D. Reminders: Conflicts of Interest, Scheduling Concerns
- E. Administrative Matters – Discussion and Consideration**
 - 1) Department, Staff and Board Updates
 - 2) Board Members – Term Expiration Dates
 - a. Bond, Jr., Milton – 7/1/2027
 - b. Chou, Clarence P. – 7/1/2027
 - c. Clarke, Callisia N. – 7/1/2028
 - d. Ferguson, Kris – 7/1/2025
 - e. Gerlach, Diane M. – 7/1/2028
 - f. Goel, Sumeet K. – 7/1/2027
 - g. Hilton, Stephanie – 7/1/2028
 - h. Lerma, Carmen – 7/1/2024
 - i. Leuthner, Steven R. – 7/1/2027
 - j. Majeed-Haqqi, Lubna – 7/1/2027
 - k. Schmeling, Gregory J. – 7/1/2025
 - l. Siebert, Derrick R. – 7/1/2025
 - m. Yu, Emily S. – 7/1/2028
 - 3) Wis. Stat. § 15.085 (3)(b) – Affiliated Credentialing Boards’ Biannual Meeting with the Medical Examining Board to Consider Matters of Joint Interest**
 - a. Physician Assistant Affiliated Credentialing Board – Jennifer Jarrett, Chairperson
- F. Physician Assistant Interstate Compact Update – Discussion and Consideration**

- G. 8:00 A.M. Public Hearing for Clearinghouse Rule 24-099 on Med 27, Relating to Provisional Licensure for International Physicians (14)**
 - 1) Review Public Hearing Comments and Respond to Clearinghouse Report (15-28)
- H. Administrative Rule Matters – Discussion and Consideration (29)**
 - 1) Scope Statement: Med 21, Relating to Patient Health Care Records (30-31)
 - 2) Preliminary Rule Draft: AT 4, Relating to Protocol Requirements (32-35)
 - 3) Pending or Possible Rulemaking Projects (36-37)
- I. Legislative and Policy Matters – Discussion and Consideration
- J. Federation of State Medical Boards (FSMB) Matters – Discussion and Consideration
- K. Newsletter Matters – Discussion and Consideration
- L. Interdisciplinary Advisory Council Liaison Report – Discussion and Consideration
- M. Professional Assistance Procedure (PAP) Discussion of Expansion to Include Mental Health Disorders
- N. Controlled Substances Board Report – Discussion and Consideration
- O. Interstate Medical Licensure Compact Commission (IMLCC) – Report from Wisconsin’s Commissioners – Discussion and Consideration
- P. Screening Panel Report
- Q. Future Agenda Items
- R. 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) Public Health Emergencies
 - 11) Legislative and Policy Matters
 - 12) Administrative Rule Matters
 - 13) Liaison Reports
 - 14) Board Liaison Training and Appointment of Mentors
 - 15) Informational Items
 - 16) Division of Legal Services and Compliance (DLSC) Matters
 - 17) Presentations of Petitions for Summary Suspension
 - 18) Petitions for Designation of Hearing Examiner
 - 19) Presentation of Stipulations, Final Decisions and Orders
 - 20) Presentation of Proposed Final Decisions and Orders
 - 21) Presentation of Interim Orders
 - 22) Petitions for Re-Hearing

- 23) Petitions for Assessments
- 24) Petitions to Vacate Orders
- 25) Requests for Disciplinary Proceeding Presentations
- 26) Motions
- 27) Petitions
- 28) Appearances from Requests Received or Renewed
- 29) Speaking Engagements, Travel, or Public Relation Requests, and Reports

S. 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.).

T. Deliberation on DLSC Matters

- 1) Proposed Stipulations, Final Decisions and Orders**
 - a. 23 MED 015 – Ali Shafiq (38-45)
 - b. 23 MED 145 – Steve I. Chang (46-51)
 - c. 23 MED 535 – Paul F. Halstrom (52-59)
 - d. 23 MED 541 – Andrew Goelz (60-66)
 - e. 24 MED 050 – Charles C. Chung (67-74)
 - f. 24 MED 0381 – Jennifer Bleak (75-86)
- 2) Complaints**
 - a. 22 MED 040 – A.C.R. (87-89)
 - b. 22 MED 133 – M.M.M. (90-98)
 - c. 22 MED 175 & 24 MED 0900 – J.T.J. (99-102)
 - d. 22 MED 185 – G.L.M. (103-108)
- 3) Administrative Warnings**
 - a. 23 MED 408 – T.L.P. (109-110)
 - b. 23 MED 538 – D.M.B. (111-112)
 - c. 23 MED 540 – F.Y.H. (113-114)
 - d. 24 MED 0328 – J.W.H. (115-116)
- 4) Case Closings**
 - a. 22 MED 108 – C.J.M. (117-123)
 - b. 23 MED 114 – N.H.R. (124-131)
 - c. 23 MED 167 – C.M. (132-139)
 - d. 23 MED 284 – S.N.P. (140-146)
 - e. 23 MED 405 – N.E.D. (147-155)
 - f. 23 MED 539 – S.W.G. (156-173)
 - g. 23 MED 594 – W.C.Y. (174-188)
 - h. 23 MED 608 – N.H. (189-202)
 - i. 24 MED 0152 – J.J.Y. (203-215)
 - j. 24 MED 0227 – C.R.L. (216-233)
 - k. 24 MED 0264 – J.E.R. (234-237)
 - l. 24 MED 0297 – E.J.M. (238-252)
 - m. 24 MED 0319 – R.H.K. (253-257)
- 5) Petition for Authorization to Request Extension of Time**
 - a. 22 MED 133 – M.M.M. (90-98)

U. Credentialing Matters

1) Application Review

- a. A.V. – Visiting Physician Applicant (IA 522996) **(258-283)**
- b. A.V.E. – Visiting Physician Applicant (IA 505883) **(284-407)**
- c. A.P. – Visiting Physician Applicant (IA 524890) **(408-430)**
- d. E.W. – Medicine and Surgery Applicant (IA 324834) **(431-493)**
- e. F.M.G. – Visiting Physician Applicant (IA 508794) **(494-510)**
- f. J.A.P. – Medicine and Surgery Renewal Applicant (IA 447687) **(511-582)**
- g. J.S. – Medicine and Surgery Applicant (IA 492145) **(583-619)**
- h. M.K. – Visiting Physician Applicant (IA 506087) **(620-638)**

2) Full Board Oral Interview

- a. **APPEARANCE:** P.B. – Medicine and Surgery Applicant (IA 276374) **(639-660)**
- b. **APPEARANCE:** M.M.B. – Medicine and Surgery Applicant (IA 351102) **(661-732)**

V. 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

W. Open Cases

X. Consulting with Legal Counsel

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

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

ADJOURNMENT

ORAL INTERVIEWS OF CANDIDATES FOR LICENSURE

VIRTUAL/TELECONFERENCE

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

CLOSED SESSION – Reviewing Applications and Conducting Oral Interview(s) of **one (1)** (at time of agenda publication) Candidate(s) for Licensure – **Dr. Leuthner** and **Dr. Goel**

NEXT MEETING: MARCH 19, 2025

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 virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board’s agenda, please visit the Department website at <https://dsps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of any agenda item may be changed by the board for the convenience of the parties. The person credentialed by the board has the right to demand that the meeting at which final action may be taken against the credential be held in open session. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer or reach the Meeting Staff by calling 608-267-7213.

**VIRTUAL/TELECONFERENCE
MEDICAL EXAMINING BOARD
MEETING MINUTES
JANUARY 15, 2025**

PRESENT: Milton Bond, Jr. (*excused at 9:42 a.m.*) (*arrived at 9:47 a.m.*); Clarence Chou, M.D.; Callisia Clarke, M.D. (*arrived at 8:01 a.m.*) (*excused at 8:59 a.m.*); Kris Ferguson, M.D.; Diane Gerlach, D.O.; Sumeet Goel, D.O., Stephanie Hilton; Steven Leuthner, M.D.; Lubna Majeed-Haqqi, M.D.; Gregory Schmeling, M.D.; Derrick Siebert, M.D.; Emily Yu, M.D.

ABSENT: Carmen Lerma

STAFF: Tom Ryan, Executive Director; Renee Parton, Legal Counsel; Nilajah Hardin, Administrative Rules Coordinator; Dialah Azam, Board Administration Specialist; and other Department staff

CALL TO ORDER

Clarence Chou, Chairperson, called the meeting to order at 8:00 a.m. A quorum was confirmed with eleven (11) members present.

(*Callisia Clarke arrived at 8:01 a.m.*)

ADOPTION OF AGENDA

Amendment to the Agenda

- **CHANGE** number of oral interviews from two (2) to one (1)

MOTION: Sumeet Goel moved, seconded by Emily Yu, to adopt the Agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES OF DECEMBER 18, 2024

MOTION: Gregory Schmeling moved, seconded by Diane Gerlach, to approve the Minutes of December 18, 2024 as published. Motion carried.

INTRODUCTIONS, ANNOUNCEMENTS AND RECOGNITION

Introduction and Welcome – DSPS Secretary Hereth

MOTION: Lubna Majeed-Haqqi moved, seconded by Sumeet Goel, to acknowledge and thank Secretary Hereth for their appearance to the Board. Motion carried unanimously.

ADMINISTRATIVE MATTERS

Election of Officers, Appointment of Liaisons and Alternates, Delegation of Authorities

Chairperson

NOMINATION: Clarence Chou nominated Gregory Schmeling for the Office of Chairperson. Gregory Schmeling accepted the nomination.

Tom Ryan, Executive Director, called for nominations three (3) times.

Gregory Schmeling was elected as Chairperson by unanimous voice vote.

Vice Chairperson

NOMINATION: Gregory Schmeling nominated Sumeet Goel for the Office of Vice Chairperson. Sumeet Goel accepted the nomination.

Tom Ryan, Executive Director, called for nominations three (3) times.

Sumeet Goel was elected as Vice Chairperson by unanimous voice vote.

Secretary

NOMINATION: Gregory Schmeling nominated Emily Yu for the Office of Secretary. Emily Yu accepted the nomination.

Tom Ryan, Executive Director, called for nominations three (3) times.

Emily Yu was elected as Secretary by unanimous voice vote.

ELECTION RESULTS	
Chairperson	Gregory Schmeling
Vice Chairperson	Sumeet Goel
Secretary	Emily Yu

MOTION: Sumeet Goel moved, seconded by Lubna Majeed-Haqqi, to thank Clarence Chou for his past leadership as Chairperson of this Board and his continued service. Motion carried unanimously.

Appointment of Liaison and Alternates

LIAISON APPOINTMENTS	
Credentialing Liaison(s)	Callisia Clarke, Lubna Majeed-Haqqi, Emily Yu, Diane Gerlach, Kris Ferguson, Gregory Schmeling, Derrick Siebert, Steven Leuthner <i>Alternate: Clarence Chou</i>
Education and Examinations Liaison(s)	Continuing Education: Diane Gerlach <i>Alternate: Clarence Chou</i> Examinations: Gregory Schmeling <i>Alternate: Clarence Chou</i>
Monitoring Liaison(s)	Kris Ferguson <i>Alternate: Clarence Chou</i>
Professional Assistance Procedure (PAP) Liaison(s)	Kris Ferguson <i>Alternate: Clarence Chou</i>
Legislative Liaison(s)	Gregory Schmeling <i>Alternate: Clarence Chou</i>
Travel Authorization Liaison(s)	Sumeet Goel <i>Alternate: Diane Gerlach</i>
Newsletter Liaison(s)	Sumeet Goel <i>Alternate: Gregory Schmeling</i>
Website Liaison(s)	Sumeet Goel <i>Alternate: Milton Bond Jr</i>
Opioid Abuse Report Liaison(s) per 440.035(2m)(c)	Kris Ferguson <i>Alternate: Derrick Siebert</i>
Prescription Drug Monitoring Program Liaison(s)	Kris Ferguson <i>Alternate: Lubna Majeed-Haqqi</i>
Appointed to Controlled Substances Board as per Wis. Stats. §15.405(5g) (MED)	Lubna Majeed-Haqqi <i>Alternate: Steven Leuthner</i>

OTHER APPOINTMENTS	
Council on Anesthesiologist Assistants	Kris Ferguson
Interdisciplinary Advisory Committee	Gregory Schmeling <i>Alternate: Emily Yu</i>
Interstate Medical Licensure Compact Commission (IMLCC) Representatives	Clarence Chou, Tom Ryan <i>Alternate: Gregory Schmeling</i>

Delegation of Authorities

Delegation to Approve the Disciplinary Case Report

MOTION: Sumeet Goel moved, seconded by Lubna Majeed-Haqqi, to authorize the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession) to review and approve the disciplinary case report required by Wis. Stat. § 448.14, for filing with the Legislature. Motion carried unanimously.

Delegation to Approve the Interstate Medical Licensure Compact Report

MOTION: Steven Leuthner moved, seconded by Emily Yu, to authorize the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession) to review and approve the interstate medical licensure compact investigations and rules report required by Wis. Stat. § 448.981(5), for filing with the Legislature. Motion carried unanimously.

Opioid Abuse Report Liaison(s) Delegation

MOTION: Emily Yu moved, seconded by Diane Gerlach, to delegate authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to review and approve the opioid abuse report required by Wis. Stat. § 440.035(2m)(c)1, for filing with the Legislature. Motion carried unanimously.

(Callisia Clarke excused at 8:59 a.m.)

Delegation to Department Attorneys to Approve Prior Discipline

MOTION: Sumeet Goel moved, seconded by Steven Leuthner, to delegate authority to Department Attorneys to approve an applicant's prior professional discipline which resulted in a forfeiture/fine/other monetary penalty, remedial education, and/or reprimand, that is 10 years old or older, and the previously disciplined credential is currently in good standing. Motion carried unanimously.

Delegation of Authority for Conviction Reviews

MOTION: Clarence Chou moved, seconded by Diane Gerlach, to delegate authority to the Department Attorneys to review and approve applications with convictions which are not substantially related to the practice of medicine. Motion carried unanimously.

Delegation to Handle Administrative Rule Matters

MOTION: Sumeet Goel moved, seconded by Lubna Majeed-Haqqi, to delegate authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to act on behalf of the Board or appoint a liaison to act on

behalf of the Board regarding administrative rule matters between meetings. Motion carried unanimously.

Controlled Substances Board Liaison

MOTION: Emily Yu moved, seconded by Steven Leuthner, to designate the Controlled Substances Board liaison to act as the representative on the Controlled Substances Board on behalf of the Chairperson. Motion carried unanimously.

Review and Approval of 2024 Delegations including new modifications

MOTION: Lubna Majeed-Haqqi moved, seconded by Milton Bond Jr., to reaffirm all delegation motions made in 2024, as reflected in the January 15, 2025 agenda materials, which were not otherwise modified or amended during the January 15, 2025 meeting. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

Preliminary Rule Draft: PA 1 to 4, Relating to Implementation of the Physician Assistant Licensure Compact

MOTION: Sumeet Goel moved, seconded by Milton Bond Jr., to designate Emily Yu to review the rule on PA 1 to 4, Relating to the Physician Assistant Licensure Compact. Motion carried unanimously.

(Milton Bond Jr. excused at 9:42 a.m.)

MOTION: Steven Leuthner moved, seconded by Lubna Majeed-Haqqi, to affirm the Board was presented the proposed rule on PA 1 to 4, relating to Implementation of the Physician Assistant Licensure Compact. Motion carried unanimously.

(Milton Bond Jr. arrived at 9:47 a.m.)

FEDERATION OF STATE MEDICAL BOARDS (FSMB) MATTERS

Consider Attendance: FSMB Annual Meeting, April 24-26, 2025, in Seattle, WA

MOTION: Emily Yu moved, seconded by Diane Gerlach, to authorize Gregory Schmeling to attend the 2025 FSMB Annual Meeting as the Board's voting delegate, to authorize Sumeet Goel to attend as the alternate delegate, Clarence Chou to attend as the second alternate, and to authorize the Staff Fellow and Milton Bond Jr. to attend. Motion carried unanimously.

CLOSED SESSION

MOTION: Diane Gerlach moved, seconded by Lubna Majeed-Haqqi, 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.). Gregory Schmeling, Chairperson, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: Milton Bond, Jr.-yes; Clarence Chou-yes; Kris Ferguson-yes; Diane Gerlach-yes; Sumeet Goel-yes; Stephanie Hilton-yes; Steven Leuthner-yes; Lubna Majeed-Haqqi-yes; Gregory Schmeling-yes; Derrick Siebert-yes; and Emily Yu-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:03 a.m.

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

Proposed Stipulations, Final Decisions and Orders

22 MED 305 – Jennifer A. Hussli

MOTION: Diane Gerlach moved, seconded by Milton Bond Jr., to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Jennifer A. Hussli, DLSC Case Number 22 MED 305. Motion carried unanimously.

23 MED 199 – Ryan N. Chellin

MOTION: Sumeet Goel moved, seconded by Steven Leuthner, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Ryan N. Chellin, DLSC Case Number 23 MED 199. Motion carried unanimously.

23 MED 384 – Karen S. Caldemeyer

MOTION: Diane Gerlach moved, seconded by Lubna Majeed-Haqqi, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Karen S. Caldemeyer, DLSC Case Number 23 MED 384. Motion carried unanimously.

23 MED 532 – Lyle M. Harrison

MOTION: Lubna Majeed-Haqqi moved, seconded by Emily Yu, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Lyle M. Harrison, DLSC Case Number 23 MED 532. Motion carried unanimously.

24 MED 0175 – Benjamin J. Hackett

MOTION: Steven Leuthner moved, seconded by Clarence Chou, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of

disciplinary proceedings against Benjamin J. Hackett, DLSC Case Number 24 MED 0175. Motion carried unanimously.

24 MED 0388 – Alyssa R. Kuhse

MOTION: Stephanie Hilton moved, seconded by Diane Gerlach, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Alyssa R. Kuhse, DLSC Case Number 24 MED 0388. Motion carried unanimously.

Complaints

23 MED 377 – K.C.H.

MOTION: Clarence Chou moved, seconded by Sumeet Goel, to find probable cause in DLSC Case Number 23 MED 377, to believe that K.C.H. has committed unprofessional conduct, and therefore, to issue the Complaint and hold a hearing on such conduct pursuant to Wis. Stat § 448.02(3)(b). Motion carried unanimously.

(Diane Gerlach recused themselves and left the room for deliberation and voting in the matter concerning K.C.H., DLSC Case Number 23 MED 377.)

23 MED 594 – W.C.Y.

MOTION: Clarence Chou moved, seconded by Emily Yu, to find probable cause in DLSC Case Number 23 MED 594, to believe that W.C.Y. has committed unprofessional conduct, and therefore, to issue the Complaint and hold a hearing on such conduct pursuant to Wis. Stat § 448.02(3)(b). Motion carried unanimously.

(Gregory Schmeling recused themselves and left the room for deliberation and voting in the matter concerning W.C.Y., DLSC Case Number 23 MED 594.)

Case Closings

MOTION: Clarence Chou moved, seconded by Steven Leuthner, to close the following DLSC Cases for the reasons outlined below:

- a) 23 MED 192 – J.J.S. – Insufficient Evidence
- b) 23 MED 463 – J.H.K. – No Violation
- c) 23 MED 510 – I.S. – Prosecutorial Discretion (P1)
- d) 24 MED 0126 – C.A.C. – No Violation
- e) 24 MED 0179 – E.W.L. – No Violation
- f) 24 MED 0185 – A.S. – Insufficient Evidence

Motion carried unanimously.

CREENTIALING MATTERS

Application Review

J.G.D. – Respiratory Care Practitioner Renewal Applicant (IA 374331)

MOTION: Sumeet Goel moved, seconded by Steven Leuthner, finds grounds exist to deny the Respiratory Care Practitioner renewal application of J.G.D., and offer them a limited license with the following conditions: five (5) year impairment order. **Reason for Denial:** Wis. Stat. § 448.06(1m) and (2). Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Lubna Majeed-Haqqi moved, seconded by Stephanie Hilton, to reconvene to Open Session. Motion carried unanimously.

The Board reconvened to Open Session at 10:53 a.m.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Lubna Majeed-Haqqi 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: Milton Bond Jr. moved, seconded by Emily Yu, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

ADJOURNMENT

MOTION: Lubna Majeed-Haqqi moved, seconded by Steven Leuthner, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 10:55 a.m.

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Nilajah Hardin Administrative Rules Coordinator		2) Date when request submitted: 02/07/25 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: Medical Examining Board			
4) Meeting Date: 02/19/25	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? 8:00 A.M. Public Hearing for Clearinghouse Rule 24-099 on Med 27, Relating to Provisional Licensure for International Physicians 1. Review Public Hearing Comments and Respond to Clearinghouse Report	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: The Board will hold a public hearing on this rule as required by the rulemaking process.			
11) Authorization			
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)		Date	
Directions for including supporting documents: 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

STATE OF WISCONSIN
MEDICAL EXAMINING BOARD

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

PROPOSED ORDER

An order of the Medical Examining Board to create Med 27, relating to Provisional Licensure for International Physicians.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: ss. 448.075, 448.40 (3), and 448.05 (2m), Stats.

Statutory authority: ss. 15.08 (5) (b), 448.40 (1), and 448.40 (3), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats. states that “The Board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.”

Section 448.40 (1), Stats., provides that “[t]he 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.”

Section 448.40 (3), Stats., as created by 2023 Wisconsin Act 214, states that “the board may promulgate rules defining “substantially similar” under s. 448.05 (2m).”

Related statute or rule: None.

Plain language analysis: The objective of the proposed rules is to implement the statutory changes from 2023 Wisconsin Act 214. This was achieved by creating a new chapter in the Wisconsin Administrative Code, chapter Med 27, that outlines the requirements for provisional licensure for an international physician.

Summary of, and comparison with, existing or proposed federal regulation: None.

Comparison with rules in adjacent states:

Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of the practice of medicine in Illinois, with input from the Illinois State Medical Board. The Illinois Department is also responsible for the promulgation of rules to implement certain sections of the Illinois Medical Practice Act of 1987. This Act contains requirements for applications, licensure, and discipline for physicians. In Illinois for an applicant that has graduated from a medical college outside of the US, it's territories, or Canada, their degree must be officially recognized by the country for medical licensure. Additionally, they must complete a 2 year course in a college of liberal arts and a postgraduate training course at least 12 months long approved by the Illinois Department. If the applicant has completed all requirements from a foreign medical school except the internship and "social service," they shall also submit an application to a medical college accredited by the Liaison Committee on Medical Education and complete any evaluation including nationally recognized tests or other examinations. Finally, they must also complete one academic year of supervised clinical training under that same medical college, in addition to the 12 month post graduate training program approved by the Illinois Department [225 Illinois Compiled Statutes ch. 60 s. 11].

Iowa: The Iowa Board of Medicine is responsible for the licensure and regulation of medicine and surgery in Iowa. Chapter 148 of the Iowa Code includes statutory requirements for licensure, composition and powers of the Iowa Board, and discipline for physicians. In Iowa an applicant must submit evidence of a diploma issued by a medical college approved by the Iowa Board, evidence of having passed an examination prescribed by the Iowa Board to determine qualification for medical licensure and evidence that the applicant has completed one year of postgraduate internship or resident training in a hospital approved by the Iowa Board. If the applicant does not have a diploma from an approved medical college, then they must submit a diploma from a medical college that has not been approved or disapproved by the Iowa Board and a certificate from the educational commission for foreign medical graduates or a similar accrediting body [Iowa Code ch. 148 s. 148.3].

Michigan: The Michigan Board of Medicine is responsible for the licensure and regulation of medical practice in Michigan. Act 368 Article 15 Part 170 of the Michigan Compiled Laws includes the regulations for medicine in Michigan, among several other occupations. Some of the requirements in this part include those for licensure, informed consent, and duties of the Michigan Board. In Michigan, an international applicant has to meet the following requirements: a degree in medicine from a medical school outside the US or Canada, demonstrate that they have engaged in the practice of medicine for no less than 10 years after completing their degree, complete no less than 3 years of postgraduate clinical training in an institution that is affiliated with a medical school listed on the directory of medical schools published by the World Health Organization, achieve a passing score on an initial medical licensure examination, and practice medicine under a clinical academic limited license issued by the Michigan Board for no less than 2 years with 800 hours per year in patient care [Michigan Compiled Laws s. 333.17031].

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of medicine in Minnesota. Part 6800 of the Minnesota Administrative Code includes requirements for licensure, continuing education, and hearings before the Minnesota Board. [Minnesota Administrative Rules part 5600]. Chapter 147 of the Minnesota Statutes, or the Minnesota Medical Practice Act, also includes requirements for licensure, practice, and discipline for physicians [Minnesota Statutes ch. 147]. In Minnesota, foreign medical graduate applicants must submit evidence that they have graduated from a medical school approved by the Minnesota Board that is equivalent to accredited US or Canadian schools. If the applicant has graduated from a medical school that is not accredited by the Liaison Committee for Medical Education or the American Osteopathic Association, the applicant may use the Federation of State Medical Boards' Federation Credential Verification Service to verify their school. The applicant shall also submit evidence of certification by the Educational Council for Foreign Medical Graduates, that they have working ability in the English language to engage in the practice of medicine, evidence of one year of graduate clinical medical training in an accredited program approved by the Minnesota Board, and evidence of having passed an examination prepared by the US Medical Licensing Examination or the Medical Council of Canada or the Comprehensive Osteopathic Medical Licensing Examination [Minnesota Statutes s.147.037].

Summary of factual data and analytical methodologies:

The Board reviewed 2023 Wisconsin Act 214, as well as referenced a summary from the Federation of State Medical Boards of recently proposed and enacted legislation on international medical graduates from various other states, as well as the Certification Commission for Healthcare Interpreters description of a healthcare interpreter, when drafting chapter Med 27.

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

The rule was posted for 14 days on the Department of Safety and Professional Services website to solicit economic impact comments, including how the proposed rules may affect businesses, local municipalities, and private citizens. No comments were received.

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis is attached.

Effect on small business:

These rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at Jennifer.Garrett@wisconsin.gov , or by calling (608) 266-2112.

Agency contact person:

Nilajah Hardin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; email at DSPSAdminRules@wisconsin.gov.

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

Comments may be submitted to Nilajah Hardin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received on or before the public hearing, held on February 19, 2025, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Chapter Med 27 is created to read:

Chapter Med 27
INTERNATIONAL PHYSICIAN PROVISIONAL LICENSE

Med 27.01 Authority and purpose. The rules in this chapter are adopted by the Medical Examining Board pursuant to the authority delegated by ss. 15.08 (5) (b) and 448.40 (3), Stats.

Med 27.02 Definitions. As used in this chapter:

- (1) “Basic fluency” means the ability to perform the practice of medicine competently, independently, and unsupervised in any setting and in any modality where health care is provided with the knowledge, skill, and ability required to communicate accurately in the English language in accordance with established standards of the profession in this state.
- (2) “Country of practice” means the country where the applicant currently practices or has recently practiced medicine and surgery under a credential in good standing.
- (3) “Provisional license” is a license granted under s. 448.05 (2m), Stats.
- (4) “Substantially similar” means a program that is comparable in program content and educational experience, but may differ in format or method of delivery. It implies reasonable confidence that the program has prepared its graduates to begin professional practice at the entry level as determined by the board to be comparable to those of a program in the United States.

Med 27.03 Provisional licensure. An applicant for a provisional license to practice medicine and surgery shall submit evidence to the board that the applicant satisfies all of the following:

- (1) Submission of a completed application for provisional licensure.
Note: Instructions for applications are available from the department of safety and professional services’ website at <http://dsps.wi.gov>.
- (2) Payment of the fee determined by the department under s. 440.05 (1), Stats.
- (3) Subject to ss. 111.321, 111.322, and 111.335, Stats., the applicant does not have an arrest or conviction record.
- (4) The applicant has an offer for full-time employment as a physician in this state from any of the following:

- (a) A federally qualified health center as defined in s. 253.075 (1) (e), Stats.
 - (b) A hospital as defined in s. 50.33 (2), Stats.
 - (c) An ambulatory surgical center as defined in 42 CFR 416.2.
 - (d) Any other health care facility approved by the board.
- (5) The applicant has been granted a medical doctorate or a substantially similar degree by an international medical program.
 - (6) The applicant has completed a residency program or a postgraduate medical training program that is substantially similar to a residency program.
 - (7) The applicant has practiced as a fully licensed physician in their country of practice for at least 5 years after completing a residency program or a postgraduate medical training program under sub. (6). For the purposes of this chapter, an applicant may have more than one country of practice if they are fully licensed to practice medicine and surgery in all the countries listed in their application.
 - (8) In the last 5 years before the application was submitted, the applicant has practiced continuously as a physician in their country of practice for at least one year.
 - (9) The applicant has been in good standing with the medical licensing or regulatory agency of their country of practice and does not have any pending disciplinary action against their license for the 5 years preceding the individuals application.
 - (10) The applicant has passed all steps of the United States Medical Licensing Examination (USMLE) Administered by the National Board of Medical Examiners and the Federation of State Medical Boards, or their successor organization.
 - (11) The applicant has obtained certification by the Educational Council for Foreign Medical Graduates (ECFMG), a successor organization, or another evaluation entity approved by the board.
 - (12) The applicant's federal immigration status and employment authorization legally permits them to work as a physician in this state.
 - (13) The applicant demonstrates basic fluency in the English language.
NOTE: Demonstration of English language proficiency may be accomplished by passage of an English proficiency examination such as the Occupational English Test Medicine.

Med 27.04 Oral Examination. (1) In addition to the examination under s. Med 27.03 (10), the applicant may be required to complete an oral examination to address any or all the following:

- (a) If the applicant can demonstrate basic fluency in the English language.
 - (b) If the applicant has completed a substantially similar residency or postgraduate medical training program under s. Med 27.03 (6).
 - (c) Whether the applicant has complied with ss. Med 27.03 (7) and (8).
 - (d) Any other concern that the board has with a provisional license application.
- (2) The board will notify each applicant required to complete an oral examination of the time and place scheduled for that applicant's examination. Failure of an applicant to appear for an examination as scheduled may void that applicant's application and require the applicant to reapply for licensure, unless prior scheduling arrangements have been made with the board by the applicant.

- (3) The oral examination will be conducted by at least two board members. The application is approved if all board members give them a passing grade. A passing grade is 90 percent. If the application is not approved, then it moves on to a full board oral examination.

Med 27.05 Practice limitations. A provisional license holder shall comply with all the following while performing the practice of medicine in this state:

- (1) The provisional license holder shall only practice under the supervision of a physician in a similar specialty who is licensed under ss. 448.04 (1) (a) and (ab), Stats.
- (2) The provisional license holder shall only practice in one of the practice settings under s. Med 27.03 (4) where they are employed.
- (3) Every 6 months or at the request of the board, the provisional license holder shall submit a statement certifying whether they are still employed as a physician in this state and whether they have been subjected to professional discipline as a result of their practice to the board. If the provisional license holder has been subjected to professional discipline, they shall submit a description of the circumstances to the board.

Med 27.06 Regular Licensure. A provisional credential holder who has practiced medicine and surgery full-time in this state while maintaining good standing, as determined by the Board, for 3 consecutive years, shall petition the Board for a regular license under s. 448.04 (1) (a), Stats. The supervising physician under s. Med 27.05 (1) shall submit written confirmation to the board that the applicant has successfully completed the requirements for a regular license under s. 448.04 (1) (a), Stats.

Med 27.07 Complaints, investigations, suspension, and revocation. The medical examining board may receive and investigate complaints against provisional license holders to determine whether a provisional license holder has violated the rules in this chapter or has violated any state or federal law or any other jurisdiction related to the practice of medicine. The board may reprimand a provisional license holder or deny, limit, suspend, or revoke a provisional license as a result of any such investigations and complaints.

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

(END OF TEXT OF RULE)

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date 12/20/24
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Med 27	
4. Subject Provisional Licensure for International Physicians	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected s. 20.165 (1) (hg)
7. Fiscal Effect of Implementing the Rule <input type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input checked="" type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses (if checked, complete Attachment A)	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule The objective of the proposed rules is to implement the statutory changes from 2023 Wisconsin Act 214. This was achieved by creating a new chapter in the Wisconsin Administrative Code, chapter Med 27, that outlines the requirements for provisional licensure for an international physician.	
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The rule was posted on the Department's website for 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.	
13. Identify the Local Governmental Units that Participated in the Development of this EIA. None.	
14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred) DSPS estimates a total of \$15,355.00 in one-time costs and \$51,000.00 in ongoing costs for implementing this rule. The one-time staff costs support 0.4 limited term employee to undertake tasks such rule drafting, legal drafting and review, updating forms and website, and training. The ongoing costs support 0.5 full-time equivalents for undertaking tasks such as answering increasing customer service volume, intaking and processing complaints, monitoring of disciplined licensees, and screening and prosecution of cases. The one-time costs cannot be absorbed in the currently appropriated budget.	
15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The benefits of implementing this rule are that the Medical Examining Board's section of the Administrative Code will be aligned with Wisconsin State Statutes.	
16. Long Range Implications of Implementing the Rule The Long range implications of this rule are standard requirements for provisional licensure of international physicians in Wisconsin.	

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

17. Compare With Approaches Being Used by Federal Government
None.

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

Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of the practice of medicine in Illinois, with input from the Illinois State Medical Board. The Illinois Department is also responsible for the promulgation of rules to implement certain sections of the Illinois Medical Practice Act of 1987. This Act contains requirements for applications, licensure, and discipline for physicians. In Illinois for an applicant that has graduated from a medical college outside of the US, its territories, or Canada, their degree must be officially recognized by the country for medical licensure. Additionally, they must complete a 2 year course in a college of liberal arts and a postgraduate training course at least 12 months long approved by the Illinois Department. If the applicant has completed all requirements from a foreign medical school except the internship and "social service," they shall also submit an application to a medical college accredited by the Liaison Committee on Medical Education and complete any evaluation including nationally recognized tests or other examinations. Finally, they must also complete one academic year of supervised clinical training under that same medical college, in addition to the 12 month post graduate training program approved by the Illinois Department [225 Illinois Compiled Statutes ch. 60 s. 11].

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Michigan: The Michigan Board of Medicine is responsible for the licensure and regulation of medical practice in Michigan. Act 368 Article 15 Part 170 of the Michigan Compiled Laws includes the regulations for medicine in Michigan, among several other occupations. Some of the requirements in this part include those for licensure, informed consent, and duties of the Michigan Board. In Michigan, an international applicant has to meet the following requirements: a degree in medicine from a medical school outside the US or Canada, demonstrate that they have engaged in the practice of medicine for no less than 10 years after completing their degree, complete no less than 3 years of postgraduate clinical training in an institution that is affiliated with a medical school listed on the directory of medical schools published by the World Health Organization, achieve a passing score on an initial medical licensure examination, and practice medicine under a clinical academic limited license issued by the Michigan Board for no less than 2 years with 800 hours per year in patient care [Michigan Compiled Laws s. 333.17031].

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of medicine in Minnesota. Part 6800 of the Minnesota Administrative Code includes requirements for licensure, continuing education, and hearings before the Minnesota Board. [Minnesota Administrative Rules part 5600]. Chapter 147 of the Minnesota Statutes, or the Minnesota Medical Practice Act, also includes requirements for licensure, practice, and discipline for physicians [Minnesota Statutes ch. 147]. In Minnesota, foreign medical graduate applicants must submit evidence that they have graduated from a medical school approved by the Minnesota Board that is equivalent to accredited US or Canadian schools. If the applicant has graduated from a medical school that is not accredited by the Liaison Committee for Medical Education or the American Osteopathic Association, the applicant may use the Federation of State Medical Boards' Federation Credential Verification Service to verify their school. The applicant shall also submit evidence of certification by the Educational Council for Foreign Medical Graduates, that they have working ability in the English

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

language to engage in the practice of medicine, evidence of one year of graduate clinical medical training in an accredited program approved by the Minnesota Board, and evidence of having passed an examination prepared by the US Medical Licensing Examination or the Medical Council of Canada or the Comprehensive Osteopathic Medical Licensing Examination [Minnesota Statutes s.147.037].

19. Contact Name Nilajah Hardin, Administrative Rules Coordinator	20. Contact Phone Number 608-267-7139
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This document can be made available in alternate formats to individuals with disabilities upon request.

ADMINISTRATIVE RULES
Fiscal Estimate & Economic Impact Analysis

ATTACHMENT A

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

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

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

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

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

5. Describe the Rule's Enforcement Provisions

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

- Yes No
-



Wisconsin Legislative Council

RULES CLEARINGHOUSE

Scott Grosz
Clearinghouse Director

Anne Sappenfield
Legislative Council Director

Margit Kelley
Clearinghouse Assistant Director

CLEARINGHOUSE REPORT TO AGENCY

[THIS REPORT HAS BEEN PREPARED PURSUANT TO S. 227.15, STATS. THIS IS A REPORT ON A RULE AS ORIGINALLY PROPOSED BY THE AGENCY; THE REPORT MAY NOT REFLECT THE FINAL CONTENT OF THE RULE IN FINAL DRAFT FORM AS IT WILL BE SUBMITTED TO THE LEGISLATURE. THIS REPORT CONSTITUTES A REVIEW OF, BUT NOT APPROVAL OR DISAPPROVAL OF, THE SUBSTANTIVE CONTENT AND TECHNICAL ACCURACY OF THE RULE.]

CLEARINGHOUSE RULE **24-099**

AN ORDER to create Med 27, relating to provisional licensure for international physicians.

Submitted by **MEDICAL EXAMINING BOARD**

12-20-2024 RECEIVED BY LEGISLATIVE COUNCIL.

01-22-2025 REPORT SENT TO AGENCY.

SG:SM

LEGISLATIVE COUNCIL RULES CLEARINGHOUSE REPORT

This rule has been reviewed by the Rules Clearinghouse. Based on that review, comments are reported as noted below:

1. STATUTORY AUTHORITY [s. 227.15 (2) (a)]

Comment Attached YES NO

2. FORM, STYLE AND PLACEMENT IN ADMINISTRATIVE CODE [s. 227.15 (2) (c)]

Comment Attached YES NO

3. CONFLICT WITH OR DUPLICATION OF EXISTING RULES [s. 227.15 (2) (d)]

Comment Attached YES NO

4. ADEQUACY OF REFERENCES TO RELATED STATUTES, RULES AND FORMS
[s. 227.15 (2) (e)]

Comment Attached YES NO

5. CLARITY, GRAMMAR, PUNCTUATION AND USE OF PLAIN LANGUAGE [s. 227.15 (2) (f)]

Comment Attached YES NO

6. POTENTIAL CONFLICTS WITH, AND COMPARABILITY TO, RELATED FEDERAL
REGULATIONS [s. 227.15 (2) (g)]

Comment Attached YES NO

7. COMPLIANCE WITH PERMIT ACTION DEADLINE REQUIREMENTS [s. 227.15 (2) (h)]

Comment Attached YES NO



Wisconsin Legislative Council

RULES CLEARINGHOUSE

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Clearinghouse Director

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Margit Kelley
Clearinghouse Assistant Director

CLEARINGHOUSE RULE 24-099

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Legislative Council Staff and the Legislative Reference Bureau, dated November 2020.]

1. Statutory Authority

The rule analysis cites both s. 448.40 (1) and (3), Stats., as statutory authority, but only sub. (3) is referenced in s. Med 27.01. Consider adding reference to sub. (1) in the rule text, or instead including a broader reference to s. 448.40, Stats.

2. Form, Style and Placement in Administrative Code

Throughout the proposed rule, use of acronyms should be reviewed for consistency with s. 1.08 (2) (c) of the Manual.

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

a. The Note under s. Med 27.03 (13) appears to include the exclusive method for compliance with the substantive requirement in sub. (13). Consider incorporating the Note material into the subsection, or further explaining other ways in which the requirement in sub. (13) may be satisfied. Further, the Note introduces the term “proficiency” while the rule text refers to “basic fluency”.

b. The relationship between s. Med 27.03 (13) and s. Med 27.04 (1) (a) is not clear. Perhaps consider adding material to s. Med 27.04 (1) (a) to clarify when an oral examination for basic fluency in the English language is triggered given that the requirement for demonstration of basic fluency in the English language is already required for all applicants for an international physician provisional license.

c. The material in s. Med 27.05 (1) should use “or” instead of “and” within the phrase “ss. 448.04 (1) (a) and (ab), Stats.”.

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

a. In s. Med 27.02 (4), it is confusing to define the term “Substantially similar” as a “program” because the term’s definition could not be neatly used as a way to refer to something

in a shorthand manner so as to avoid needing to have a long phrase repeated. Additionally, use of the phrase “it implies” suggests the second sentence of the definition is a substantive provision rather than a definition for a term, and references to determination by the board appear redundant with substantive requirements in ss. Med 27.03 and 27.04. Consider modifying the definition accordingly, perhaps as follows: “Substantially similar means comparable in program content and educational experience needed to prepare a person for professional practice at the entry level in the United States, but differing in format or method of delivery.” [s. 1.07, Manual.]


b. In s. Med 27.03 (9), “individuals” should be written “individual’s”.

c. In s. Med 27.04 (1), should the substantial similarity of a degree, as referenced in s. Med 27.03 (5), be grounds for oral examination? Compare to s. Med 27.04 (1) (b), which refers to substantial similarity as the term is used in s. Med 27.03 (6).

d. Section Med 27.04 (3) should be rewritten to avoid passive voice, to clarify the criteria needed to pass an oral examination before the “full board”, and to clarify whether an applicant has any option to be licensed after failure before the full board. Also, should the phrase “all board members” in the second sentence of this provision be clarified to refer only to board members who conduct the initial oral examination?

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Nilajah Hardin, Administrative Rules Coordinator		2) Date when request submitted: 02/07/25 <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: Medical Examining Board			
4) Meeting Date: 02/19/25	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Rule Matters – Discussion and Consideration 1. Scope Statement: Med 21, Relating to Patient Health Care Records 2. Preliminary Rule Draft: AT 4, Relating to Protocol Requirements 3. Pending or Possible Rulemaking Projects a. Rule Projects Chart	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <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: Attachments: Med 21 – Scope Statement AT 4 – Preliminary Rule Draft Rule Project Chart (Board Rule projects can be Viewed Here if Needed: https://dsps.wi.gov/Pages/RulesStatutes/PendingRules.aspx)			
11) Authorization			
 Signature of person making this request		02/07/25 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.			

STATEMENT OF SCOPE

MEDICAL EXAMINING BOARD

Rule No.: Med 21

Relating to: Patient Health Care Records

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 revise chapter Med 21 to remove references to “physician assistant,” as the Physician Assistant Affiliated Credentialing Board has their own chapters in the Wisconsin Administrative Code that govern their profession. The Board may make other updates as needed to align the Chapter with current medical practice standards.

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 intends to update Wisconsin Administrative Code chapter Med 21 to reflect the current relationship between the Medical Examining Board and the Physician Assistant Affiliated Credentialing Board. Both Boards now have their own parts of the Administrative Code for their professions. Therefore, Med 21 should be updated to reflect this. While the chapter is open, the Board will review areas that need to be updated to meet current practice standards as well. An alternative would be to not revise the administrative code to accurately reflect requirements for Physicians and Physician Assistants. This would create confusion and a lack of clarity for stakeholders and licensees on what the rules are for patient health care records in Wisconsin.

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

Section 15.08 (5) (b), Stats. states that “The Board shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession.”

Section 448.40 (1), Stats., provides that “[t]he 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:

Approximately 80 hours

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

Wisconsin licensed physicians and physician assistants, and their respective employers

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: Nilajah Hardin, Administrative Rules Coordinator, DSPSAdminRules@wisconsin.gov, (608) 267-7139.

Approved for publication:

Approved for implementation:

Authorized Signature

Authorized Signature

Date Submitted

Date Submitted

STATE OF WISCONSIN
ATHLETIC TRAINERS AFFILIATED CREDENTIALING BOARD

IN THE MATTER OF RULEMAKING : PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE : ATHLETIC TRAINERS AFFILIATED
ATHLETIC TRAINERS AFFILIATED : CREDENTIALING BOARD
CREDENTIALING BOARD : ADOPTING RULES
: (CLEARINGHOUSE RULE)

PROPOSED ORDER

An order of the Athletic Trainers Affiliated Credentialing Board to amend AT 4.01 (1) (intro.), (2) (intro.), (3) (intro.), (4) (intro.), and (4) (c), relating to protocol requirements.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted: Sections 448.955 (3) (c), 448.956 (1) (a), and 448.956 (4), Stats.

Statutory authority: Sections 15.085 (5) (b) and 448.9525 (2), Stats.

Explanation of agency authority:

Section 15.085 (5) (b), Stats. states that “[Each affiliated credentialing board] shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains, and define and enforce professional conduct and unethical practices not inconsistent with the law relating to the particular trade or profession...”

Section 448.9525 (2), Stats., states that “subject to s. 448.956 (1), (4) and (5), the affiliated credentialing board and the medical examining board shall jointly promulgate rules relating to the minimum requirements of a protocol required under s. 448.956 (1).”

Related statute or rule: None.

Plain language analysis:

The proposed rule updates the Protocol Requirements in chapter AT 4 by adding the statutory exceptions in ss. 448.956 (2) and (3), Stats., to AT 4.01 (1), (2), (3) and (4) as well as updates AT 4.01 (4) (c) to “manual therapy.” These changes align the Wisconsin Administrative Code more closely with current practice in the Athletic Training Profession.

Summary of, and comparison with, existing or proposed federal regulation: None.

Comparison with rules in adjacent states:

Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of Athletic Trainers in Illinois, with input from the Illinois Board of Athletic Trainers. The Illinois Board is also responsible for the promulgation of rules to implement certain sections of the Illinois Athletic Trainers Practice Act. This Act includes a list of duties that an Athletic Trainer can provide, including coordination with a physician to provide a physical exam, follow-up injury care, and reconditioning programs among other services. They can also perform several services independently including on-site injury care and evaluation. An evaluation and treatment protocol does not appear to be required in Illinois, however many elements of a protocol are listed as duties that an Athletic Trainer can provide [225 Illinois Compiled Statutes Chapter 5 Section 3 Subsection 4].

Iowa: The Iowa Public Health Department is responsible for the licensure and regulation of Athletic Trainers in Iowa, with input from the Iowa Board of Athletic Trainers. Chapter 152D of the Iowa Code outlines the statutes for the regulation of the practice of athletic training in Iowa. These statutes include general requirements for licensure and duties of the Iowa Board [Iowa Code Title IV Chapter 152D]. The Iowa Administrative Code includes rules that establish that each licensee must ensure that documentation of physician direction is obtained and maintained, including an athletic training service plan, referrals, initial evaluations and assessments, and dates of subsequent follow-up care. Athletic Trainers in Iowa are also required to have their athletic training service plans comply with the Practice Standards and Code of Professional Responsibility parts of January 2018 Standards and Professional Practice from the Board of Certification [645 Iowa Administrative Code Chapter 351].

Michigan: The Michigan Athletic Trainer Board is responsible for the licensure and regulation of Athletic Trainers in Michigan. Act 368 Article 15 of the Michigan Compiled Laws includes the regulations for Athletic Trainers in Michigan, among several other occupations [Michigan Compiled Laws Act 368 Article 15 Chapter 333 Part 179]. The Michigan Department of Licensing and Regulatory Affairs, in conjunction with the Michigan Board, promulgates administrative rules that include requirements for licensure, education, and examination, among other topics. Michigan has also adopted by reference the January 2021 Standards of Professional Practice from the Board of Certification. Outside of those standards, there do not appear to be any additional requirements for service or treatment plans or protocols [Michigan Administrative Code R 338.1301-R 338.1378].

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of Athletic Trainers in Minnesota. The Minnesota Athletic Trainers Act includes statutory requirements for limitations on practice, licensure, and continuing education, among other topics [Minnesota Statutes Section 148.7801 to 148.7815]. Part 5600 of the Minnesota Administrative Code includes rules established by the Minnesota Board, but does not mention requirements for service or treatment plans or protocols for athletic trainers [Minnesota Administrative Rules Chapters 5600 to 5620].

Summary of factual data and analytical methodologies:

The proposed rule was developed by reviewing Wisconsin Administrative Code Chapter AT 4 and obtaining input and feedback from the Athletic Trainers Affiliated Credentialing Board.

Pursuant to s. 448.9525 (2), Stats., a delegate from the Medical Examining Board worked with the Chairperson of the Athletic Trainers Affiliated Credentialing Board to finalize this rule.

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

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

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis will be attached upon completion.

Effect on small business:

These proposed rules do not have an economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department’s Regulatory Review Coordinator may be contacted at Jennifer.Garrett@wisconsin.gov or (608) 266-2112.

Agency contact person:

Nilajah Hardin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, Wisconsin 53708; email at DSPSAdminRules@wisconsin.gov.

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

Comments may be submitted to Nilajah Hardin, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, 4822 Madison Yards Way, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received on or before the public hearing, held on a date to be determined, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. AT 4.01 (1) (intro.), (2) (intro.), (3) (intro.), (4) (intro.), and (4) (c) are amended to read:

AT 4.01 (1) (intro.) Taking a basic medical history when necessary for evaluation and treatment of an injury or illness sustained while participating in physical activity and as outlined in ss. 448.956 (2) and (3), Stats. A basic medical history may include any of the following:

(2) (intro.) Evaluating an injury or illness sustained while participating in physical activity and as outlined in ss. 448.956 (2) and (3), Stats. An evaluation may include any of the following procedures:

(3) (intro.) Treating an injury or illness sustained while participating in physical activity and as outlined in ss. 448.956 (2) and (3), Stats. Treatment may include any of the following procedures:

(4) (intro.) Rehabilitating an injury or illness sustained while participating in physical activity and as outlined in ss. 448.956 (2) and (3), Stats. Rehabilitation may include any of the following procedures:

(4)(c) Trigger point and manual therapy.

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

(END OF TEXT OF RULE)

DRAFT

**Medical Examining Board
Rule Projects (updated 02/07/25)**

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause	Current Stage	Next Step
Not Assigned Yet	099-24	03/23/2027	Med 1	Licensure Requirements	Drafting	Board Approval of Preliminary Rule Draft for EIA Comment and Clearinghouse Review
Not Assigned Yet	Not Assigned Yet	TBD	Med 21	Patient Health Care Records	Scope Statement Reviewed at 02/19/25 Meeting	Submission for Governor's Approval and Publication in Administrative Register
24-039	117-23	06/26/2026	Med 24	Telemedicine and Telehealth	Legislative Review	Board Review and Approval of Adoption Order
24-099	055-24	11/28/2026	Med 27	Provisional Licensure for International Physicians	Public Hearing Held at 02/19/25 Meeting	Drafting Final Rule and Legislative Report

**Medical Examining Board
Affiliated Credentialing Board (ACB) Rule Projects**

Clearinghouse Rule Number	Scope #	Scope Expiration	ACB Name	Code Chapter Affected	Relating clause (description)	Current Stage	Next Step
Not Assigned Yet	097-22	06/12/2025	Athletic Trainers	AT 4	Protocol Requirements (updates protocol to describe scope of practice more accurately)	Drafting	Submission for EIA Comment and Clearinghouse Review
Not Assigned Yet	064-23	12/03/2026	Dietitians	DI 1	Definitions (Updates the definition of “regionally accredited college or university”)	Drafting Final Rule and Legislative Report	Submission for Governor Approval and Legislative Review
Not Assigned Yet	Not Assigned Yet	TBD	Massage Therapy and Bodywork Therapy	MTBT 3	Education (Updates requirements for initial licensure education hours)	Scope Statement Approved by Governor on 02/06/25	Submission for Publication in Administrative Register
24-054	080-23	04/23/2026	Massage Therapy and Bodywork Therapy	MTBT 6	Temporary License (updates requirements for examination relating to temporary license)	Drafting Final Rule and Legislative Report	Submission for Governor’s Approval and Legislative Review
24-050	072-22	02/22/2025	Occupational Therapists	OT 1 to 5	Implementation of the Occupational Therapy Licensure Compact	Legislative Review	Adoption Order Review at a Future Meeting
Not Assigned Yet	091-24	02/12/2027	Physician Assistant	PA 1 to 4	Implementation of the Physician Assistant Licensure Compact	Medical Examining Board Comment Period (per Wis. Stat. s. 15.085 (5) (b))	Submission for EIA Comment and Clearinghouse Review
25-002	065-24	12/03/2026	Physician Assistant	PA 4	Physical Examinations (Update unprofessional conduct to include standards for physical examinations)	Public Hearing Scheduled for 02/20/25 Meeting	Drafting Final Rule and Legislative Report
Not Assigned Yet	Not Assigned Yet	TBD	Podiatry	Pod 1 and 9	Supervision of Physician Assistants (Addresses changes due to 2021 WI Act 23)	Scope Statement Ready for Submission to Governor for Approval	Governor’s Approval and Submission for Publication in Administrative Register