



HYBRID (IN-PERSON/VIRTUAL)
NATUROPATHIC MEDICINE EXAMINING BOARD
Room N208, 4822 Madison Yards Way, 2nd Floor, Madison
Contact: Brad Wojciechowski (608) 266-2112
February 16, 2024

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. Be advised that board members may attend meetings designated as “Hybrid” in-person or virtually.

AGENDA

9:00 A.M.

OPEN SESSION – CALL TO ORDER – ROLL CALL

- A) Adoption of Agenda (1-3)**
- B) Approval of Minutes December 1, 2023 (4-5)**
- C) Introductions, Announcements and Recognition
- D) Reminder: Conflicts of Interest, Scheduling Concerns
- E) 9:00 a.m. Public Hearing: EmR 2402 Nat Med 1 to 10, relating to licensure requirements for naturopathic doctors and limited-scope naturopathic doctors.**
 - 1. Review Public Hearing Comments (6-40)
- F) 9:00 a.m. Public Hearing: Clearinghouse Rule 23-074 Nat Med 1 to 10, relating to naturopathic doctors.**
 - 1. Review Public Hearing Comments and Clearinghouse Report. (41-64)
- G) Administrative Matters – Discussion and Consideration (65-82)**
 - 1. Department, Staff and Board Updates
 - 2. 2024 Meeting Dates (65)
 - 3. Annual Policy Review (66-68)
 - 4. Election of Officers, Appointments of Liaisons and Alternates, Delegation of Authorities (69-82)
 - 5. Board Members – Board Member Status
 - a) Becker, Allison R – 7/1/2025
 - b) Crista, Jill – 7/1/2024
 - c) Doege-Brennan, Robyn R. – 7/1/2027
 - d) Kiefer, David S. – 7/1/2025
 - e) Meister, Katarina M. – 7/1/2027
 - f) Nichols, Kristine J. – 7/1/2024

g) Ratte, Paul J. – 7/1/2027

H) Legislation and Policy Matters – Discussion and Consideration

I) Credentialing Matters – Discussion and Consideration

1. **APPEARANCE:** Naturopathic Doctor Application on LicenseE. **(83)**

J) Administrative Rule Matters – Discussion and Consideration (84-89)

1. Incorporation of Standards Letter for CR 23-074 Nat Med 1 to 10, relating to naturopathic doctors. **(85-88)**
2. Update on Emergency Rule EmR 2402 Nat Med 1 to 10, relating to licensure requirements for NDs and limited scope NDs.
3. Pending and possible rulemaking projects. **(89)**

K) Discussion and Consideration of Items Added After Preparation of Agenda:

1. Introductions, Announcements and Recognition
2. Nominations, Elections, and Appointments
3. Administrative Matters
4. Election of Officers
5. Appointment of Liaisons and Alternates
6. Delegation of Authorities
7. Education and Examination Matters
8. Credentialing Matters
9. Practice Matters
10. Legislative and Policy Matters
11. Administrative Rule Matters
12. Liaison Reports
13. Public Health Emergencies
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

L) Public Comments

ADJOURNMENT

NEXT MEETING: APRIL 19, 2024

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 disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer, or the Meeting Staff at 608-267-7213.

**VIRTUAL/TELECONFERENCE
NATUROPATHIC MEDICINE EXAMINING BOARD
MEETING MINUTES
DECEMBER 1, 2023**

PRESENT: Allison Becker, Jill Crista, Robyn Doege-Brennan, Kristine Nichols, Paul Ratte

EXCUSED: David Kiefer, Katarina Meister

STAFF: Brad Wojciechowski, Executive Director; Joseph Ricker, Legal Counsel; Sofia Anderson, Administrative Rules Coordinator; Tracy Drinkwater, Board Administration Specialist; and other Department Staff

CALL TO ORDER

Jill Crista, Chairperson, called the meeting to order at 9:00 a.m. A quorum was confirmed with five (5) members present.

ADOPTION OF AGENDA

Amendments to the Agenda

- Next meeting updated to February 16, 2024

MOTION: Allison Becker moved, seconded by Paul Ratte, to adopt the Agenda as amended. Motion carried unanimously.

APPROVAL OF MINUTES OF OCTOBER 20, 2023

MOTION: Allison Becker moved, seconded by Kristine Nichols, to approve the Minutes of October 20, 2023, as published. Motion carried unanimously.

ADMINISTRATIVE RULE MATTERS

Emergency rule draft: Nat Med 1 to 10, relating to licensure requirements for naturopathic doctors and limited-scope naturopathic doctors.

MOTION: Robyn Doege-Brennan moved, seconded by Kristine Nichols, to authorize Chairperson to approve the emergency rule Nat Med 1 to 10 relating to licensure requirements, for emergency rule submission to the Governor, publication in an official newspaper and to approve the scheduling and holding of a public hearing. Motion carried unanimously.

Preliminary rule draft: Nat Med 1 to 10 relating to naturopathic doctors.

MOTION: Kristine Nichols moved, seconded by Paul Ratte, to authorize the Chairperson to approve and sign any required incorporation of standards letter required for Rule Project Nat Med 1 to 10, relating to naturopathic doctors, for submission to the Attorney General's office. Motion carried unanimously.

MOTION: Allison Becker moved, seconded by Robyn Doege-Brennan, to authorize the Chair to approve the revised preliminary rule draft of Nat Med 1 to 10, relating to

naturopathic doctors, for posting for economic impact comments and submission to the Clearinghouse. Motion carried unanimously.

ADJOURNMENT

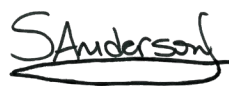
MOTION: Kristine Nichols moved, seconded by Robyn Doege-Brennan, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:00 p.m.

DRAFT

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson, Administrative Rules Coordinator		2) Date when request submitted: 02/06/2024 <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: Naturopathic Medicine Examining Board			
4) Meeting Date: February 16, 2024	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? 09:00 A.M. Public Hearing – Clearinghouse Rule 23-074 Nat Med 1 to 10, relating to naturopathic doctors. 1. Review Public Hearing comments and Clearinghouse Report. 09:00 A.M. Public Hearing – EmR 2402 Nat Med 1 to 10, relating to licensure requirements for naturopathic doctors and limited-scope naturopathic doctors. 1. Review Public Hearing comments.	
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. Attachments: 1. Preliminary rule draft as submitted to Clearinghouse. 2. Preliminary rule draft with proposed changes. 3. Clearinghouse comment report 4. Clearinghouse comment chart. 5. Emergency Rule published version.			
11) Authorization			
		02/06/2023	
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
NATUROPATHIC MEDICINE EXAMINING BOARD

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

PROPOSED ORDER

An order of the Naturopathic Medicine Examining Board to create Nat Med 1 to 6, relating to naturopathic doctors.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Ch. 466, Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), 227.21 (2), 466.03 (1) and (2), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., states that an examining board “[s]hall 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 227.11 (2) (a), Stats., states that “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 227.21 (2), Stats., states that “an agency may, with the consent of the attorney general, adopt standards established by technical societies and organizations of recognized national standing by incorporating the standards in its rules by reference to the specific issue or issues of the publication in which they appear, without reproducing the standards in full.”

Section 466.03 (1), Stats., states that the Naturopathic Medicine Examining Board shall establish administrative rules to determine a code of ethics governing professional conduct, standards of practice, continuing education requirements, and examination standards.

Section 466.03 (2), Stats., states that the Naturopathic Medicine Examining Board may establish administrative rules to further interpret s. 466.01 (6) (a) and (c) to identify diagnostic, therapeutic, or other practices or procedures that may be used by naturopathic doctors; prohibit diagnostic, therapeutic, or other practices; establish character and fitness requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish physical and mental competency requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish evidence of professional competency requirements for initial licensure or renewal of a license including evidence relating to an applicant's licensure status in other states; establish additional clinical, practical, or residency requirements for initial licensure; and adopt minimum malpractice insurance requirements for naturopathic doctors and limited-scope naturopathic doctors.

Related statute or rule:

None.

Plain language analysis:

The objective of the proposed rules is to implement the statutory changes from 2021 Wisconsin Act 130, which created the Naturopathic Medicine Examining Board. The act allows for the licensure, discipline, and practice of naturopathic doctors and limited-scope naturopathic doctors. The board is creating all Administrative Code chapters necessary to establish provisions for the practice, licensing, and conduct of naturopathic doctors and limited-scope naturopathic doctors.

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

N/A.

Summary of public comments received on statement of scope and a description of how and to what extent those comments and feedback were taken into account in drafting the proposed rule:

The Naturopathic Medicine Examining Board held a preliminary hearing on the statement of scope for this rule at its February 17, 2023 meeting. The following comment from Dr. Sara Norris, Legislative Chair of the Wisconsin Naturopathic Doctors Association, was received:

“The Wisconsin Naturopathic Doctors Association (WNDA) is a non-profit, membership organization advocating for naturopathic medicine in Wisconsin. WNDA fully supports

the timely creation and adoption of rules governing the practice of naturopathic medicine and the licensure of naturopathic doctors (NDs) in Wisconsin.

The passage of 2021 Act 130 created the Naturopathic Medical Examining Board (NMEB) to provide oversight of NDs, uphold the ethical standards of naturopathic medical practice, determine penalties for non-compliance, and ensure NDs are physically, mentally, and professionally competent. The licensing of NDs in Wisconsin will increase public safety, increase access to qualified providers, and give the public greater choice in their own health care.

The role of the NMEB is identical to other professional boards of other licensed professions and WNDa urges the use of existing professional boards in the health care field (such as the Pharmacy Examining Board) as a model for the NMEB.

WNDa asks that the promulgated rules preserve the ability for the NMEB to interpret the practices identified under the bill, that are included and excluded from the practices and procedures, that may be used by an ND without expanding the scope of practice of an ND or a limited license ND.

We thank you for your stewardship of this process and ask that you include the expertise and input of the WNDa members as you establish these rules.”

Comparison with rules in adjacent states:

Illinois:

Naturopathic doctors are not currently licensed in the state of Illinois. Bills have been introduced in the state legislature to create laws that will allow the licensure of naturopathic doctors.

Iowa:

Iowa does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Michigan:

Michigan does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Minnesota:

Minnesota naturopathic doctors are regulated under the Minnesota Board of Medical Practice Registered Naturopathic Doctor Advisory Council. The Minnesota Statutes establish definitions, scope of practice, professional conduct, registration and continuing

education requirements, renewal, and discipline for the practice of naturopathic medicine. [MN Stats. ch. 147E]

Summary of factual data and analytical methodologies:

The Board reviewed the statutory changes from 2021 Wisconsin Act 130 and promulgated rules as needed for the profession. While promulgating these rules, the Board referenced chapters from the Medical, Dentistry, and Nursing Examining Boards, as well as the Physician Assistant Affiliated Credentialing Board, among other sources. Standards incorporated by reference in the proposed rule have been submitted to the Attorney General for approval pursuant to s. 227.21 (2), Stats.

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

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

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis are attached.

Effect on small business:

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

Agency contact person:

Sofia Anderson, 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 Sofia Anderson, 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 16, 2024, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Nat Med 1 to 6 are created to read:

Nat Med 1

Authority and definitions

Nat Med 1.01 Authority. The rules in chs. Nat Med 1 to 6 are adopted by the naturopathic medicine examining board pursuant to the authority delegated by ss. 15.08 (5) (b), 227.11 (2), and 466.03, Stats.

Nat Med 1.02 Definitions. As used in chs. Nat Med 1 to 6:

- (1) “Board” means the naturopathic medicine examining board.
- (2) “Department” means the department of safety and professional services.
- (3) “Jurisprudence exam” means the board approved examination on the state law related to the practice of naturopathic medicine.
- (4) “Licensee” means a person licensed to practice as a naturopathic doctor or limited-scope naturopathic doctor in this state.
- (5) “Limited-scope naturopathic doctor” means a person licensed under s. 466.04 (2), Stats.
- (6) “Modes of treatment” means treatment, including diagnostic procedures, generally considered to be within the scope of current and acceptable standards of care.
- (7) “NABNE” means the North American Board of Naturopathic Examiners.
- (8) “Naturopathic doctor” means a person licensed under s. 466.04 (1), Stats.
- (9) “Naturopathic medicine” has the meaning given in s. 466.01 (6), Stats.
- (10) “Naturopathic physical medicine” has the meaning given in s. 466.01 (7), Stats.
- (11) “NPLEX” means the Naturopathic Physicians Licensing Examination administered by the North American Board of Naturopathic Examiners.
- (12) “Telehealth” has the meaning given in s. 440.01 (1) (hm), Stats.

Nat Med 2

Scope of Practice

Nat Med 2.01 Informed consent. (1) Any naturopathic doctor who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable naturopathic doctor standard is the standard for informing a patient. The reasonable naturopathic doctor

standard requires disclosure only of information that a reasonable naturopathic doctor in the same or a similar medical specialty would know and disclose under the circumstances.

(2) Under this section, a naturopathic doctor's duty to inform the patient does not require disclosure of any of the following:

(a) Detailed technical information that in all probability a patient would not understand.

(b) Risks apparent or known to the patient.

(c) Extremely remote possibilities that might falsely or detrimentally alarm the patient.

(d) Information in cases where the patient is incapable of consenting.

(e) Information about alternate modes of treatment for any condition the naturopathic doctor has not included in the diagnosis at the time the naturopathic doctor informs the patient.

(f) In an emergency, a naturopathic doctor is not required to communicate alternate modes of treatment to a patient if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.

(g) A naturopathic doctor may not be held responsible for failure to inform a patient of a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.

(3) When informed consent is refused or withdrawn, no retaliation may be threatened or carried out.

(4) A patient may withdraw informed consent at any time.

Nat Med 2.02 Recordkeeping. (1) A naturopathic doctor shall maintain complete and accurate patient health care records on every patient for a period of not less than 5 years after the date of the last entry, or for a longer period as may be otherwise required by law.

(2) A patient health care record prepared by a naturopathic doctor shall contain, at a minimum, the following clinical health care information:

(a) Pertinent patient history.

(b) Pertinent objective findings related to examination and test results.

(c) Assessment or diagnosis.

(d) Plan of treatment for the patient.

(e) Any written documentation of informed consent.

(3) Each patient health care record entry shall be dated, identify the practitioner, and be sufficiently legible to allow interpretation by other practitioners for the benefit of the patient.

Nat Med 2.03 Practice standards for naturopathic doctors. A naturopathic doctor may practice naturopathic medicine and naturopathic physical medicine as specified in ss. 69.18

(1) (cj), 146.82 (3) (a), 255.06 (1) (d), 448.56 (1), 462.04, 466.01 (6) (a) and (b), 466.01 (7) (a), and 466.05 (1) (a) and (b), Stats.

Nat Med 2.04 Prohibited practices. A naturopathic doctor may not engage in any practices specified in ss. 466.01 (6) (c) and (7) (b), Stats.

Nat Med 2.05 Telehealth practice. (1) A naturopathic doctor who uses telehealth in the diagnosis and treatment of a patient located in this state shall be licensed to practice as a naturopathic doctor by the board under s. 466.04 (1), Stats.

(2) A naturopathic doctor shall be held to the same standards of practice and conduct including patient confidentiality and recordkeeping, regardless of whether health care services are provided in person or by telehealth.

Nat Med 2.06 Advertising. Any advertisement, marketing, or other public representation by or referring to a licensee shall clearly state the licensee's authorized scope of practice, including the specific license held by the provider.

Nat Med 3

Licensure requirements and renewal

Nat Med 3.01. License not required. Pursuant s. 466.02 (2), Stats., certain individuals are not required to obtain a license under this chapter to engage in practice or activities relating to naturopathic medicine.

Nat Med 3.02 Licensure requirements. An applicant for licensure as a naturopathic doctor shall submit all of the following requirements:

(1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for initial licensure applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(2) The fee specified in s. 440.05 (1), Stats.

(3) Subject to ss. 111.321, 111.322 and 111.335, Stats, evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(4) Verified documentary evidence that the applicant has complied with at least one of the educational requirements specified in s. 466.04 (1) (d), Stats.

(5) Evidence satisfactory to the board that the applicant has satisfied the examination requirements under s. Nat Med 3.04.

(6) If required by the board, completion of an oral examination as specified in s. Nat Med 3.05.

Nat Med 3.03. Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice naturopathic medicine shall be granted to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. 440.09 (2), Stats. Subject to s. 440.09 (2m), Stats., the board may request verification necessary to make a determination under this section.

Note: Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

Nat Med 3.04. Examinations.

(1) EXAMINATIONS REQUIRED. Each applicant for licensure under this chapter must provide evidence satisfactory to the board that the applicant has passed all of the following:

(a) One of the following for the competency-based examination:

1. Part I Biomedical Science Examination and Part II Core Clinical Science Examination of the NPLEX.
2. For graduates of approved naturopathic medical programs prior to 1978, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.

(b) Part II Core Clinical Science Examination of the NPLEX for the pharmacology exam.

(c) Except as specified in par. (d), evidence of a passing score on a jurisprudence exam approved by the board. The passing score is 85 percent.

(d) For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (c) before the end of the first renewal period.

(2) FAILURE AND REEXAMINATION. If an applicant has failed any of the exams required under sub. (1) 4 or more times in this state or another licensing jurisdiction in the United States or Canada, the board may require the applicant to submit evidence satisfactory to the board of further professional training or education in examination areas in which the applicant had previously demonstrated deficiencies. If the evidence provided by the applicant is not satisfactory to the board, the board may require the applicant to obtain further professional training or education as the board deems necessary to establish the applicant's fitness to practice naturopathic medicine in this state. In order to determine any further professional training or education requirement, the board shall consider any information available relating to the quality of the applicant's previous practice, including the results of the applicant's performance on any oral examination required under s. Nat Med 3.05.

Nat Med 3.05 Oral Examination. (1) An applicant may be required to complete an oral examination if the applicant:

- (a) Has a medical condition which in any way impairs or limits the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
- (b) Uses chemical substances so as to impair in any way the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
- (c) Has been disciplined or had licensure denied by a licensing or regulatory authority in this state or another jurisdiction.
- (d) Has been found to have been negligent in the practice of naturopathic medicine or has been a party in a lawsuit in which it was alleged that the applicant had been negligent in the practice of naturopathic medicine.
- (e) Has been convicted of a crime the circumstances of which substantially relate to the practice of naturopathic medicine.
- (f) Has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.
- (g) Has engaged in the illegal use of controlled substances.
- (h) Has been subject to adverse formal action during the course of naturopathic medicine education, postgraduate training, hospital practice, or other naturopathic medicine employment.
- (i) Has not practiced naturopathic medicine for a period of 5 years or more prior to application unless the applicant has graduated from a school of naturopathic medicine within that period.
- (j) Has failed the national examination 4 times or more and the board has determined that further examination is required.

(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) An oral examination of an applicant is conducted by the board. The purpose of an oral exam is to evaluate the applicant's eligibility for a license.

(4) The grade of an exam shall be the applicant's final grade for the oral examination under this subsection. The passing grade for an oral exam under this subsection is 90 percent.

Nat Med 3.06 Renewal. (1) A licensee shall renew their license as specified by s. 440.08 (2) (a), Stats. and satisfy the following requirements:

- (a) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's eligibility.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(b) Pay the required fee prior to the date specified in s. 440.08 (2) (a), Stats.

(c) Attest to the completion of the requirements under s. Nat Med 4.02.

(2) LATE RENEWAL WITHIN 5 YEARS. If the application for renewal is filed less than 5 years after the expiration of the applicant's last license, the applicant shall pay the late renewal fee in s. 440.08 (3) (a), Stats., and meet the requirements under sub. (1).

(3) LATE RENEWAL AFTER 5 YEARS AND REINSTATEMENT.

(a) *Late renewal after 5 years.* If the application for renewal is 5 years or more after the expiration of the applicant's last license, the board shall make such inquiry as it finds necessary to determine whether the applicant is competent to practice under the license in this state and shall impose any reasonable conditions on reinstatement of the license, including oral examination, as the board deems appropriate. All applicants under this paragraph shall be required to pass the jurisprudence examination, which is the same examination given to initial applicants.

(b) *Reinstatement.* An applicant who has a license with unmet disciplinary requirements which has not been renewed within 5 years of the renewal date or whose license has been surrendered or revoked may apply to have the license reinstated in accordance with all of the following:

1. Evidence of completion of the requirements in par. (a).
2. Evidence of completion of disciplinary requirements, if applicable.
3. Evidence of rehabilitation or change in circumstances warranting reinstatement of the credential.

Nat Med 4

Continuing Education

Nat Med 4.01. Definitions. In this chapter:

(1) “Biennium” means the 2-year period immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats.

(2) “Continuing education” means professional educational activity designed to advance the professional skills and knowledge of a licensee in the practice of naturopathic medicine for the improvement of public health, safety, and welfare.

(3) “Continuing education credit hour” means 50 minutes of instruction or participation spent by the licensee in actual attendance or completion of an approved educational activity.

Nat Med 4.02. Continuing education requirements.

(1) During the biennium, unless granted a waiver under sub. (3), a licensee shall complete 30 credit hours of continuing education approved under s. Nat Med 4.03 and related to the practice of naturopathic medicine. The 30 credit hours of continuing education shall include 5 hours in pharmacy and 2 hours in ethics.

(2) During the time between initial licensure and commencement of a full 2-year licensure period, new licensees are not required to meet continuing education requirements.

(3) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.

(4) Continuing education credit hours may be counted for teaching or presenting a course that promotes the development, expansion, or improvement of a licensee's clinical skills and enhances their practice. Two hours of continuing education can be claimed for each credit hour of instruction. However, continuing education credit hours may not be counted for repeat presentations of the same course or program, or for courses or programs whose subject matter is pharmacy or ethics.

Nat Med 4.03. Acceptable continuing education programs. The board may approve a continuing education program that is approved by one of the following:

(1) North American Naturopathic Continuing Education Accreditation Council (NANCEAC) through the Federation of Naturopathic Medicine Regulatory Authority (FNMRA).

(2) American Medical Association (AMA) or American Osteopathic Association (AOA) category 1 courses through Accreditation Council for Continuing Medical Education (ACCME).

(3) American Association of Naturopathic Physicians (AANP).

(4) National Association of Boards of Pharmacy (NABP).

(5) Other recognized organizations devoted to the practice of naturopathic medicine and approved by the board.

Nat Med 4.04. Evidence of compliance.

(1) At the time of each renewal, each licensee shall sign a statement certifying that, within the 2 years immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., the licensee has completed the continuing education credit hours required under this chapter.

(2) A licensee who fails to complete the continuing education credit hours by the renewal date specified under s. 440.08 (2) (a), Stats., may not practice naturopathic medicine until the license is restored.

Nat Med 4.05. Recordkeeping. Every licensee shall maintain a written record of the continuing education hours required under this chapter for not less than 6 years after completion of each credit. Records required include but are not limited to attendance

verification records in the form of completion certificates or other documents supporting evidence of attendance.

Nat Med 5

Code of ethics and unprofessional conduct

Nat Med 5.01. Adoption of Standards. The American Association of Naturopathic Physicians code of ethics, as approved in August 2012, is incorporated by reference into this chapter.

Note: A copy of the above standards is on file in the office of the legislative reference bureau.

Nat Med 5.02 Unprofessional conduct. “Unprofessional conduct” includes any violation of the code of ethics adopted under s. Nat Med 5.01 or any of the following, or aiding or abetting the same:

(1) DISHONESTY AND CHARACTER.

- (a)** Violating or attempting to violate any provision or term of ch. 466, Stats., or of any valid rule of the board.
- (b)** Violating or attempting to violate any term, provision, or condition of any order of the board.
- (c)** Knowingly engaging in fraud or misrepresentation or dishonesty in applying for or procuring a license, or in connection with applying for or procuring periodic renewal of a license, or in otherwise maintaining such licensure.
- (d)** Knowingly giving false, fraudulent, or deceptive testimony while serving as an expert witness.
- (e)** Employing illegal or unethical business practices.
- (f)** Knowingly, negligently, or recklessly making any false statement, written or oral, which creates an unacceptable risk of harm to a patient, the public, or both.
- (g)** Engaging in any act of fraud, deceit, or misrepresentation, including acts of omission to the board or any person acting on the board's behalf.
- (h)** Obtaining any fee by fraud, deceit, or misrepresentation.
- (i)** Directly or indirectly giving or receiving any fee, commission, rebate, or other compensation for professional services not actually and personally rendered, unless allowed by law. This prohibition does not preclude the legal functioning of lawful professional partnerships, corporations, or associations.
- (j)** Engaging in uninvited in-person solicitation of actual or potential patients who, because of their circumstances, may be vulnerable to undue influence.
- (k)** Engaging in false, misleading, or deceptive advertising.

(L) Offering, undertaking, or agreeing to treat or cure a disease or condition by a secret means, method, device, or instrumentality; or refusing to divulge to the board upon demand the means, method, device, or instrumentality used in the treatment of a disease or condition.

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

(2) DIRECT PATIENT CARE VIOLATIONS.

(a) Practicing or attempting to practice under any license when unable to do so with reasonable skill and safety. A certified copy of an order issued by a court of competent jurisdiction finding that a person is mentally incompetent is conclusive evidence that the licensee was, for any period covered by the order, unable to practice with reasonable skill and safety.

(b) Departing from or failing to conform to the standard of minimally competent practice which creates an unacceptable risk of harm to a patient or the public whether or not the act or omission resulted in actual harm to any person.

(c) Prescribing, ordering, dispensing, administering, supplying, selling, giving, or obtaining any prescription medication in any manner that is inconsistent with the standard of minimal competence.

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

(e) Engaging in sexually explicit conduct, sexual contact, exposure, gratification, or other sexual behavior with or in the presence of a patient, a patient's immediate family, or a person responsible for the patient's welfare.

1. Sexual motivation may be determined from the totality of the circumstances and shall be presumed when the licensee has contact with a patient's intimate parts without legitimate medical justification for doing so.

2. For the purpose of this subsection, an adult receiving treatment shall be considered a patient for 2 years after the termination of professional services.

3. If the person receiving treatment is a child, the person shall be considered a patient for the purposes of this subsection for 2 years after termination of services or for 2 years after the patient reaches the age of majority, whichever is longer.

(f) Engaging in any sexual conduct with or in the presence of a patient or former patient who lacks the ability to consent for any reason, including medication or psychological or cognitive disability.

(g) Engaging in repeated or significant disruptive behavior or interaction with hospital personnel, patients, family members, or others that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered.

(h) Knowingly, recklessly, or negligently divulging privileged communication or other confidential patient health care information except as required or permitted by state or federal law.

(i) Performing services without required informed consent under s. Nat Med 2.01.

(j) Aiding or abetting the practice of an unlicensed, incompetent, or impaired person or allowing another person or organization to use one's license to practice.

(k) Appropriating the identity of another person holding a license issued by this or another board.

(L) Withdrawing from a doctor-patient relationship unilaterally and without reasonable justification by discontinuing a patient's treatment regimen when further treatment is medically indicated and any of the following occur:

1. The licensee fails to give the patient at least 30 days notice in advance of the date on which the licensee's withdrawal becomes effective.

2. The licensee fails to allow for patient access to or transfer of the patient's health record as required by law.

3. The licensee fails to provide for continuity of care during the period between the notice of intent to withdraw from the doctor-patient relationship and the date on which the doctor-patient relationship ends.

(3) LAW VIOLATIONS, ADVERSE ACTION, AND REQUIRED REPORTS TO THE BOARD.

(a) Failing to report within 30 days to the board any final adverse action taken against the licensee's authority to practice by another licensing jurisdiction.

(b) Failing to comply with state and federal laws regarding access to patient health care records.

(d) Failing to establish and maintain patient health care records consistent with the requirements of s. Nat Med 2.02 or as otherwise required by law.

(e) After a request by the board, failing to cooperate in a timely manner with the board's investigation of a complaint filed against a licensee. There is a rebuttable presumption that a licensee who takes longer than 30 days to respond to a request of the board has not acted in a timely manner.

(f) Having a license, certificate, permit, or registration granted by another state to practice naturopathic medicine limited, suspended or revoked, or subject to any other disciplinary action.

Nat Med 5.03. Discipline and penalties.

(1) The board may conduct investigations and hearings to determine whether a licensee has violated this chapter or has violated any state or federal law or any other jurisdiction that substantially relates to the practice of naturopathic medicine.

(2) The board may reprimand a licensee or deny, limit, suspend, or revoke a license if the licensee is found to have violated this chapter, ch. 466, Stats., or any other state or federal law.

(3) The penalty for violations of this chapter or any other related law is specified under s. 466.09, Stats.

Nat Med 6

Licensure requirements for limited-scope naturopathic doctors

Nat Med 6.01 Scope of practice. (1) Notwithstanding any other provision of law that permits a limited-scope naturopathic doctor to engage in any act that constitutes naturopathic medicine beyond what is authorized under this section and except as permitted by sub. (2), a limited-scope naturopathic doctor may only engage in the practices specified in ss. 466.01 (6) (a) 1. a. to c. and 3. a. to c., Stats.

(2) A limited-scope naturopathic doctor may extend their scope of practice by petitioning the board. This petition shall include details of the expansion of scope and proof of qualifications to perform the requested practice pursuant s. 466.05 (2) (a) 2., Stats.

Nat Med 6.02 License not required. Pursuant s. 466.02 (2), Stats., certain individuals are not required to obtain a license under this chapter to engage in practice or activities relating to naturopathic medicine.

Nat Med 6.03 Requirements for licensure. (1) An applicant for licensure as a limited-scope naturopathic doctor shall submit all of the following requirements:

(a) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(b) The fee specified in s. 440.05 (1), Stats.

(c) Subject to ss. 111.321, 111.322 and 111.335, Stats., evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(d) Evidence satisfactory to the board that the applicant has satisfied requirements under s. 466.04 (2) (b) 4. and 5., Stats.

(e) Evidence satisfactory to the board that the applicant has been continually practicing naturopathic medicine in this state for at least 10 years preceding the date of application to obtain a limited-scope naturopathic doctor license.

(f) Except as specified in par. (g), evidence of a passing score on a jurisprudence exam approved by the board. The passing score is 85 percent.

(g) For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (f) before the end of the first renewal period.

(h) Evidence satisfactory to the board that the applicant has exhibited a record of safety in the practice of naturopathic medicine or naturopathy.

(i) If required by the board, completion of an oral examination as specified under s. Nat Med 3.05.

Nat Med 6.04 Renewal. A licensee shall renew their license as specified by s. 440.08 (2) (a), Stats. and satisfy the following requirements:

(1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's eligibility.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(2) Pay the required fee prior to the date specified in s. 440.08 (2) (a), Stats.

(3) Attest to the completion of the requirements under s. Nat Med 4.02.

(4) If a limited-scope naturopathic doctor was issued an initial license by satisfying the requirement under s. 466.04 (2) (b) 5. d., Stats., the limited-scope naturopathic doctor shall, no later than the first renewal date after the conclusion of the 5-year period, submit evidence satisfactory to the board that the licensee has completed the education and training specified in the signed statement under s. 466.04 (2) (b) 5. d., Stats.

(3) LATE RENEWAL AFTER 5 YEARS AND REINSTATEMENT.

(a) *Late renewal after 5 years.* If the application for renewal is 5 years or more after the expiration of the applicant's last license, the board shall make such inquiry as it finds necessary to determine whether the applicant is competent to practice under the license in this state and shall impose any reasonable conditions on reinstatement of the license, including oral examination, as the board deems appropriate. All applicants under this paragraph shall be required to pass the jurisprudence examination, which is the same examination given to initial applicants.

(b) *Reinstatement.* An applicant who has a license with unmet disciplinary requirements which has not been renewed within five years of the renewal date or whose license has been surrendered or revoked may apply to have the license reinstated in accordance with all of the following:

1. Evidence of completion of the requirements in par. (a) if the credential has not been renewed within the last 5 years.

2. Evidence of completion of disciplinary requirements, if applicable.

3. Evidence of rehabilitation or change in circumstances warranting reinstatement of the credential.

Nat Med 6.05 Telehealth practice. (1) A limited-scope naturopathic doctor who uses telehealth in the diagnosis and treatment of a patient located in this state shall be licensed to practice as a limited-scope naturopathic doctor by the board under s. 466.04 (2), Stats.

(2) A licensed limited-scope naturopathic doctor shall be held to the same standards of practice and conduct including patient confidentiality and recordkeeping, regardless of whether health care services are provided in person or by telehealth.

Nat Med 6.06 Code of ethics and unprofessional Conduct. All provisions established under ch. Nat Med 5 also apply to the practice of limited-scope naturopathic doctors.

Nat Med 6.07 Informed Consent. The provisions established under s. Nat Med 2.01 also apply to the practice of limited-scope naturopathic doctors with the additional provision that limited-scope naturopathic doctors shall also disclose their license type and authorized scope of practice.

Nat Med 6.08 Recordkeeping. All provisions established under s. Nat Med 2.02 also apply to the practice of limited-scope naturopathic doctors.

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)

STATE OF WISCONSIN
NATUROPATHIC MEDICINE EXAMINING BOARD

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

PROPOSED ORDER

An order of the Naturopathic Medicine Examining Board to create Nat Med 1 to 6, relating to naturopathic doctors.

Analysis prepared by the Department of Safety and Professional Services.

ANALYSIS

Statutes interpreted:

Ch. 466, Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), 227.21 (2), 466.03 (1) and (2), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., states that an examining board “[s]hall 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 227.11 (2) (a), Stats., states that “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 227.21 (2), Stats., states that “an agency may, with the consent of the attorney general, adopt standards established by technical societies and organizations of recognized national standing by incorporating the standards in its rules by reference to the specific issue or issues of the publication in which they appear, without reproducing the standards in full.”

Section 466.03 (1), Stats., states that the Naturopathic Medicine Examining Board shall establish administrative rules to determine a code of ethics governing professional conduct, standards of practice, continuing education requirements, and examination standards.

Section 466.03 (2), Stats., states that the Naturopathic Medicine Examining Board may establish administrative rules to further interpret s. 466.01 (6) (a) and (c) to identify diagnostic, therapeutic, or other practices or procedures that may be used by naturopathic doctors; prohibit diagnostic, therapeutic, or other practices; establish character and fitness requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish physical and mental competency requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish evidence of professional competency requirements for initial licensure or renewal of a license including evidence relating to an applicant's licensure status in other states; establish additional clinical, practical, or residency requirements for initial licensure; and adopt minimum malpractice insurance requirements for naturopathic doctors and limited-scope naturopathic doctors.

Related statute or rule:

None.

Plain language analysis:

The objective of the proposed rules is to implement the statutory changes from 2021 Wisconsin Act 130, which created the Naturopathic Medicine Examining Board. The act allows for the licensure, discipline, and practice of naturopathic doctors and limited-scope naturopathic doctors. The board is creating all Administrative Code chapters necessary to establish provisions for the practice, licensing, and conduct of naturopathic doctors and limited-scope naturopathic doctors.

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

N/A.

Summary of public comments received on statement of scope and a description of how and to what extent those comments and feedback were taken into account in drafting the proposed rule:

The Naturopathic Medicine Examining Board held a preliminary hearing on the statement of scope for this rule at its February 17, 2023 meeting. The following comment from Dr. Sara Norris, Legislative Chair of the Wisconsin Naturopathic Doctors Association, was received:

“The Wisconsin Naturopathic Doctors Association (WNDA) is a non-profit, membership organization advocating for naturopathic medicine in Wisconsin. WNDA fully supports

the timely creation and adoption of rules governing the practice of naturopathic medicine and the licensure of naturopathic doctors (NDs) in Wisconsin.

The passage of 2021 Act 130 created the Naturopathic Medical Examining Board (NMEB) to provide oversight of NDs, uphold the ethical standards of naturopathic medical practice, determine penalties for non-compliance, and ensure NDs are physically, mentally, and professionally competent. The licensing of NDs in Wisconsin will increase public safety, increase access to qualified providers, and give the public greater choice in their own health care.

The role of the NMEB is identical to other professional boards of other licensed professions and WNDa urges the use of existing professional boards in the health care field (such as the Pharmacy Examining Board) as a model for the NMEB.

WNDa asks that the promulgated rules preserve the ability for the NMEB to interpret the practices identified under the bill, that are included and excluded from the practices and procedures, that may be used by an ND without expanding the scope of practice of an ND or a limited license ND.

We thank you for your stewardship of this process and ask that you include the expertise and input of the WNDa members as you establish these rules.”

Comparison with rules in adjacent states:

Illinois:

Naturopathic doctors are not currently licensed in the state of Illinois. Bills have been introduced in the state legislature to create laws that will allow the licensure of naturopathic doctors.

Iowa:

Iowa does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Michigan:

Michigan does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Minnesota:

Minnesota naturopathic doctors are regulated under the Minnesota Board of Medical Practice Registered Naturopathic Doctor Advisory Council. The Minnesota Statutes establish definitions, scope of practice, professional conduct, registration and continuing

education requirements, renewal, and discipline for the practice of naturopathic medicine. [MN Stats. ch. 147E]

Summary of factual data and analytical methodologies:

The Board reviewed the statutory changes from 2021 Wisconsin Act 130 and promulgated rules as needed for the profession. While promulgating these rules, the Board referenced chapters from the Medical, Dentistry, and Nursing Examining Boards, as well as the Physician Assistant Affiliated Credentialing Board, among other sources. Standards incorporated by reference in the proposed rule have been submitted to the Attorney General for approval pursuant to s. 227.21 (2), Stats.

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

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

Fiscal Estimate and Economic Impact Analysis:

The Fiscal Estimate and Economic Impact Analysis are attached.

Effect on small business:

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

Agency contact person:

Sofia Anderson, 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 Sofia Anderson, 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 16, 2024, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Nat Med 1 to 6 are created to read:

Nat Med 1

Authority and definitions

Nat Med 1.01 Authority. The rules in chs. Nat Med 1 to 6 are adopted by the naturopathic medicine examining board pursuant to the authority delegated by ss. 15.08 (5) (b), 227.11 (2), and 466.03, Stats.

Nat Med 1.02 Definitions. As used in chs. Nat Med 1 to 6:

- (1) “Board” means the naturopathic medicine examining board.
- (2) “Department” means the department of safety and professional services.
- “Emergency” means a circumstance in which there is an immediate risk to a patient's life, body part or function which demands prompt action.
- (3) “Jurisprudence exam” means the board approved examination on the state law related to the practice of naturopathic medicine.
- (4) “Licensee” means a person licensed to practice as a naturopathic doctor or limited-scope naturopathic doctor in this state.
- (5) “Limited-scope naturopathic doctor” means a person licensed under s. 466.04 (2), Stats.
- (6) “Modes of treatment” means treatment, including diagnostic procedures, generally considered by the naturopathic medicine profession to be within the scope of current and acceptable standards of care.
- (7) “NABNE” means the North American Board of Naturopathic Examiners.
- (8) “Naturopathic doctor” means a person licensed under s. 466.04 (1), Stats.
- (9) “Naturopathic medicine” has the meaning given in s. 466.01 (6), Stats.
- (10) “Naturopathic physical medicine” has the meaning given in s. 466.01 (7), Stats.
- (11) “NPLEX” means the Naturopathic Physicians Licensing Examination administered by the North American Board of Naturopathic Examiners.
- (12) “Telehealth” has the meaning given in s. 440.01 (1) (hm), Stats.

Nat Med 2

Standards of conduct and scope of practice

Nat Med 2.01 Informed consent. (1) Any naturopathic doctor who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these alternate modes of treatments. The reasonable naturopathic doctor standard is the standard for informing a patient. The reasonable naturopathic doctor standard requires disclosure only of information that a reasonable naturopathic doctor in the same or a similar medical specialty would know and disclose under the circumstances.

(2) Under this section, a naturopathic doctor's duty to inform the patient does not require disclosure of any of the following:

(a) Detailed technical information that in all probability a patient would not understand.

(b) Risks apparent or known to the patient.

(c) Extremely remote possibilities that might falsely or detrimentally alarm the patient.

(d) Information in cases where the patient is incapable of consenting.

(e) Information about alternate modes of treatment for any condition the naturopathic doctor has not included in the diagnosis at the time the naturopathic doctor informs the patient.

~~(f) In an emergency, a naturopathic doctor is not required to communicate alternate modes of treatment to a patient if failure to provide immediate treatment would be more harmful to a patient than immediate treatment information about alternate modes of treatment, if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.~~

~~(g) A naturopathic doctor may not be held responsible for failure to inform a patient of a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification. Information about a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.~~

(3) When informed consent is refused or withdrawn, ~~no retaliation may be threatened or carried out a naturopathic doctor may not threaten or carryout any retaliation against the patient.~~

(4) A patient may withdraw informed consent at any time.

Nat Med 2.02 Recordkeeping. (1) A naturopathic doctor shall maintain complete and accurate patient health care records on every patient for a period of not less than 5 years after the date of the last entry, or for a longer period as may be otherwise required by law.

(2) A patient health care record prepared by a naturopathic doctor shall contain, at a minimum, the following clinical health care information:

(a) Pertinent patient history.

- (b) Pertinent objective findings related to examination and test results.
- (c) Assessment or diagnosis.
- (d) Plan of treatment for the patient.
- (e) Any written documentation of informed consent.

(3) Each patient health care record entry shall be dated, identify the ~~practitioner licensee~~, and be sufficiently legible to allow interpretation by other practitioners for the benefit of the patient.

Nat Med 2.03 Practice standards for naturopathic doctors. A naturopathic doctor may practice naturopathic medicine and naturopathic physical medicine as specified in ss. 69.18 (1) (c), 146.82 (3) (a), 255.06 (1) (d), 448.56 (1), 462.04, 466.01 (6) (a) and (b), 466.01 (7) (a), and 466.05 (1) (a) and (b), Stats.

Nat Med 2.04 Prohibited practices. A naturopathic doctor may not engage in any practices specified in ss. 466.01 (6) (c) and (7) (b), Stats.

Nat Med 2.05 Telehealth practice. (1) A naturopathic doctor who uses telehealth in the diagnosis and treatment of a patient located in this state shall be licensed to practice as a naturopathic doctor by the board under s. 466.04 (1), Stats.

(2) A naturopathic doctor shall be held to the same standards of practice and conduct including patient confidentiality and recordkeeping, regardless of whether health care services are provided in person or by telehealth.

Nat Med 2.06 Advertising. Any advertisement, marketing, or other public representation by or referring to a licensee shall clearly state the licensee's authorized scope of practice, including the specific license held by the ~~provider licensee~~.

Nat Med 3

Licensure requirements and renewal

Nat Med 3.01. License not required. Pursuant s. 466.02 (2), Stats., certain individuals are not required to obtain a license under this chapter to engage in practice or activities relating to naturopathic medicine.

Nat Med 3.02 Licensure requirements. An applicant for licensure as a naturopathic doctor shall submit to the board all of the following ~~requirements~~:

(1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for initial licensure applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(2) The fee ~~specified~~ in s. 440.05 (1), Stats.

(3) Subject to ss. 111.321, 111.322 and 111.335, Stats, evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(4) Verified documentary evidence that the applicant has complied with at least one of the educational requirements specified in s. 466.04 (1) (d), Stats.

(5) Evidence satisfactory to the board that the applicant has satisfied the examination requirements under s. Nat Med 3.04.

(6) If required by the board, completion of an oral examination as specified in s. Nat Med 3.05.

Nat Med 3.03. Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice naturopathic medicine shall be granted to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. 440.09 (2), Stats. Subject to s. 440.09 (2m), Stats., the board may request verification necessary to make a determination under this section.

Note: Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

Nat Med 3.04. Examinations.

(1) EXAMINATIONS REQUIRED. Each applicant for licensure under this chapter must provide evidence satisfactory to the board that the applicant has passed all of the following:

(a) One of the following for the competency-based examination:

1. Part I Biomedical Science Examination and Part II Core Clinical Science Examination of the NPLEX.

2. For graduates of approved naturopathic medical programs prior to 1978, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.

(b) Part II Core Clinical Science Examination of the NPLEX for the pharmacology exam.

(c) Except as specified in par. (d), ~~evidence of a passing score on~~ a jurisprudence exam approved by the board. The passing score is 85 percent.

(d) For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (c) ~~before the end of the first renewal period before December 31, 2024.~~

(2) FAILURE AND REEXAMINATION. If an applicant has failed any of the exams required under sub. (1) 4 or more times in this state or another licensing jurisdiction in the United States or Canada, the board may require the applicant to submit evidence satisfactory to the board of further professional training or education in examination areas in which the

applicant had previously demonstrated deficiencies. If the evidence provided by the applicant is not satisfactory to the board, the board may require the applicant to obtain further professional training or education as the board deems necessary to establish the applicant's fitness to practice naturopathic medicine in this state. In order to determine any further professional training or education requirement, the board shall consider any information available relating to the quality of the applicant's previous practice, including the results of the applicant's performance on any oral examination required under s. Nat Med 3.05.

Nat Med 3.05 Oral Examination. (1) An applicant may be required to complete an oral examination if the applicant meets any of the following:

- (a) Has a medical condition which in any way impairs or limits the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
 - (b) Uses chemical substances so as to impair in any way the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
 - (c) Has been disciplined or had licensure denied by a licensing or regulatory authority in this state or another jurisdiction.
 - (d) Has been found to have been negligent in the practice of naturopathic medicine or has been a party in a lawsuit in which it was alleged that the applicant had been negligent in the practice of naturopathic medicine.
 - (e) Has been convicted of a crime the circumstances of which substantially relate to the practice of naturopathic medicine.
 - (f) Has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.
 - (g) Has engaged in the illegal use of controlled substances.
 - (h) Has been subject to adverse formal action during the course of naturopathic medicine education, postgraduate training, hospital practice, or other naturopathic medicine employment.
 - (i) Has not practiced naturopathic medicine for a period of 5 years or more prior to application unless the applicant has graduated from a school of naturopathic medicine within that period.
 - (j) Has failed the national examination any of the examinations required under s. Nat Med 3.04 (1) or s. Nat Med 6.03 (1) (f) 4 times or more and the board has determined that further examination is required.
- (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) An oral examination of an applicant is conducted by the board. The purpose of an oral exam is to evaluate the applicant's eligibility for a license.

~~(4) The grade of an exam shall be the applicant's final grade for the oral examination under this subsection.~~ The passing grade for an oral exam under this subsection is 90 percent.

Nat Med 3.06 Renewal. (1) A licensee shall renew their license as specified by s. 440.08 (2) (a), Stats. and satisfy the following requirements:

(a) ~~A Submit a~~ complete application for the license on a form provided by the department including any information required by the board to determine an applicant's eligibility.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(b) Pay the required fee prior to the date specified in s. 440.08 (2) (a), Stats.

(c) Attest to the completion of the requirements under s. Nat Med 4.02.

(2) **LATE RENEWAL WITHIN 5 YEARS.** If the application for renewal is filed less than 5 years after the expiration of the applicant's ~~last~~ license, the applicant shall pay the late renewal fee in s. 440.08 (3) (a), Stats., and meet the requirements under sub. (1).

(3) **LATE RENEWAL AFTER 5 YEARS AND REINSTATEMENT.**

(a) *Late renewal after 5 years.* If the application for renewal is 5 years or more after the expiration of the applicant's ~~last~~ license, the board shall make such inquiry as it finds necessary to determine whether the applicant is competent to practice under the license in this state and shall impose any reasonable conditions on reinstatement of the license, including oral examination, as the board deems appropriate. All applicants under this paragraph shall be required to pass the jurisprudence examination, which is the same examination given to initial applicants.

(b) *Reinstatement.* An applicant who has a license with unmet disciplinary requirements ~~which that~~ has not been renewed within 5 years of the renewal date or whose license has been surrendered or revoked may apply to have the license reinstated ~~in accordance with by submitting~~ all of the following:

1. Evidence of completion of the requirements in par. (a).
2. Evidence of completion of disciplinary requirements, if applicable.
3. Evidence of rehabilitation or change in circumstances warranting reinstatement of the credential.

Nat Med 4

Continuing Education

Nat Med 4.01. Definitions. In this chapter:

(1) “Biennium” means the 2-year period immediately preceding the renewal date specified under s. 440.08 (2) (a) ~~47g and 47h~~, Stats.

(2) “Continuing education” means professional educational activity designed to advance the professional skills and knowledge of a licensee in the practice of naturopathic medicine for the improvement of public health, safety, and welfare.

(3) “Continuing education credit hour” means 50 minutes of instruction or participation spent by the licensee in actual attendance or completion of an approved educational activity.

Nat Med 4.02. Continuing education requirements.

(1) During the biennium, except as specified under sub. (2) and unless granted a waiver under sub. (3), a licensee shall complete 30 credit hours of continuing education approved under s. Nat Med 4.03 and related to the practice of naturopathic medicine. The 30 credit hours of continuing education shall include 5 hours in pharmacy and 2 hours in ethics.

(2) During the time between initial licensure and commencement of a full 2–year licensure period, ~~a new~~ licensees are not required to meet continuing education requirements.

(3) The board may grant a waiver, partial waiver, or postponement of the continuing education requirements in cases of hardship.

(4) Continuing education credit hours may be counted for teaching or presenting a course that promotes the development, expansion, or improvement of a licensee’s clinical skills and enhances their practice. Two hours of continuing education can be claimed for each credit hour of instruction. However, continuing education credit hours may not be counted for repeat presentations of the same course or program, or for courses or programs whose subject matter is pharmacy or ethics.

Nat Med 4.03. Acceptable continuing education programs. The board may approve a continuing education program that is approved by one of the following:

(1) North American Naturopathic Continuing Education Accreditation Council (~~NANCEAC~~) through the Federation of Naturopathic Medicine Regulatory Authority (~~FNMRA~~).

(2) American Medical Association (~~AMA~~) or American Osteopathic Association (~~AOA~~) category 1 courses through Accreditation Council for Continuing Medical Education (~~ACCME~~).

(3) American Association of Naturopathic Physicians (~~AANP~~).

(4) National Association of Boards of Pharmacy (~~NABP~~).

(5) Other recognized organizations devoted to the practice of naturopathic medicine and approved by the board.

Nat Med 4.04. Evidence of compliance.

(1) ~~A~~ Except as provided in s. Nat Med 4.02 (2), at the time of each renewal, each licensee shall sign a statement certifying that, within the 2 years immediately preceding the renewal date specified under s. 440.08 (2) (a), Stats., the licensee has completed the continuing education credit hours required under this chapter.

(2) A licensee who fails to complete the continuing education credit hours by the renewal date specified under s. 440.08 (2) (a), Stats., may not practice naturopathic medicine until the license is restored.

Nat Med 4.05. Recordkeeping. Every licensee shall maintain a written record of the continuing education hours required under this chapter for not less than 6 years after completion of each credit. Records required include but are not limited to attendance verification records in the form of completion certificates or other documents supporting evidence of attendance.

Nat Med 5

Code of ethics and unprofessional conduct

Nat Med 5.01. Adoption of Standards. The American Association of Naturopathic Physicians code of ethics, as approved in August 2012, is incorporated by reference into this chapter.

Note: A copy of the above standards is on file in the office of the legislative reference bureau.

Nat Med 5.02 Unprofessional conduct. “Unprofessional conduct” includes any violation of the code of ethics adopted under s. Nat Med 5.01 or any of the following, or aiding or abetting the same:

(1) DISHONESTY AND CHARACTER.

(a) Violating or attempting to violate any provision or term of ch. 466, Stats., or of any valid rule of the board.

(b) Violating or attempting to violate any term, provision, or condition of any order of the board.

(c) Knowingly engaging in fraud or misrepresentation or dishonesty in applying for or procuring a license, or in connection with applying for or procuring periodic renewal of a license, or in otherwise maintaining such licensure.

(d) Knowingly giving false, fraudulent, or deceptive testimony while serving as an expert witness.

(e) Employing illegal or unethical business practices.

(f) Knowingly, negligently, or recklessly making any false statement, written or oral, which creates an unacceptable risk of harm to a patient, the public, or both.

(g) Engaging in any act of fraud, deceit, or misrepresentation, including acts of omission to the board or any person acting on the board's behalf.

(h) Obtaining any fee by fraud, deceit, or misrepresentation.

(i) Directly or indirectly giving or receiving any fee, commission, rebate, or other compensation for professional services not actually and personally rendered, unless allowed by law. This prohibition does not preclude the legal functioning of lawful professional partnerships, corporations, or associations.

(j) Engaging in uninvited in-person solicitation of actual or potential patients who, because of their circumstances, may be vulnerable to undue influence.

(k) Engaging in false, misleading, or deceptive advertising.

(L) Offering, undertaking, or agreeing to treat or cure a disease or condition by a secret means, method, device, or instrumentality; or refusing to divulge to the board upon demand the means, method, device, or instrumentality used in the treatment of a disease or condition.

(m) Refusing to render services to a person because of race, color, sex, ~~or~~ religion, national origin, age, or disability.

(2) DIRECT PATIENT CARE VIOLATIONS.

(a) Practicing or attempting to practice under any license when unable to do so with reasonable skill and safety. A certified copy of an order issued by a court of competent jurisdiction finding that a person is mentally incompetent is conclusive evidence that the licensee was, for any period covered by the order, unable to practice with reasonable skill and safety.

(b) Departing from or failing to conform to the standard of minimally competent practice which creates an unacceptable risk of harm to a patient or the public whether or not the act or omission resulted in actual harm to any person.

(c) Prescribing, ordering, dispensing, administering, supplying, selling, giving, or obtaining any prescription medication in any manner that is inconsistent with the standard of minimal competence.

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

(e) Engaging in sexually explicit conduct, sexual contact, exposure, gratification, or other sexual behavior with or in the presence of a patient, a patient's immediate family, or a person responsible for the patient's welfare.

1. Sexual motivation may be determined from the totality of the circumstances and shall be presumed when the licensee has contact with a patient's intimate parts without legitimate medical justification for doing so.

2. For the purpose of this subsection, an adult receiving treatment shall be considered a patient for 2 years after the termination of professional services.

3. If the person receiving treatment is a child, the person shall be considered a patient for the purposes of this subsection for 2 years after termination of professional services or for 2 years after the patient reaches the age of majority, whichever is longer.

(f) Engaging in any sexual conduct with or in the presence of a patient or former patient who lacks the ability to consent for any reason, including medication or psychological or cognitive disability.

(g) Engaging in repeated or significant disruptive behavior or interaction with hospital personnel, patients, family members, or others that interferes with patient care or could reasonably be expected to adversely impact the quality of care rendered.

(h) Knowingly, recklessly, or negligently divulging privileged communication or other confidential patient health care information except as required or permitted by state or federal law.

(i) Performing services without required informed consent under s. Nat Med 2.01.

(j) Aiding or abetting the practice of an unlicensed, incompetent, or impaired person or allowing another person or organization to use one's license to practice.

(k) Appropriating the identity of another person holding a license issued by this or another board.

(L) Withdrawing from a doctor-patient relationship unilaterally and without reasonable justification by discontinuing a patient's treatment regimen when further treatment is medically indicated and any of the following occur:

1. The licensee fails to give the patient at least 30 days notice in advance of the date on which the licensee's withdrawal becomes effective.

2. The licensee fails to allow for patient access to or transfer of the patient's health record as required by law.

3. The licensee fails to provide for continuity of care during the period between the notice of intent to withdraw from the doctor-patient relationship and the date on which the doctor-patient relationship ends.

(3) LAW VIOLATIONS, ADVERSE ACTION, AND REQUIRED REPORTS TO THE BOARD.

(a) Failing to report within 30 days to the board any final adverse action taken against the licensee's authority to practice by another licensing jurisdiction.

(b) Failing to comply with state and federal laws regarding access to patient health care records.

(d) Failing to establish and maintain patient health care records consistent with the requirements of s. Nat Med 2.02 or as otherwise required by law.

(e) After a request by the board, failing to cooperate in a timely manner with the board's investigation of a complaint filed against a licensee. There is a rebuttable presumption that a licensee who takes longer than 30 days to respond to a request of the board has not acted in a timely manner.

(f) Having a license, certificate, permit, or registration granted by another state to practice naturopathic medicine limited, suspended or revoked, or subject to any other disciplinary action.

Nat Med 5.03. Discipline and penalties.

(1) The board may conduct investigations and hearings to determine whether a licensee has violated this chapter or has violated any state or federal law or any other jurisdiction that substantially relates to the practice of naturopathic medicine.

(2) The board may reprimand a licensee or deny, limit, suspend, or revoke a license if the licensee is found to have violated this chapter, ch. 466, Stats., or any other state or federal law.

(3) The penalty for violations of this chapter or any other related law is specified under s. 466.09, Stats.

Nat Med 6

Licensure requirements for Limited-scope naturopathic doctors

Nat Med 6.01 Scope of practice. (1) ~~Notwithstanding any other provision of law that permits a limited scope naturopathic doctor to engage in any act that constitutes naturopathic medicine beyond what is authorized under this section~~ Except as otherwise conflicting with any other rule or statute and ~~except~~ as permitted by sub. (2), a limited-scope naturopathic doctor may only engage in the practices specified in ss. 466.01 (6) (a) 1. a. to c. and 3. a. to c., Stats.

(2) A limited-scope naturopathic doctor may extend their scope of practice by petitioning the board. This petition shall include details of the expansion of scope and proof of qualifications to perform the requested practice pursuant s. 466.05 (2) (a) 2., Stats.

Nat Med 6.02 License not required. Pursuant s. 466.02 (2), Stats., certain individuals are not required to obtain a license under this chapter to engage in practice or activities relating to naturopathic medicine.

Nat Med 6.03 Requirements for licensure. (1) An applicant for licensure as a limited-scope naturopathic doctor shall submit to the board all of the following **requirements**:

(a) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(b) The fee specified in s. 440.05 (1), Stats.

(c) Subject to ss. 111.321, 111.322 and 111.335, Stats., evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(d) Evidence satisfactory to the board that the applicant has satisfied requirements under s. 466.04 (2) (b) 4. and 5., Stats.

(e) Evidence satisfactory to the board that the applicant has been continually practicing naturopathic medicine in this state for at least 10 years preceding the date of application to obtain a limited-scope naturopathic doctor license.

(f) Except as specified in par. (g), ~~evidence of a passing score on~~ a jurisprudence exam approved by the board. The passing score is 85 percent.

(g) For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (f) before ~~the end of the first renewal period~~ December 31, 2024.

(h) Evidence satisfactory to the board that the applicant has exhibited a record of safety in the practice of naturopathic medicine or naturopathy.

(i) If required by the board, completion of an oral examination as specified under s. Nat Med 3.05.

Nat Med 6.04 Renewal. (1) A licensee shall renew their license as specified by s. 440.08 (2) (a), Stats. and satisfy the following requirements:

(a) ~~A~~ Submit a complete application for the license on a form provided by the department including any information required by the board to determine an applicant's eligibility.

Note: Instructions for renewal applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(b) Pay the required fee prior to the date specified in s. 440.08 (2) (a), Stats.

(c) Attest to the completion of the requirements under s. Nat Med 4.02.

(d) If a limited-scope naturopathic doctor was issued an initial license by satisfying the requirement under s. 466.04 (2) (b) 5. d., Stats., the limited-scope naturopathic doctor shall, no later than the first renewal date after the conclusion of the 5-year period, submit evidence satisfactory to the board that the licensee has completed the education and training specified in the signed statement under s. 466.04 (2) (b) 5. d., Stats.

(2) LATE RENEWAL WITHIN 5 YEARS. If the application for renewal is filed less than 5 years after the expiration of the applicant's license, the applicant shall pay the late renewal fee in s. 440.08 (3) (a), Stats., and meet the requirements under sub. (1).

(3) LATE RENEWAL AFTER 5 YEARS AND REINSTATEMENT.

(a) *Late renewal after 5 years.* If the application for renewal is 5 years or more after the expiration of the applicant's **fast** license, the board shall make such inquiry as it finds necessary to determine whether the applicant is competent to practice under the license in this state and shall impose any reasonable conditions on reinstatement of the license, including oral examination, as the board deems appropriate. All applicants under this paragraph shall be required to pass the jurisprudence examination, which is the same examination given to initial applicants.

(b) *Reinstatement.* An applicant who has a license with unmet disciplinary requirements which has not been renewed within five years of the renewal date or whose license has been surrendered or revoked may apply to have the license reinstated in accordance with all of the following:

1. Evidence of completion of the requirements in par. (a) if the credential has not been renewed within the last 5 years.
2. Evidence of completion of disciplinary requirements, if applicable.
3. Evidence of rehabilitation or change in circumstances warranting reinstatement of the credential.

Nat Med 6.05 Telehealth practice. (1) A limited-scope naturopathic doctor who uses telehealth in the diagnosis and treatment of a patient located in this state shall be licensed to practice as a limited-scope naturopathic doctor by the board under s. 466.04 (2), Stats.

(2) A licensed limited-scope naturopathic doctor shall be held to the same standards of practice and conduct including patient confidentiality and recordkeeping, regardless of whether health care services are provided in person or by telehealth.

Nat Med 6.06 Code of ethics and unprofessional **Conduct.** All provisions established under ch. Nat Med 5 also apply to the practice of limited-scope naturopathic doctors.

Nat Med 6.07 Informed Consent. The provisions established under s. Nat Med 2.01 also apply to the **practice** of limited-scope naturopathic doctors with the additional provision that limited-scope naturopathic doctors shall also disclose their license type and authorized scope of practice.

Nat Med 6.08 Recordkeeping. All provisions established under s. Nat Med 2.02 also apply to the practice of limited-scope naturopathic doctors.

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)



Wisconsin Legislative Council

RULES CLEARINGHOUSE

Scott Grosz
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CLEARINGHOUSE RULE 23-074

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

In s. Nat Med 6.01 (1), the notwithstanding clause could potentially conflict with statutes, it is unclear what authority the board could cite in order to override a statute.

2. Form, Style and Placement in Administrative Code

a. Consider the title of ch. Nat Med 2. Sections Nat Med 2.03 and 2.04 and, possibly, 2.05 are the only provisions that relate to the scope of practice. The other provisions relate to informed consent, record keeping, and advertising. The title could be updated to include “Standards of Conduct” in addition to “Scope of Practice”. Alternatively, a new chapter could be created titled “Standards of Conduct”.

b. Consider editing s. Nat Med 2.01 (2) (f) and (g) to be the same form as pars. (a) to (e), which are types of information. For example:

(1) Section Nat Med 2.01 (2) (f) could be written as “In an emergency, information about alternate modes of treatment, if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.”. Additionally, consider defining “emergency”. See s. Med 18.02 (1) for comparison.

(2) Section Nat Med 2.01 (2) (e) could be written as “Information about a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.”.

c. In s. Nat Med 3.04 (1) (c), consider revising to be the same form as other items listed. For example, “Except as specified in par. (d), a jurisprudence exam approved by the board. A passing score is 85 percent.”. Similar review should be conducted for s. Nat Med 6.03 (1) (f).

d. In s. Nat Med 3.04 (1) (d), consider clarifying what is meant by “first renewal period”. Is the deadline meant to be before the license must be renewed? If so, consider using “on or before the renewal date specified under s. 440.08 (2) (a), Stats.”.

e. In s. Nat Med 3.05 (1) (intro.), consider ending the introductory material with “if the applicant meets any of the following conditions:”, in order to clarify that not all of the conditions must be met. [s. 1.11 (2), Manual.]

f. In s. Nat Med 3.06 (1) (a), consider revising the text to be consistent with other items listed. For example, add “Submit” to the beginning of the provision.

g. In s. Nat Med 4.03, remove the acronyms from the substantive provisions and consider defining them in a separate section. [s. 1.08 (2) (a), Manual.]

h. In s. Nat Med 5.01, the note should also state that the standard is on file at the office of the agency, in addition to the Legislative Reference Bureau. [s. 1.14 (3) (b), Manual.]

i. In s. Nat Med 6.03 (1) (g), consider clarifying what is meant by “first renewal period”. Is the deadline meant to be before the license must be renewed? If so, consider using “on or before the renewal date specified under s. 440.08 (2) (a), Stats.”.

j. In s. Nat Med 6.04 (1), consider revising the text to be consistent with other items listed. For example, add “Submit” to the beginning of the provision.

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

a. In the definition of “Modes of treatment” in s. Nat Med 1.02, consider specifying that the relevant “scope of current and acceptable standards of care” relates to naturopathic medicine. As currently drafted and used in the rule, a naturopathic doctor might be required to inform the patient of reasonable alternative modes of treatment outside the scope of naturopathic medicine. See, for comparison, s. Med 18.02 (3) for the reference to “considered by the medical profession”.

b. In s. Nat Med 2.01 (1), consider ending the first sentence with “alternate modes of treatment” rather than “treatments” because “modes of treatment” is a defined term. Also, this provision does not require the naturopathic doctor to obtain consent. It only requires informing the patient. Consider requiring the naturopathic doctor to obtain consent and consider what modes are acceptable (e.g., verbal or written).

c. In s. Nat Med 2.01 (3), consider specifying that the informed consent is refused or withdrawn “by the patient”. Also, edit the retaliation clause to be in the active voice so that the relevant actor is specified, such as “. . . , a naturopathic doctor may not threaten or carryout any retaliation against the patient”.

d. In s. Nat Med 2.01 (4), consider specifying how a patient may withdraw informed consent. Also, consider whether this provision, as written, could allow a patient to withdraw informed consent after a treatment and whether that is desirable.

e. In s. Nat Med 2.02 (3), consider replacing “practitioner” with “naturopathic doctor” because “practitioner” is not used anywhere else in the rule. If the second instance of “practitioner” is intended to include more than naturopathic doctors, then clearly specify who must be able to interpret the patient health care record.

f. In s. Nat Med 2.06, consider specifying how a licensee may clearly state the licensee’s scope of practice beyond stating the specific license held by the licensee. Consider replacing “provider” with “licensee” at the end of the sentence for clarity.

g. In s. Nat Med 3.02, consider specifying to whom an applicant must submit licensing requirements. Also, consider deleting the word “requirements”.

h. Consider alternative revisions to ss. Nat Med 3.02 (1) and 6.03 (1) (c), in order to more clearly explain the law regarding submission of information relating to pending charges and conviction record. In particular, the statutes cited by the agency delineate different disclosure requirements and legal obligations related to pending charges than those related to conviction record. The rule should be revised to recognize and explain these distinctions. Moreover, the statutes cited by the agency in the proposed rule are, generally, quite complex and it may be more useful to utilize the rulemaking process to add clarity to an applicant’s obligations and the limits placed on the agency by statute, rather than merely referring an applicant back to the applicable statutes.

i. In s. Nat Med 3.02 (2), consider editing the text to be the fee “authorized” instead of “specified”, because the statute referenced does not specify a fee.

j. In s. Nat Med 3.02 (3) and (5), consider specifying what evidence is satisfactory to the board.

k. In s. Nat Med 3.02 (6), consider specifying that the applicant must submit “evidence of” completion of a required oral examination.

l. In s. Nat Med 3.05 (1) (d), (f), and (h), consider specifying the relevant actors who must have found the applicant negligent, who diagnosed the applicant, or who took formal adverse action.

m. In s. Nat Med 3.05 (1) (j), consider aligning the exam references with those referenced in s. Nat Med 3.04 (1) and (2), rather than using the phrase “the national examination”.

n. In s. Nat Med 3.05 (4), consider revising for clarity. Is the first reference to “exam” an oral examination? Are there other grades than the final grade? Also, consider using “examination” in place of “exam” for consistency.

o. In ss. Nat Med 3.06 (1) (c) and 6.04 (3), consider acknowledging that completing the requirements may not be necessary because the continuing education requirements may not be required for a first renewal.

p. In s. Nat Med 3.06 (2), consider clarifying the meaning of “last” or consider whether the word is needed. The same comment applies to ss. Nat Med 3.06 (3) (a) and 6.04 (3) (a).

q. In s. Nat Med 3.06 (3) (b), revise the word “which” with “that”. [s. 1.08 (1) (c), Manual.] Also, consider revising “in accordance with” to clarify whether the applicant must submit the items in subs. 1. to 3.

r. In s. Nat Med 4.01 (1), consider specifying that the relevant renewal date is that of a naturopathic doctor.

s. In s. Nat Med 4.02 (1), consider whether “and related to the practice of naturopathic medicine” is necessary. Would the board approve a continuing education program that is not related to the practice of naturopathic medicine? Consider referring to sub. (2) as an exception to this requirement as well.

t. In s. Nat Med 4.02 (2), consider revising the plural to use the singular “licensee”.

u. In s. Nat Med 4.04 (1), consider acknowledging that the licensee is not required to certify completion of the continuing education requirements on the first renewal date, as is set out in s. Nat Med 4.02 (2).

v. In s. Nat Med 4.04 (2), consider specifying how a license is restored.

w. In s. Nat Med 4.05, consider explaining what is meant by “but are not limited to”. As it is written, the provision implies that there may be other records required to be maintained, but those records are not specified. Note also that the word “including” means that the identified items are not exhaustive, and if other items are intended, the phrase “but are not limited to” should be removed. [s. 1.07 (3) (b) 2., Manual.]

x. In s. Nat Med 5.02 (e) 3., add “professional” before “services” for consistency.

y. In s. Nat Med 5.02 (2) (j), review the duplicate use of “aiding or abetting”, because s. Nat Med 5.02 (intro.) already refers to the same phrase.

z. Consider revising the title of ch. Nat Med 6 to be more general, because what is included in the chapter is more than licensure requirements.

aa. In s. Nat Med 6.03, consider specifying to whom an applicant must submit licensing requirements. Also, consider deleting the word “requirements”.

bb. In s. Nat Med 6.03 (1) (b), consider editing it to be the fee “authorized” instead of “specified”, because the statute referenced does not specify a fee.

cc. In s. Nat Med 6.03 (1), consider specifying what evidence is satisfactory to the board.

dd. In s. Nat Med 6.03 (1) (i), consider specifying that the applicant must submit “evidence of” completion of a required oral examination.

ee. In s. Nat Med 6.04, consider whether there should be a subsection regarding late renewals within five years. This would be consistent with the treatment of late renewals for the full scope license.

ff. In s. Nat Med 6.06, consider whether “Conduct” should be capitalized in the title.

gg. In s. Nat Med 6.07, consider revising to use the singular naturopathic doctor.

6. Potential Conflicts With, and Comparability to, Related Federal Regulations

In s. Nat Med 5.02 (1) (m), consider whether it would be helpful to list other protected classes to align unprofessional conduct with federal law.

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 1:</p> <p>In s. Nat Med 6.01 (1), the notwithstanding clause could potentially conflict with statutes, it is unclear what authority the board could cite in order to override a statute.</p>	<p>Nat Med 6.01 Scope of practice. (1) Notwithstanding any other provision of law that permits a limited-scope naturopathic doctor to engage in any act that constitutes naturopathic medicine beyond what is authorized under this section and except as permitted by sub. (2), a limited-scope naturopathic doctor may only engage in the practices specified in ss. 466.01 (6) (a) 1. a. to c. and 3. a. to c., Stats.</p>	<p>Nat Med 6.01 Scope of practice. (1) Notwithstanding any other provision of law that permits a limited-scope naturopathic doctor to engage in any act that constitutes naturopathic medicine beyond what is authorized under this section <u>Except as otherwise conflicting with any other rule or statute</u> and except as permitted by sub. (2), a limited-scope naturopathic doctor may only engage in the practices specified in ss. 466.01 (6) (a) 1. a. to c. and 3. a. to c., Stats.</p>	
<p>Comment 2.a:</p> <p>Consider the title of ch. Nat Med 2. Sections Nat Med 2.03 and 2.04 and, possibly, 2.05 are the only provisions that relate to the scope of practice. The other provisions relate to informed consent, record keeping, and advertising. The title could be updated to include “Standards of Conduct” in addition to “Scope of Practice”. Alternatively, a new chapter could be created titled “Standards of Conduct”.</p>	<p><u>Nat Med 2</u> <u>Scope of Practice</u></p>	<p><u>Nat Med 2</u> <u>Standards of conduct and scope of practice</u></p>	
<p>Comment 2.b. (1):</p> <p>Consider editing s. Nat Med 2.01 (2) (f) and (g) to be the same form as pars. (a) to (e), which are</p>	<p>Nat Med 2.01 (2) (f) In an emergency, a naturopathic doctor is not required to communicate alternate modes of treatment to a patient if failure to provide</p>	<p>Nat Med 2.01 (2) (f) In an emergency, a naturopathic doctor is not required to communicate alternate modes of treatment to a patient if failure to provide</p>	<p>Med 18.02 Definitions (1) “ Emergency" means a circumstance in which there is an immediate risk to a patient's life, body part or function which demands prompt action by a physician.</p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>types of information. For example: (1) Section Nat Med 2.01 (2) (f) could be written as “In an emergency, information about alternate modes of treatment, if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.”. Additionally, consider defining “emergency”. See s. Med 18.02 (1) for comparison.</p>	<p>immediate treatment would be more harmful to a patient than immediate treatment.</p> <p>Nat Med 1.02 Definitions. As used in chs. Nat Med 1 to 6: (1) “Board” means the naturopathic medicine examining board. (2) “Department” means the department of safety and professional services. (3) “Jurisprudence exam” means the board approved examination on the state law related to the practice of naturopathic medicine.</p>	<p>immediate treatment would be more harmful to a patient than immediate treatment <u>information about alternate modes of treatment, if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.</u></p> <p>Nat Med 1.02 Definitions. As used in chs. Nat Med 1 to 6: (1) “Board” means the naturopathic medicine examining board. (2) “Department” means the department of safety and professional services. <u>“Emergency” means a circumstance in which there is an immediate risk to a patient's life, body part or function which demands prompt action.</u> (3) “Jurisprudence exam” means the board approved examination on the state law related to the practice of naturopathic medicine.</p>	
<p>Comment 2.b. (2):</p> <p>Consider editing s. Nat Med 2.01 (2) (f) and (g) to be the same form as pars. (a) to (e), which are types of information. For example: (2) Section Nat Med 2.01 (2) (e) could be written as “Information</p>	<p>Nat Med 2.01 (2) (g). A naturopathic doctor may not be held responsible for failure to inform a patient of a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.</p>	<p>Nat Med 2.01 (2) (g). A naturopathic doctor may not be held responsible for failure to inform a patient of a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification. <u>Information about a possible complication or benefit</u></p>	

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>about a possible complication or benefit not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.”.</p>		<p><u>not generally known to reasonably well-qualified naturopathic doctors in a similar medical classification.</u></p>	
<p>Comment 2.d:</p> <p>In s. Nat Med 3.04 (1) (d), consider clarifying what is meant by “first renewal period”. Is the deadline meant to be before the license must be renewed? If so, consider using “on or before the renewal date specified under s. 440.08 (2) (a), Stats.”.</p> <p>Comment 2.i:</p> <p>In s. Nat Med 6.03 (1) (g), consider clarifying what is meant by “first renewal period”. Is the deadline meant to be before the license must be renewed? If so, consider using “on or before the renewal date specified under s. 440.08 (2) (a), Stats.”.</p>	<p>Nat Med 3.04 (1) (d). For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (c) before the end of the first renewal period.</p> <p>Nat Med 6.03 (1) (g). For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (f) before the end of the first renewal period.</p>	<p>Nat Med 3.04 (1) (d) For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (c) before the end of the first renewal period <u>before December 31, 2024.</u></p> <p>Nat Med 6.03 (1) (g). For licenses issued prior to the effective date of the permanent rule, a signed statement by the applicant committing to satisfying the requirement under par. (f) before the end of the first renewal period <u>December 31, 2024.</u></p>	<p>We suggest that we should include the specific date. The “first renewal period” would be January 1st, 2025, so we can make the deadline December 31st, 2024.</p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 2.g:</p> <p>In s. Nat Med 4.03, remove the acronyms from the substantive provisions and consider defining them in a separate section. [s. 1.08 (2) (a), Manual.]</p>	<p>Nat Med 4.03. Acceptable continuing education programs. The board may approve a continuing education program that is approved by one of the following:</p> <p>(1) North American Naturopathic Continuing Education Accreditation Council (NANCEAC) through the Federation of Naturopathic Medicine Regulatory Authority (FNMRA).</p> <p>(2) American Medical Association (AMA) or American Osteopathic Association (AOA) category 1 courses through Accreditation Council for Continuing Medical Education (ACCME).</p> <p>(3) American Association of Naturopathic Physicians (AANP).</p> <p>(4) National Association of Boards of Pharmacy (NABP).</p> <p>(5) Other recognized organizations devoted to the practice of naturopathic medicine and approved by the board.</p>	<p>Nat Med 4.03. Acceptable continuing education programs. The board may approve a continuing education program that is approved by one of the following:</p> <p>(1) North American Naturopathic Continuing Education Accreditation Council (NANCEAC) through the Federation of Naturopathic Medicine Regulatory Authority (FNMRA).</p> <p>(2) American Medical Association (AMA) or American Osteopathic Association (AOA) category 1 courses through Accreditation Council for Continuing Medical Education (ACCME).</p> <p>(3) American Association of Naturopathic Physicians (AANP).</p> <p>(4) National Association of Boards of Pharmacy (NABP).</p> <p>(5) Other recognized organizations devoted to the practice of naturopathic medicine and approved by the board.</p>	<p>The Board could consider two options:</p> <ol style="list-style-type: none"> 1. Eliminate all acronyms and not include them in chapter 4 Definitions. 2. Add the acronym to the chapter 4 Definitions and use the acronyms in this section.

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 2.h:</p> <p>In s. Nat Med 5.01, the note should also state that the standard is on file at the office of the agency, in addition to the Legislative Reference Bureau. [s. 1.14 (3) (b), Manual.]</p>	<p>Nat Med 5.01. Adoption of Standards. The American Association of Naturopathic Physicians code of ethics, as approved in August 2012, is incorporated by reference into this chapter.</p> <p>Note: A copy of the above standards is on file in the office of the legislative reference bureau.</p>	<p>No changes.</p>	<p>The Board should consider rejecting the comment with the following statement:</p> <p><i>While the reference to the manual is accurate the content of the referenced section is outdated. The manual is outdated.— Section 227.21 (2)(b) was amended by 2021 act 246 as follows: “...Each rule containing an incorporation by reference shall state how the material incorporated may be obtained and, except as provided in s. 601.41 (3) (b), that the standards are on file at the offices of the agency and the legislative reference bureau.</i></p> <p><i>Note: This Section deletes a requirement that an agency maintain, at its offices, a copy of any standards established by technical societies and national organizations that are incorporated into its rules but not reproduced in full.”</i></p>
<p>Comment 5.a:</p> <p>In the definition of “Modes of treatment” in s. Nat Med 1.02, consider specifying that the relevant “scope of current and acceptable standards of care” relates to naturopathic medicine. As currently drafted and used in the rule, a naturopathic doctor might be required to inform the patient of reasonable alternative modes of treatment outside the scope of naturopathic medicine. See, for comparison, s. Med 18.02 (3) for the reference to “considered by the medical profession”.</p>	<p>Nat Med 1.02 (6). “Modes of treatment” means treatment, including diagnostic procedures, generally considered to be within the scope of current and acceptable standards of care.</p>	<p>Nat Med 1.02 (6). “Modes of treatment” means treatment, including diagnostic procedures, generally considered <u>by the naturopathic medicine profession</u> to be within the scope of current and acceptable standards of care.</p>	<p>The clause “by the naturopathic medicine profession” was explicitly stricken out by the Board at the October 2023 meeting.</p> <p>Med 18.02 Definitions</p> <p>(3) “Modes of treatment” means treatment, including diagnostic procedures, generally considered by the medical profession to be within the scope of current, acceptable standards of care.</p> <p>The Board should consider rejecting this comment with the following statement:</p> <p><i>It is the intention of the board that the naturopathic doctor be required to inform the patient of reasonable alternative modes of treatment outside the scope of naturopathic medicine.</i></p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.b Part 2:</p> <p>Also, this provision does not require the naturopathic doctor to obtain consent. It only requires informing the patient. Consider requiring the naturopathic doctor to obtain consent and consider what modes are acceptable (e.g., verbal or written).</p>	<p>Nat Med 2.01 Informed consent. (1) Any naturopathic doctor who treats a patient shall inform the patient about the availability of reasonable alternate modes of treatment and about the benefits and risks of these treatments. The reasonable naturopathic doctor standard is the standard for informing a patient. The reasonable naturopathic doctor standard requires disclosure only of information that a reasonable naturopathic doctor in the same or a similar medical specialty would know and disclose under the circumstances.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The Board rejects this comment to maintain consistency. Other health related boards contain the same provision without further explanation.</i></p>
<p>Comment 5.c Part 1:</p> <p>In s. Nat Med 2.01 (3), consider specifying that the informed consent is refused or withdrawn “by the patient”.</p> <p>Part 2:</p> <p>Also, edit the retaliation clause to be in the active voice so that the relevant actor is specified, such as “. . . , a naturopathic doctor may not threaten or carryout any retaliation against the patient”.</p>	<p>Part 1</p> <p>Nat Med 2.01 (3). When informed consent is refused or withdrawn, no retaliation may be threatened or carried out.</p> <p>Part 2</p> <p>Also, edit the retaliation clause to be in the active voice so that the relevant actor is specified, such as “. . . , a naturopathic doctor may not threaten or carryout any retaliation against the patient”.</p>	<p>Part 1</p> <p>No changes.</p> <p>Part 2</p> <p>Nat Med 2.01 (3) When informed consent is refused or withdrawn, no retaliation may be threatened or carried out a naturopathic doctor may not threaten or carryout any retaliation against the patient.</p>	<p>Part 1</p> <p>The Board should consider partially rejecting the comment with the following statement:</p> <p><i>It is the intention of the Board to be general in this clause to cover not only the patient but also any potential guardian or legally responsible person authorized to make decisions for the patient.</i></p> <p>Part 2</p> <p>Board should consider the change.</p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.d:</p> <p>In s. Nat Med 2.01 (4), consider specifying how a patient may withdraw informed consent. Also, consider whether this provision, as written, could allow a patient to withdraw informed consent after a treatment and whether that is desirable.</p>	<p>Nat Med 2.01 (4) A patient may withdraw informed consent at any time.</p>	<p>No changes.</p>	<p>Neither physicians, physician assistants, nurses, chiropractors, dentists, physical therapists, or genetic counselors have this provision. The Board could consider two options:</p> <ol style="list-style-type: none"> 1. Rejecting this comment with the following statement: <p><i>This provision was drafted intentionally broadly to allow a patient to withdraw consent in any manner that would be obvious to a reasonable practitioner. The concept of a patient withdrawing consent after the act has been consented and completed seems logically impossible for a practitioner to comply with. Additionally, this provision was drafted to be identical to similar provisions in the rules for several other health professions, and the board believes that consistency is necessary to avoid confusion.</i></p> 2. Eliminate the provision from the rule.
<p>Comment 5.e Part 2:</p> <p>If the second instance of “practitioner” is intended to include more than naturopathic doctors, then clearly specify who must be able to interpret the patient health care record.</p>	<p>Nat Med 2.02 (3) Each patient health care record entry shall be dated, identify the practitioner, and be sufficiently legible to allow interpretation by other practitioners for the benefit of the patient.</p>	<p>Nat Med 2.02 (3) Each patient health care record entry shall be dated, identify the practitioner, and be sufficiently legible to allow interpretation by other practitioners <u>health care providers</u> for the benefit of the patient.</p>	<p>Would the Board want to include other providers besides naturopathic doctors? If we use “health care providers”, we will have to include it under the definitions. Alternatively, we could just list all the providers the Board would want to include besides naturopathic doctors.</p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.f:</p> <p>In s. Nat Med 2.06, consider specifying how a licensee may clearly state the licensee’s scope of practice beyond stating the specific license held by the licensee.</p>	<p>Nat Med 2.06 Advertising. Any advertisement, marketing, or other public representation by or referring to a licensee shall clearly state the licensee’s authorized scope of practice, including the specific license held by the provider.</p>	<p>Nat Med 2.06 Advertising. Any advertisement, marketing, or other public representation by or referring to a licensee shall clearly state the licensee’s authorized scope of practice, including the specific license held by the provider <u>the type of license held, and any applicable limitations or expansions of the licensee’s scope of practice.</u></p>	
<p>Comment 5.h:</p> <p>Consider alternative revisions to ss. Nat Med 3.02 (1) and 6.03 (1) (c), in order to more clearly explain the law regarding submission of information relating to pending charges and conviction record. In particular, the statutes cited by the agency delineate different disclosure requirements and legal obligations related to pending charges than those related to conviction record. The rule should be revised to recognize and explain these distinctions. Moreover, the statutes cited by the agency in the proposed rule are, generally, quite complex and it may be more useful to utilize the rulemaking process to add clarity to an applicant’s obligations and the limits placed on the agency by statute, rather than merely referring an</p>	<p>Nat Med 3.02 (1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant’s minimal competency to practice. Note: Instructions for initial licensure applications can be found on the department of safety and professional services’ website at http://dsps.wi.gov.</p> <p>Nat Med 6.03 (1) (c) Subject to ss. 111.321, 111.322 and 111.335, Stats., evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>It is not within this rule project’s scope statement to elaborate and explain the statutes relating to pending charges and conviction record.</i></p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
applicant back to the applicable statutes.			
<p>Comment 5.i:</p> <p>In s. Nat Med 3.02 (2), consider editing the text to be the fee “authorized” instead of “specified”, because the statute referenced does not specify a fee.</p> <p>Comment 5.bb:</p> <p>In s. Nat Med 6.03 (1) (b), consider editing it to be the fee “authorized” instead of “specified”, because the statute referenced does not specify a fee.</p>	<p>Nat Med 3.02 (2) The fee specified in s. 440.05 (1), Stats.</p> <p>Nat Med 6.03 (1) (b) The fee specified in s. 440.05 (1), Stats.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The Board rejects this comment to maintain consistency. The term “specified” is used consistently in other boards for the same provision.</i></p>
<p>Comment 5.j:</p> <p>In s. Nat Med 3.02 (3) and (5), consider specifying what evidence is satisfactory to the board.</p> <p>Comment 5.cc:</p> <p>In s. Nat Med 6.03 (1), consider specifying what evidence is satisfactory to the board.</p>	<p>Nat Med 3.02 (3) Subject to ss. 111.321, 111.322 and 111.335, Stats, evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.</p> <p>Nat Med 3.02 (5) Evidence satisfactory to the board that the applicant has satisfied the examination requirements under s. Nat Med 3.04.</p> <p>Nat Med 6.03 (1) (c) Subject to ss. 111.321, 111.322 and 111.335, Stats., evidence satisfactory to the board that the applicant does not</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The term “evidence satisfactory to the board” is understood to mean evidence satisfactory at the Board’s discretion and is not normally defined further in the Administrative Code.</i></p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
	<p>have an arrest or a conviction record.</p> <p>(d) Evidence satisfactory to the board that the applicant has satisfied requirements under s. 466.04 (2) (b) 4. and 5., Stats.</p> <p>(e) Evidence satisfactory to the board that the applicant has been continually practicing naturopathic medicine in this state for at least 10 years preceding the date of application to obtain a limited-scope naturopathic doctor license.</p> <p>Nat Med 6.03 (1) (h) Evidence satisfactory to the board that the applicant has exhibited a record of safety in the practice of naturopathic medicine or naturopathy.</p>		
<p>Comment 5.k:</p> <p>In s. Nat Med 3.02 (6), consider specifying that the applicant must submit “evidence of” completion of a required oral examination.</p> <p>Comment 5.dd:</p> <p>In s. Nat Med 6.03 (1) (i), consider specifying that the applicant must submit “evidence of” completion of a required oral examination.</p>	<p>Nat Med 3.02 (6) If required by the board, completion of an oral examination as specified in s. Nat Med 3.05.</p> <p>Nat Med 6.03 (1) (i) If required by the board, completion of an oral examination as specified under s. Nat Med 3.05.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>If an oral examination is completed, the “evidence of” that examination would be in the possession of the board, not the individual who was examined.</i></p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.l:</p> <p>In s. Nat Med 3.05 (1) (d), (f), and (h), consider specifying the relevant actors who must have found the applicant negligent, who diagnosed the applicant, or who took formal adverse action.</p>	<p>Nat Med 3.02 (1) (d) Has been found to have been negligent in the practice of naturopathic medicine or has been a party in a lawsuit in which it was alleged that the applicant had been negligent in the practice of naturopathic medicine.</p> <p>Nat Med 3.02 (1) (f) Has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.</p> <p>Nat Med 3.02 (1) (h) Has been subject to adverse formal action during the course of naturopathic medicine education, postgraduate training, hospital practice, or other naturopathic medicine employment.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The Board rejects this comment to maintain consistency. Other health related boards contain the same provisions for unprofessional conduct without specifying the relevant actors.</i></p>
<p>Comment 5.m:</p> <p>In s. Nat Med 3.05 (1) (j), consider aligning the exam references with those referenced in s. Nat Med 3.04 (1) and (2), rather than using the phrase “the national examination”.</p>	<p>Nat Med 3.05 (1) (j) Has failed the national examination 4 times or more and the board has determined that further examination is required.</p>	<p>Nat Med 3.05 (1) (j) Has failed the national examination <u>any of the examinations required under s. Nat Med 3.04 (1) or s. Nat Med 6.03 (1) (f)</u> 4 times or more and the board has determined that further examination is required.</p>	
<p>Comment 5.n Part 1:</p> <p>In s. Nat Med 3.05 (4), consider revising for clarity. Is the first reference to “exam” an oral examination? Are there other grades than the final grade?</p>	<p>Nat Med 3.05 (4) The grade of an exam shall be the applicant's final grade for the oral examination under this subsection. The passing grade for an oral exam under this subsection is 90 percent.</p>	<p>Nat Med 3.05 (4) The grade of an exam shall be the applicant's final grade for the oral examination under this subsection. The passing grade for an oral exam under this subsection is 90 percent.</p>	

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.o:</p> <p>In ss. Nat Med 3.06 (1) (c) and 6.04 (3), consider acknowledging that completing the requirements may not be necessary because the continuing education requirements may not be required for a first renewal.</p>	<p>Nat Med 3.06 (1) (c) Attest to the completion of the requirements under s. Nat Med 4.02.</p> <p>Nat Med 6.04 (3) Attest to the completion of the requirements under s. Nat Med 4.02.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>By complying with Nat Med 4.02, applicants are also complying with Nat Med 4.02 (2), which states that applicants do not need to complete continuing education requirements in their first renewal after obtaining their initial license.</i></p>
<p>Comment 5.s Part 1:</p> <p>In s. Nat Med 4.02 (1), consider whether “and related to the practice of naturopathic medicine” is necessary. Would the board approve a continuing education program that is not related to the practice of naturopathic medicine?</p> <p>Part 2</p> <p>Consider referring to sub. (2) as an exception to this requirement as well.</p>	<p>Nat Med 4.02 (1) During the biennium, unless granted a waiver under sub. (3), a licensee shall complete 30 credit hours of continuing education approved under s. Nat Med 4.03 and related to the practice of naturopathic medicine. The 30 credit hours of continuing education shall include 5 hours in pharmacy and 2 hours in ethics.</p>	<p>Nat Med 4.02 (1) During the biennium, <u>except as specified under sub. (2) and</u> unless granted a waiver under sub. (3), a licensee shall complete 30 credit hours of continuing education approved under s. Nat Med 4.03 and related to the practice of naturopathic medicine. The 30 credit hours of continuing education shall include 5 hours in pharmacy and 2 hours in ethics.</p>	<p>The Board could consider rejecting part 1 of this comment with the following statement:</p> <p><i>The Board has approved continuing education offered by the American Medical Association and other groups who may have courses not related to naturopathic medicine. The current rule language provides clarity about the intention of the Board.</i></p>
<p>Comment 5.v:</p> <p>In s. Nat Med 4.04 (2), consider specifying how a license is restored.</p>	<p>Nat Med 4.04 (2) A licensee who fails to complete the continuing education credit hours by the renewal date specified under s. 440.08 (2) (a), Stats., may not practice naturopathic medicine until the license is restored.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The Board rejects this comment to maintain consistency. Other health related boards contain the same provision without further explanation.</i></p>

Clearinghouse comments	Preliminary rule draft as submitted to Clearinghouse	Proposed changes	Comments from ARC and Board Counsel
<p>Comment 5.y:</p> <p>In s. Nat Med 5.02 (2) (j), review the duplicate use of “aiding or abetting”, because s. Nat Med 5.02 (intro.) already refers to the same phrase.</p>	<p>Nat Med 5.02 (2) (j) Aiding or abetting the practice of an unlicensed, incompetent, or impaired person or allowing another person or organization to use one’s license to practice.</p>	<p>No changes.</p>	<p>The Board should consider rejecting this comment with the following statement:</p> <p><i>The Board rejects this comment to maintain consistency. Other health related boards contain the same provision without further explanation.</i></p>
<p>Comment 5.z:</p> <p>Consider revising the title of ch. Nat Med 6 to be more general, because what is included in the chapter is more than licensure requirements.</p>	<p><u>Nat Med 6</u></p> <p><u>Licensure requirements for limited-scope naturopathic doctors</u></p>	<p><u>Nat Med 6</u></p> <p><u>Licensure requirements for limited-scope naturopathic doctors</u></p>	
<p>Comment 6:</p> <p>In s. Nat Med 5.02 (1) (m), consider whether it would be helpful to list other protected classes to align unprofessional conduct with federal law.</p>	<p>Nat Med 5.02 (1) (m) Refusing to render services to a person because of race, color, sex, or religion.</p>	<p>Nat Med 5.02 (1) (m) Refusing to render services to a person because of race, color, sex, or religion, <u>national origin, age, or disability</u>.</p>	

STATE OF WISCONSIN
NATUROPATHIC MEDICINE EXAMINING BOARD

IN THE MATTER OF RULEMAKING	:	ORDER OF THE
PROCEEDINGS BEFORE THE	:	NATUROPATHIC MEDICINE
NATUROPATHIC MEDICINE	:	EXAMINING BOARD
EXAMINING BOARD	:	ADOPTING EMERGENCY RULES

The statement of scope for this rule, SS 071-23, was approved by the Governor on September 21, 2023, published in Register 813B on September 25, 2023, and approved by the Naturopathic Medicine Examining Board on October 11, 2023. This emergency rule was approved by the Governor on January 4, 2024.

ORDER

An order of the Naturopathic Medicine Examining Board to create Nat Med 1 relating to licensure requirements for naturopathic doctors and limited-scope naturopathic doctors.

Analysis prepared by the Department of Safety and Professional Services.

FINDING OF EMERGENCY

The Naturopathic Medicine Examining Board finds that an emergency exists and that this rule is necessary for the immediate preservation of the public peace, health, safety, or welfare. A statement of facts constituting the emergency is:

2021 Wisconsin Act 130 created the Naturopathic Medicine Examining Board and requires creating administrative rules to establish licensure requirements, discipline, and practice standards for naturopathic doctors and limited-scope naturopathic doctors. The Act also includes a provision that all professionals currently practicing naturopathic medicine be licensed beginning March 1, 2024. Before licenses may be issued, the board needs to establish certain standards for initial licensure of naturopathic doctors and limited-scope naturopathic doctors by rule. An expeditious promulgation of the proposed rule is in the best interest of Wisconsin’s public peace, health, safety, or welfare, as it will help ensure continuity of care for individuals already under the care of naturopathic doctors.

ANALYSIS

Statutes interpreted:

Chapter 466, Stats.

Statutory authority:

Sections 15.08 (5) (b), 227.11 (2) (a), 466.03 (1) and (2), Stats.

Explanation of agency authority:

Section 15.08 (5) (b), Stats., states that each examining board “[s]hall 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 227.11 (2) (a), Stats., states that “[e]ach agency may promulgate rules interpreting the provisions of any statute enforced or administered by the agency, if the agency considers it necessary to effectuate the purpose of the statute...”

Section 466.03 (1), Stats., states that the Naturopathic Medicine Examining Board shall establish administrative rules to determine a code of ethics governing professional conduct, standards of practice, continuing education requirements, and examination standards.

Section 466.03 (2), Stats., states that the Naturopathic Medicine Examining Board may establish administrative rules to further interpret s. 466.01 (6) (a) and (c) to identify diagnostic, therapeutic, or other practices or procedures that may be used by naturopathic doctors; expressly prohibit diagnostic, therapeutic, or other practices; establish character and fitness requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish physical and mental competency requirements for initial licensure or renewal of a license and evidence required to demonstrate satisfaction of such requirements; establish evidence of professional competency requirements for initial licensure or renewal of a license including evidence relating to an applicant’s licensure status in other states; establish additional clinical, practical, or residency requirements for initial licensure; and adopt minimum malpractice insurance requirements for naturopathic doctors and limited-scope naturopathic doctors.

Related statute or rule:

None.

Plain language analysis:

The objective of the proposed emergency rule is to implement the statutory changes from 2021 Wisconsin Act 130, which created the Naturopathic Medicine Examining Board. The act allows for the licensure, discipline, and practice of naturopathic doctors and limited-scope naturopathic doctors but requires the board to establish certain licensure requirements by rule before licenses can be issued. Through this emergency rule the board is creating the required rules to allow licensure of naturopathic doctors and limited-scope naturopathic doctors prior to the date when licenses become mandatory.

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

N/A.

Comparison with rules in adjacent states:

Illinois:

Naturopathic doctors are not currently licensed in the state of Illinois. Bills have been introduced in the state legislature to create laws that will allow the licensure of naturopathic doctors.

Iowa:

Iowa does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Michigan:

Michigan does not currently license naturopathic doctors. The state is currently working on advocacy initiatives to start bill projects that will allow for the licensure of naturopathic doctors.

Minnesota:

Minnesota naturopathic doctors are regulated under the Minnesota Board of Medical Practice Registered Naturopathic Doctor Advisory Council. The Minnesota Statutes establish definitions, scope of practice, professional conduct, registration and continuing education requirements, renewal, and discipline for the practice of naturopathic medicine. [MN Stats. ch. 147E]

Summary of factual data and analytical methodologies:

The Board reviewed the statutory changes from 2021 Wisconsin Act 130 and promulgated rules as needed for the profession. While promulgating these rules, the Board referenced chapters from the Board of Nursing, the Medical Examining Board, and the Dentistry Examining Board, as well as the Physician Assistant Affiliated Credentialing Board, among other sources.

Fiscal Estimate:

The Fiscal Estimate 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 by email at Jennifer.Garrett@wisconsin.gov, or by calling (608) 266-2112.

Agency contact person:

Sofia Anderson, 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 Sofia Anderson, 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. Chapter Nat Med 1 is created to read:

**Nat Med 1
AUTHORITY, DEFINITIONS, AND LICENSURE REQUIREMENTS**

Nat Med 1.01. Authority. The rules in this chapter are adopted by the naturopathic medicine examining board pursuant to the authority delegated by ss. 15.08 (5) (b), 227.11 (2), and 466.03, Stats.

Nat Med 1.02. Definitions. As used in this chapter:

- (1) “Board” means the naturopathic medicine examining board.
- (2) “Department” means the department of safety and professional services.
- (3) “Jurisprudence exam” means the board approved examination on the state law related to the practice of naturopathic medicine.
- (4) “Licensee” means a person licensed to practice as a naturopathic doctor or limited-scope naturopathic doctor in this state.
- (5) “Limited-scope naturopathic doctor” has the meaning given in s. 466.01 (3), Stats.
- (6) “Naturopathic doctor” has the meaning given in s. 466.01 (5), Stats.
- (7) “Naturopathic medicine” has the meaning given in s. 466.01 (6), Stats.
- (8) “NPLEX” means the Naturopathic Physicians Licensing Examination administered by the North American Board of Naturopathic Examiners.

Nat Med 1.03 Licensure requirements for naturopathic doctors. An applicant for licensure as a naturopathic doctor shall submit all of the following requirements:

(1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(2) The fee specified in s. 440.05 (1), Stats.

(3) Subject to ss. 111.321, 111.322 and 111.335, Stats, evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(4) Evidence satisfactory to the board that the applicant has complied with at least one of the educational requirements specified in s. 466.04 (1) (d), Stats.

(5) Evidence satisfactory to the board that the applicant has satisfied the examination requirements under s. Nat Med 1.06.

(6) If required by the board, completion of an oral examination as specified under s. Nat Med 1.07.

Nat Med 1.04 Licensure requirements for limited-scope naturopathic doctors. An applicant for licensure as a limited-scope naturopathic doctor shall submit all of the following requirements:

(1) A complete application for the license on a form provided by the department including any information required by the board to determine an applicant's minimal competency to practice.

Note: Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

(2) The fee specified in s. 440.05 (1), Stats.

(3) Subject to ss. 111.321, 111.322 and 111.335, Stats., evidence satisfactory to the board that the applicant does not have an arrest or a conviction record.

(4) Evidence satisfactory to the board that the applicant has satisfied the requirements under s. 466.04 (2) (b) 4. and 5., Stats.

(5) Evidence satisfactory to the board that the applicant has been continually practicing naturopathic medicine in this state for at least 10 years preceding the date of application to obtain a limited-scope naturopathic doctor license.

(6) A signed statement by the applicant committing to completing a jurisprudence exam approved by the board before the end of the first renewal period. The passing score is 85 percent.

(7) Evidence satisfactory to the board that the applicant has exhibited a record of safety in the practice of naturopathic medicine or naturopathy.

(8) If required by the board, completion of an oral examination as specified under s. Nat Med 1.07.

Nat Med 1.05 Reciprocal credentials for service members, former service members, and their spouses. A reciprocal license to practice naturopathic medicine shall be granted

to a service member, former service member, or the spouse of a service member or former service member who the board determines meets all of the requirements under s. 440.09 (2), Stats. Subject to s. 440.09 (2m), Stats., the board may request verification necessary to make a determination under this section.

Note: Instructions for applications can be found on the department of safety and professional services' website at <http://dsps.wi.gov>.

Nat Med 1.06 Examinations.

(1) EXAMINATIONS REQUIRED. Each applicant for licensure under s. Nat Med 1.03 must provide evidence satisfactory to the board that the applicant has passed all of the following:

(a) One of the following for the competency based exam:

1. Part I Biomedical Science Examination and Part II Core Clinical Science Examination of the NPLEX.
2. For graduates of approved naturopathic medical programs prior to 1978, a competency-based state naturopathic medicine licensing exam or equivalent Canadian provincial licensing exam for the practice of naturopathic medicine approved by the board.

(b) Part II Core Clinical Science Examination of the NPLEX for the pharmacology exam.

(c) A signed statement by the applicant committing to completing a jurisprudence exam approved by the board before the end of the first renewal period. The passing score is 85 percent.

(2) FAILURE AND REEXAMINATION. If an applicant has failed any of the exams required under sub. (1) 4 or more times in this state or another licensing jurisdiction in the United States or Canada, the board may require the applicant to submit evidence satisfactory to the board of further professional training or education in examination areas in which the applicant had previously demonstrated deficiencies. If the evidence provided by the applicant is not satisfactory to the board, the board may require the applicant to obtain further professional training or education as the board deems necessary to establish the applicant's fitness to practice naturopathic medicine in this state. In order to determine any further professional training or education requirement, the board shall consider any information available relating to the quality of the applicant's previous practice, including the results of the applicant's performance on any oral examination required under s. Nat Med 1.07.

Nat Med 1.07 Oral Examination. **(1)** An applicant may be required to complete an oral examination if the applicant:

- (a)** Has a medical condition which in any way impairs or limits the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
- (b)** Uses chemical substances so as to impair in any way the applicant's ability to practice naturopathic medicine with reasonable skill and safety.
- (c)** Has been disciplined or had licensure denied by a licensing or regulatory authority in this state or another jurisdiction.

(d) Has been found to have been negligent in the practice of naturopathic medicine or has been a party in a lawsuit in which it was alleged that the applicant had been negligent in the practice of naturopathic medicine.

(e) Has been convicted of a crime the circumstances of which substantially relate to the practice of naturopathic medicine.

(f) Has been diagnosed as suffering from pedophilia, exhibitionism, or voyeurism.

(g) Has engaged in the illegal use of controlled substances.

(h) Has been subject to adverse formal action during the course of naturopathic medicine education, postgraduate training, hospital practice, or other naturopathic medicine employment.

(i) Has not practiced naturopathic medicine for a period of 5 years or more prior to application unless the applicant has graduated from a school of naturopathic medicine within that period.

(j) Has failed the national examination 4 times or more and the board has determined that further examination is required.

(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) An oral examination of an applicant is conducted by the board. The purpose of an oral exam is to evaluate the applicant's eligibility for a license.

(4) The grade of an exam shall be the applicant's final grade for the oral examination under this section. The passing grade for an oral exam under this section is 90 percent.

SECTION 2. EFFECTIVE DATE. This emergency rule shall take effect upon publication in the official state newspaper.

(END OF TEXT OF RULE)

Dated 12/14/2023

Agency 
Chairperson
Naturopathic Medicine Examining Board

NATUROPATHIC MEDICINE EXAMINING BOARD
2024 Meeting Dates

Meeting Date		<i>Start time</i>	Agenda item deadline
Friday, February 16, 2024	In person	<i>9:00 AM</i>	2/6/2024
<i>New!</i> Friday, March 29, 2024	Virtual	<i>9:00 AM</i>	3/19/2024
Friday, April 19, 2024	Virtual	<i>9:00 AM</i>	4/9/2024
Friday, June 14, 2024	In person	<i>9:00 AM</i>	6/4/2024
Friday, August 16, 2024	Virtual	<i>9:00 AM</i>	8/6/2024
Friday, October 18, 2024	Virtual	<i>9:00 AM</i>	10/8/2024
Friday, December 13, 2024	Virtual	<i>9:00 AM</i>	12/3/2024

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brenda Taylor, Board Services Supervisor		2) Date when request submitted: 12/14/2023	
3) Name of Board, Committee, Council, Sections: All Boards			
4) Meeting Date: First Meeting of 2024	5) Attachments: <input checked="" type="checkbox"/> Yes	6) How should the item be titled on the agenda page? Annual Policy Review	
7) Place Item in: <input checked="" type="checkbox"/> Open Session	8) Is an appearance before the Board being scheduled? <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed: Board SharePoint Site: https://dsps.boards.wisconsin.gov/			
<p>Please be advised of the following Policy Items:</p> <ol style="list-style-type: none"> 1. In-Person Meeting Policy: Depending on the frequency of Board meetings, a Board may be allowed a certain number of in-person meetings. <ul style="list-style-type: none"> • 4-5 Meetings per year = 1 in-person opportunity • 6-8 Meetings per year = 2 in-person opportunities • 12 Meetings per year = 4 in-person opportunities 2. Attendance/Quorum: Thank you for your service and commitment to meeting attendance. If you cannot attend a meeting or have scheduling conflicts impacting your attendance, please let us know as soon as possible. Timely notification is appreciated as a quorum is required for Boards, Sections, and Councils to meet pursuant to Open Meetings Law. 3. Walking Quorum: Board/Section/Council members must not collectively discuss the body's business outside a properly noticed meeting. Should several members of a body do so, the members could be violating the open meetings law. 4. Mandatory Training: All Board Members must complete Public Records and Ethics Training, annually. Register to set up an account in the Cornerstone LearnCenter online portal or Log in to an existing account. 5. Agenda Deadlines: Please communicate agenda topics to your Executive Director before the agenda submission deadline at 12:00 pm, 8 business days prior to a meeting. (Attachment: Timeline of a Meeting) 6. Per Diem and Reimbursement Claims: Please submit all Per Diem and Reimbursement claims to DSPTS within 30 days of the close of each month in which expenses are incurred. (Attachment: Per Diem Example) 7. Lodging Accommodations/Hotel Cancellation Policy: Lodging accommodations are available to eligible members. Standard eligibility: the member must leave home before 6:00 am to attend a meeting by the scheduled start time. <ol style="list-style-type: none"> a. If a member cannot attend a meeting it is their responsibility to cancel their reservation within the applicable cancellation timeframe. b. If a meeting is changed to occur remotely, is canceled, or rescheduled, DSPTS staff will cancel or modify reservations as appropriate. 8. Inclement Weather Policy: In the event of inclement weather, the DSPTS may change a meeting from an in-person venue to hosted as virtual/teleconference only. 			
11)		Authorization	
<i>Brenda Taylor</i>		<i>12/14/2023</i>	
<p>Directions for including supporting documents:</p> <ol style="list-style-type: none"> 1. This form should be saved with any other documents submitted to the Agenda Items folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director 			

Timeline of a Meeting

8 business days prior to the meeting: All agenda materials are due to the Department by 12:00 pm, 8 business days prior to the meeting date.

7 business days prior to the meeting: The draft agenda page is due to the Executive Director. The Executive Director transmits to the Chair for review and approval.

5 business days prior to the meeting: The approved agenda is returned to the Board Administration Specialist for agenda packet production and compilation.

4 business days prior to the meeting: Agenda packets are posted on the DSPS Board SharePoint site and on the Department website.

Agenda Item Examples:

- Approval of the Agenda and previous meeting Minutes
- Open Session Items
 - Public Hearings (relating to Administrative Rules)
 - Administrative Matters
 - Legislation and Policy Matters
 - Administrative Rules Matters
 - Credentialing Matters
 - Education and Exam Issues
 - Public Agenda Requests
 - Current Issues Affecting the Profession
 - Public Comments
- Closed Session items
 - Deliberations on Proposed Disciplinary Actions
 - Stipulations
 - Administrative Warnings
 - Case Closings
 - Monitoring Matters
 - Professional Assistance Procedure (PAP) Issues
 - Proposed Final Decisions and Orders
 - Orders Fixing Costs/Matters Relating to Costs
 - Credentialing Matters
 - Education and Exam Issues

Thursday of the Week Prior to the Meeting: Agendas are published for public notice on the Public Notices and Meeting Minutes website: publicmeetings.wi.gov.

1 business day after the Meeting: "Action" lists are distributed by staff detailing board actions on closed session business.

5 business days after the Meeting: "To Do" lists are distributed to staff to ensure that board decisions are acted on and/or implemented within the appropriate divisions in the Department. Minutes approved by the board are published on the the Public Notices and Meeting Minutes website: publicmeetings.wi.gov.

Department of Safety and Professional Services

PER DIEM REPORT

INSTRUCTIONS: Claimant records board-related activities by entering the date of an activity, the duration of time spent in that activity, the relevant purpose code (see purpose code descriptions below), where the activity is conducted, and the type of activity performed. Only one (1) \$25.00 per diem payment can be issued on any given calendar day.

Purpose Codes:

- A. Official meetings including video/teleconference calls** (automatic day of per diem): i.e., board, committee, board training or screening panels; **Hearings**, i.e., Senate Confirmation, legislative, disciplinary or informal settlement conferences; **Examinations and Test Development Sessions**, i.e., test administration, test review or analysis events, national testing events, tour of test facilities, etc.)
- B. Other** (One (1) per diem will be issued for every five (5) hours spent in category B, per calendar month): i.e., review of disciplinary cases, consultation on cases, review of meeting materials, board liaison work e.g., contacts regarding Monitoring, Professional Assistance Procedure, Credentialing, Education and Examinations

NAME OF EXAMINING BOARD OR COUNCIL			BOARD OR COUNCIL MEMBER'S NAME	
EXAMPLE EXAMINING BOARD			MARY SUNSHINE	
Activity Date	Duration of Activity	Purpose Code	Where Performed	Activity
MM/DD/YY	Hours/Minutes	A or B	City/Location (Home, Work, DSPS)	Describe Activity Performed (see purpose codes)
12/2/20	2 hrs	B	Pleasant Prairie/Home	Review of screening panel materials
12/3/20	2 hr / 30 mins	B	Pleasant Prairie/Home	Review of screening panel materials
12/10/20	1 hr	A	Pleasant Prairie/Home	Screening Panel Meeting - Teleconference
12/12/20	1 hr / 30 mins	B	Pleasant Prairie/Home	Case consultation
12/13/20	1 hr	B	Pleasant Prairie/Home	Liaison: Application Review
12/16/20	6 hrs	A	Madison/DSPS	Board Member Training
				<p>The 5-hour rule applies to "B" code activities. Add the 'B' codes within the calendar month and then divide by five (5) hours to calculate your per diem payment. In this case the total is seven (7) hours which equals one (1) day of per diem.</p> <p>Each 'A' code is an automatic day of per diem regardless of time spent in that activity. Ms. Sunshine is eligible for two (2) additional days of payment.</p> <p>Department staff completes the fields titled "Total Days Claimed".</p>
CLAIMANT'S CERTIFICATION			Comments:	
The undersigned certifies, in accordance with § 16.53, Wis. Stats., that this account for per diem, is just and correct; and that this claim is for service necessarily incurred in the performance of duties required by the State, as authorized by law.				
<i>Mary Sunshine</i>		1/4/2021		
Claimant's Signature	Date	Supervisor	Date	

EMPL ID: 100012345-0

To be completed by Department staff: **TOTAL DAYS CLAIMED: 3 @ \$25.00 = 75.00**

NATUROPATHIC MEDICINE EXAMINING BOARD

Elections as of 12/31/2023

ELECTION RESULTS	
Chairperson	Jill Crista
Vice Chairperson	Kristine Nichols
Secretary	Allison Becker

Appointment of Liaisons and Alternates

LIAISON APPOINTMENTS	
Legislative Liaison(s)	Jill Crista <i>Alternate:</i> Allison Becker
Travel Authorization Liaison(s)	Kristine Nichols <i>Alternate:</i> Paul Ratte
Website Liaison(s)	Robyn Doege-Brennan <i>Alternate:</i>



State of Wisconsin
DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES
CORRESPONDENCE / MEMORANDUM

DATE: January 9, 2024

TO: Board, Council, and Committee Members

FROM: Legal Counsel

SUBJECT: Liaison Definitions and Delegations Explanations

Overall Purpose of Liaison Appointments

Each Board/Section (Board) has inherent authority that is established in our Wisconsin Statutes. This authority may change from Board to Board. For further information on your Board's authority review Wis. Stat. ch. 15. Generally, each Board has authority to grant credentials, discipline credential holders, and set standards for education and examinations. Additionally, Liaisons assist with the operations of the Boards purpose by weighing in on legislative matters, traveling to national conferences, or communicating with stakeholders.

The Department asks that each year the Boards make liaison appointments to assist the Board and Department to accomplish these tasks in an efficient manner. Your practical knowledge and experience, as an appointed member of a professional board, are essential in making determinations regularly. The Liaison positions below assist the Department to complete operations between Board meetings. In most cases, Liaisons can make decisions for the full Board in their designated area. These are determined through the delegation process. However, a Liaison may also decide to send the delegated issue to the full Board for consideration as appropriate. Delegations assist the Board in defining the roles and authorities of each Liaison.

Liaison Definitions

Credentialing Liaison: The Credentialing Liaison is empowered by the Board to review and make determinations regarding certain applications for credentials. The Credentialing Liaison may be called on by Department staff to answer questions that pertain to qualifications for licensure, which may include whether a particular degree is suitable for the application requirements, whether an applicant's specific work experience satisfies the requirements in statute or rule for licensure, or whether an applicant's criminal or disciplinary history is substantially related to the practice of the profession in such a way that granting the applicant a credential would create a risk of harm to the public. Questions will likely be sent by Department

staff to the Credentialing Liaison via email and may include application materials. The Credentialing Liaison serves a very important role in the credentialing process.

Monitoring Liaison: The Monitoring Liaison is empowered by the Board to make decisions on any credential that is limited either through a disciplinary order or initial licensure. The Department Monitors will send requests from credential holders to the Monitoring Liaison. These requests vary wildly. A common request could be to remove a limitation that has been placed on a credential or to petition for full licensure. The Monitoring Liaison can review these requests and make decisions on behalf of the Board. The Board has the authority to grant decision making latitude to their liaison to any degree. The specific monitoring delegations are found in the Monitoring Document attached to the agenda. If the Monitoring Liaison has a question on a request, it is advisable for the Liaison to consult further with Department staff or bring the matter to the full Board for consideration.

Professional Assistance Procedure (PAP) Liaison: PAP is a voluntary program open to credential holders with substance abuse issues who wish to seek help by being held accountable through treatment and monitoring by the Department and Board. As part of PAP, the credential holder enters into an agreement with the Department to undergo testing, counseling, or other rehabilitation. The PAP Liaison's role includes responding to credential holders' requests for modifications and terminations of provisions of the agreement. Similar to the Monitoring Liaison, the Department Monitors will send requests from credential holders to the PAP Liaison for further review.

Education and Examination Liaison: Some Boards are required by statute or rule to approve qualifying education and examinations. The Education and Examination Liaison provides guidance to Department staff to exercise authority of the Board to approve or decline examinations and educational programs. This determination requires a level of professional expertise and should be performed by a professional member of the Board. For some Boards, the Education and Examination Liaison will also be tasked with approving continuing education programs and courses.

Legislative Liaison: The Legislative Liaison is permitted to act and speak on the Board's behalf regarding pending and enacted legislation or actions being considered by the legislature outside of Board meetings. The Legislative Liaison is not the Board's designated lobbyist and should exercise their delegated authority carefully.

Travel Authorization Liaison: The Travel Authorization Liaison is authorized to approve a Board member to travel to events and speak or act on the Board's behalf between Board meetings. The Travel Authorization Liaison is called upon to make decisions when sufficient notice was not received, and the full Board could not determine a representative to travel. The Travel Authorization Liaison is tasked with making determinations if the Board appointed representative is not able to attend or if the Board becomes authorized to send additional members. As scholarship and funding streams can be unpredictable.

Communication Liaison: The Communication Liaison responds on behalf of the Board when questions arise that require a response from the Board. The Communication Liaison works with

the Department to cultivate an appropriate response. The Communication Liaison can be responsible for all types of communication on behalf of the Board. However, the Board can appoint a separate **Website Liaison** to work with DSPS staff to make changes and ensure the Board webpage contains updated and accurate information. Additionally, for the Boards that are required by statute to produce a newsletter or digest. The Board can appoint a separate **Newsletter/Digest Liaison** to assemble and approve content for those communications.

Screening Panel Members: The duties of the Screening panel are to review incoming complaints against credential holders and determine which complaints should be opened for investigation and which complaints should be closed without further action. The complexity and amount of work in this role depends substantially on your particular Board. As a member of the Screening panel you are asked to apply your professional expertise to determine if a complaint alleges unprofessional conduct.

Delegations Explanations

Credentialing Delegations

The overall purpose of credentialing delegations is to allow the credentialing process to proceed as efficiently and effectively as possible.

Delegation of Authority to Credentialing Liaison (Generic)

MOTION EXAMPLE: to delegate authority to the Credentialing Liaison(s) to serve as a liaison between the Department and the Board and to act on behalf of the Board in regard to credentialing applications or questions presented to them, including the signing of documents related to applications.

PURPOSE: To permit one representative of the Board to assist Department staff with credentialing applications and eliminate the need for the entire Board to convene to consider credential application content or questions. Additionally, it is most efficient to have the designated liaison who has assisted with the credentialing process to be able to effectuate decisions which require a signature.

Delegation of Authority to DSPS When Credentialing Criteria is Met

MOTION EXAMPLE: to delegate credentialing authority to the Department to act upon applications that meet all credentialing statutory and regulatory requirements without Board or Board liaison review.

PURPOSE: To permit Department staff to efficiently issue credentials and eliminate the need for Board/Section/Liaison review when all credentialing legal requirements are met in an application.

Delegation of Authority for Predetermination Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to make decisions regarding predetermination applications pursuant to Wis. Stat. § 111.335(4)(f).

PURPOSE: In general, the Wisconsin Fair Employment Act (codified in Wis. Stat. Ch. 111) prohibits licensing agencies from discriminating against applicants because of their arrest and/or conviction record. However, there are exceptions which permit denial of a license in certain circumstances. Individuals who do not possess a license have a legal right to apply for a determination of whether they are disqualified from obtaining a license due to their conviction record. This process is called “Predetermination”. Predeterminations must be completed within 30 days. This delegation allows Department Attorneys to conduct predetermination reviews and efficiently make these legal determinations without need for Board/Section/Liaison review.

Delegation of Authority for Conviction Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve applications with convictions which are not substantially related to the practice.

PURPOSE: As used here, “substantially related” is a legal standard that is used in the Wisconsin Fair Employment Act. The concept of what is “substantially related” is informed by case law. This delegation permits Department Attorneys to independently conduct conviction reviews and efficiently approve applications if convictions are not substantially related to the practice of the profession. Applications that contain conviction records that may be substantially related to the practice of a profession will still be submitted to the Credentialing Liaison for input.

Delegation to DSPS When Applicant’s History Has Been Previously Reviewed

MOTION EXAMPLE: to delegate authority to Department staff to approve applications where Applicant’s prior discipline has been approved for a previous credential and there is no new discipline.

PURPOSE: Some Boards offer progressive levels of credentials. This delegation eliminates the need for a re-review of discipline that has already been considered and approved by the Board/Section/Liaison for a lower-level credential.

Delegation to DSPS When Applicant’s Conviction History Has Been Previously Reviewed

MOTION EXAMPLE: to delegate authority to Department staff to approve applications where criminal background checks have been approved for a previous credential and there is no new conviction record.

PURPOSE: Some Boards offer progressive levels of credentials. This delegation eliminates the need for a re-review of conviction history that has already been reviewed and approved for a lower-level credential.

Delegation of Authority for Reciprocity Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve reciprocity applications in which the out of state license requirements meet Wisconsin license requirements. (specific legal standards are referenced in the motion depending on credential/profession type).

PURPOSE: Applications via reciprocity or endorsement require comparison of Wisconsin licensing requirements to the licensing requirements of another jurisdiction. These reviews consider the legal standard for reciprocity, which varies by profession, as well as the specified legal requirements to obtain licensure in the profession. This delegation permits Department Attorneys to independently conduct reciprocity reviews and efficiently approve applications if legal standards and requirements are met for licensure. Applications for which reciprocity may not be available will still be submitted to the Credentialing Liaison for input.

Delegation of Authority for Military Reciprocity Reviews

MOTION EXAMPLE: to delegate authority to the Department Attorneys to review and approve military reciprocity applications in which the individual meets the requirements of Wis. Stat. § 440.09.

PURPOSE: The law permits service members, former service members, and their spouses to be licensed if they hold licensure in other jurisdictions that qualify them to perform acts authorized by the credential they are seeking in Wisconsin. This is a shortened path to licensure that does not require meeting the specific requirements/standards for licensure/reciprocity in a profession. By law, the Department/Board must expedite the issuance of a reciprocal license via military reciprocity. This delegation permits Department Attorneys to independently conduct military reciprocity reviews and efficiently approve applications if legal standards and requirements are met for licensure. Applications for which reciprocity may not be available will still be submitted to the Credentialing Liaison for input.

Delegation of Authority for Application Denial Reviews

MOTION EXAMPLE: to delegate authority to the Department's Attorney Supervisors to serve as the Board designee for purposes of reviewing and acting on requests for hearing as a result of a denial of a credential.

PURPOSE: When an application is denied, the applicant has a legal right to appeal the denial determination. Applicants must meet a specified legal standard in order to have an appeal granted. Additionally, Wisconsin law sets specific time frames for appeal decisions. This delegation permits Department Attorney Supervisors to independently review and efficiently act on requests for hearing as a result of a denial of a credential.

Delegation to Department Attorneys to Approve Duplicate Legal Issue

MOTION EXAMPLE: to delegate authority to Department Attorneys to approve a legal matter in connection with a renewal application when that same/similar matter was already addressed

by the Board and there are no new legal issues for that credential holder. Motion carried unanimously.

PURPOSE: The intent of this delegation is to be able to approve prior discipline by the Board for the renewal applicant. This delegation eliminates the need for a re-review of discipline that has already been considered and approved by the Board/Section/Liaison.

Monitoring Delegations

The overall purpose of monitoring delegations is to be able to enforce the Boards orders and limited licenses as efficiently and effectively as possible. Monitoring delegations have two categories: delegations to the monitoring liaison and delegations to the Department Monitor.

Delegation of Authority to Department Monitor

MOTION EXAMPLE: to delegate authority to the Department Monitor

- a. to grant full reinstatement of licensure if education is the only limitation and credential holder has submitted the required proof of course completion.
- b. to suspend the credential if the credential holder has not completed Board ordered education, paid costs, paid forfeitures, within the time specified by the Board Order.
- c. to lift a suspension when compliance with education and costs provisions have been met.

PURPOSE: These delegations allow for the Department Monitor to automatically act on requests when certain criteria are met or not met without needing to burden the Board Monitoring Liaison. The Board can set their own criteria for what actions they would like to be handled by the Department, the Monitoring Liaison and the full Board.

Delegation of Authority to Monitoring Liaison

MOTION EXAMPLE: to delegate authority to the Monitoring Liaison to approve or deny all requests received by the credential holder.

PURPOSE: These delegations allow the Board to set criteria for what decisions can be made by the Board member(s) serving as the Monitoring Liaison and what matters should be decided by the full Board. The Board has the authority to set specific criteria or to permit the liaison to make all determinations at their discretion.

Education and Exam Delegations

MOTION EXAMPLE: to delegate authority to the Education and Examination Liaison(s) to address all issues related to continuing education and examinations. Motion carried unanimously. (Differs by Board)

PURPOSE: Some Boards are responsible for approving qualifying educational programs or continuing education courses. A delegation is executed in order for a Board member to make

these determinations on behalf of the Boards and with assistance of the Department. Additionally, some Boards review examinations and individual scores to qualify for a credential.

Miscellaneous Delegations

Document Signature

MOTION EXAMPLE: to delegate authority to the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to sign documents on behalf of the Board in order to carry out its duties. Motion carried unanimously.

MOTION EXAMPLE: in order to carry out duties of the Board, the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) has the ability to delegate signature authority for purposes of facilitating the completion of assignments during or between meetings. The members of the Board hereby delegate to the Executive Director, Board Counsel or DPD Division Administrator, the authority to sign on behalf of a Board member as necessary. Motion carried unanimously.

PURPOSE: In order to take the action approved at Board meetings, the Department may need to draft correspondence and/or Orders after the meetings have adjourned. These actions then need to be signed by a Board Member. This interaction usually takes place over email and a Board member can authorize the use of his/her signature that is kept on file.

Urgent Matters

MOTION EXAMPLE: in order to facilitate the completion of urgent matters between meetings, the Board delegates its authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving Board member in that succession), to appoint liaisons to the Department to act in urgent matters. Motion carried unanimously.

PURPOSE: Allows for quick responses to urgent matters that may need Board approval or for which the Department requires guidance from the Board.

Delegation to Chief Legal Counsel

Due to Loss of Quorum

MOTION EXAMPLE: to delegate the review and authority to act on disciplinary cases to the Department's Chief Legal Counsel due to lack of/loss of quorum after two consecutive meetings. Motion carried unanimously.

PURPOSE: Sometimes Boards can struggle to meet quorum necessary to conduct business. This happens for a multitude of reasons but this delegation allows for the Boards to have disciplinary cases decided by Chief Legal Counsel if the Board fails to meet quorum for two consecutive meetings.

Stipulated Resolutions

MOTION EXAMPLE: to delegate to the Department's Chief Legal Counsel (CLC) the authority to act on behalf of the Board concerning stipulated resolutions providing for a surrender, suspension, or revocation of a credential, where the underlying merits involve serious and dangerous behavior, and where the signed stipulation is received between Board meetings. The Board further requests that CLC only act on such matters when the best interests of the Board, Department and the Public are best served by acting upon the stipulated resolution at the time the signed stipulation is received versus waiting for the next Board meeting. Motion carried unanimously.

PURPOSE: For matters of public safety, it may be necessary to take immediate action on a stipulated agreement rather than allowing a credential holder to continue practicing unencumbered until the next scheduled meeting. This delegation allows CLC to act on behalf of the Board when there is a stipulated agreement. A stipulated agreement is an agreement to which all relevant parties have consented to the terms.

Voluntary Surrenders

MOTION: to delegate authority to the assigned case advisor to accept or refuse a request for voluntary surrender pursuant to Wis. Stat. § 440.19 for a credential holder who has a pending complaint or disciplinary matter.

MOTION: to delegate authority to the Department to accept the voluntary surrender of a credential when there is no pending complaint or disciplinary matter with the Department pursuant to Wis. Stat. § 440.19.

PURPOSE: Credential holders can ask the Boards to surrender their credentials at any time. These delegations are in place for the different situations that arise from those requests. If a credential holder is seeking to surrender their credential because they wish to leave the profession that can be processed with this delegation by the Department if they have no pending disciplinary complaints. If the credential holder wishes to surrender while they have a pending disciplinary complaint that request is reviewed by the individual Board member assigned to the case.

DLSC Pre-screening

MOTION EXAMPLE: to delegate pre-screening decision making authority to the DSPS screening attorney for opening cases where the credential holder has failed to respond to allegations contained in the complaint when requested by intake (Case will be opened on failure to respond and the merits of the complaint).

PURPOSE: Pre-Screening delegations exist so the Board can define specific parameters where the Department can review disciplinary complaints and open those cases if they meet certain criteria. Boards also have the authority to set certain criteria that would allow the Department to review and close a case if the criteria is met.

Roles and Authorities Delegated for Monitoring

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

Authorities Delegated to the Monitoring Liaison

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

1. Grant a temporary reduction in random drug screen frequency upon Respondent’s request if he/she is unemployed and is otherwise compliant with Board/Section order. The temporary reduction will be in effect until Respondent secures employment in the profession. The Department Monitor (“Monitor”) will draft an order and sign on behalf of the Liaison.
2. Grant a stay of suspension if Respondent is eligible per the Board/Section order. The Monitor will draft an order and sign on behalf of the Liaison.
3. Remove the stay of suspension if there are repeated violations or a substantial violation of the Board/Section order. In conjunction with removal of any stay of suspension, the Liaison may prohibit Respondent from seeking reinstatement of the stay for a specified period of time. The Monitor will draft an order and sign on behalf of the Liaison.
4. Grant or deny approval when Respondent proposes continuing/disciplinary/remedial education courses, treatment providers, mentors, supervisors, change of employment, etc. unless the order specifically requires full-Board/Section approval.
5. Grant full reinstatement of licensure if Respondent has fully complied with all terms of the order without deviation. The Monitor will draft an order and obtain written authorization from the Liaison to sign on their behalf.
6. Grant or deny a request to appear before the Board/Section in closed session.
7. The Liaison may determine whether Respondent’s petition is eligible for consideration by the full Board/Section.
8. Accept Respondent’s written request to surrender credential. If accepted by the Liaison, Monitor will consult with Board Counsel to determine if a stipulation is necessary. If a stipulation is not necessary, Monitor will draft an order and sign on behalf of the Liaison. If denied by the Liaison, the request to surrender credential will go to the full Board for review. (Except PHM, MED)

9. Grant Respondent's petition for a reduction in drug screens per the standard schedule, below. If approved, Monitor will draft an order and sign on behalf of the Liaison. Orders that do not start at 49 screens will still follow the same standard schedule.
 - a. Initial: 49 screens (including 1 hair test, if required by original order)
 - b. 1st Reduction: 36 screens (plus 1 hair test, if required by original order)
 - c. 2nd Reduction: 28 screens plus 1 hair test
 - d. 3rd Reduction: 14 screens plus 1 hair test
10. (*Dentistry only*) Ability to approve or deny all requests from a respondent.
11. The Liaison may approve or deny Respondent's request to be excused from drug and alcohol testing for work, travel, etc. (Applies only to these Boards: Dietitians, Massage/Bodywork Therapy Board, DEN, PAB, CHI, MED, RAD)
12. **The Liaison may have full authority to approve or deny a request from a Respondent that otherwise would require the approval of the full Board if the request cannot be heard and voted on due to lack of/loss of quorum.**
13. **The Liaison may have full authority to terminate any treatment ONLY upon written request from Respondent and written recommendation from Respondents treater.**

Authorities Delegated to the Department Monitor

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

1. Grant full reinstatement of licensure if education is the sole condition of the limitation and Respondent has submitted the required proof of completion for approved courses.
2. Suspend the license if Respondent has not completed Board/Section-ordered education and/or paid costs and forfeitures within the time specified by the Board/Section order. The Monitor may remove the suspension and issue an order when proof of completion and/or payment have been received.
3. Suspend the license (or remove stay of suspension) if Respondent fails to enroll and participate in an Approved Program for drug and alcohol testing within 30 days of the order, or if Respondent ceases participation in the Approved Program without Board approval. This delegated authority only pertains to respondents who must comply with drug and/or alcohol testing requirements.
4. Grant or deny approval when Respondent proposes treatment providers [, mentors, supervisors, etc.] unless the Order specifically requires full-Board/Section or Board designee approval. (Except for MED)
5. Grant a maximum of one 90-day extension, if warranted and requested in writing by Respondent, to complete Board/Section-ordered continuing/disciplinary/remedial education.
6. Grant a maximum of one 90-day extension or payment plan for proceeding costs and/or forfeitures if warranted and requested in writing by Respondent.
7. Grant a maximum of one 90-day extension, if warranted and requested in writing by Respondent, to complete a Board/Section-ordered evaluation or exam.

Authorities Delegated to Board Legal Counsel

Board Legal Counsel may take the following actions on behalf of the Board/Section:

1. Sign Monitoring orders that result from Board/Section meetings on behalf of the Board/Section Chair.
-

Updated 03/13/2023

2022 Roles & Authorities

NATUROPATHIC MEDICINE EXAMINING BOARD

2023 Delegations

Document Signature Delegations

MOTION: Allison Becker moved, seconded by Robyn Doege-Brennan, to delegate authority to the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to sign documents on behalf of the Board in order to carry out its duties. Motion carried unanimously.

MOTION: Kristine Nichols moved, seconded by Paul Ratte, in order to carry out duties of the Board, the Chairperson (or in absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) has the ability to delegate signature authority for purposes of facilitating the completion of assignments during or between meetings. The members of the Board hereby delegate to the Executive Director or DPD Division Administrator, the authority to sign on behalf of a board member as necessary. Motion carried unanimously.

Delegated Authority for Urgent Matters

MOTION: Kristine Nichols moved, seconded by Allison Becker, that in order to facilitate the completion of urgent matters between meetings, the Board delegates its authority to the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession), to appoint liaisons to the Department to act in urgent matters. Motion carried unanimously.

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

MOTION: Kristine Nichols moved, seconded by Jill Crista, to authorize the Department staff to provide national regulatory related bodies with all board member contact information that the Department retains on file. Motion carried unanimously.

Legislative Liaison Delegation

MOTION: Kristine Nichols moved, seconded by Paul Ratte, to delegate authority to the Legislative Liaisons to speak on behalf of the Board regarding legislative matters. Motion carried unanimously.

Travel Authorization Liaison Delegation

MOTION: Robyn Doege-Brennan moved, seconded by Robert Coleman Jr., to delegate authority to the Travel Authorization Liaison to approve any


board member travel to, and/or participation in, events germane to the Board, and to designate representatives from the Board to speak and/or act on the Board's behalf at such events. Motion carried unanimously.

Website Liaison(s) Delegation

MOTION: Kristine Nichols moved, seconded by Jill Crista, to authorize to the Website Liaison(s) to act on behalf of the Board in working with Department staff to identify and execute website updates. Motion carried unanimously.

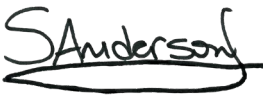
**State of Wisconsin
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Brad Wojciechowski, Executive Director		2) Date when request submitted: 2/5/2024 <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: Choose an item. Naturopathic Medicine Examining Board			
4) Meeting Date: 2/16/2024	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Credentialing Matters – Discussion and Consideration 1) Naturopathic doctor application on License	
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-DS/PS Staff)</i> <input type="checkbox"/> Yes <Appearance Name(s)> <input type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: <Click Here to Add Case Advisor Name or N/A>	
10) Describe the issue and action that should be addressed: Laura Orloski will attend the February 16, 2024 meeting to discuss the application process for naturopathic doctors on License.			
11) Authorization			
		2/5/2024	
Signature of person making this request		Date	
Supervisor (Only required for post agenda deadline items)		Date	
Executive Director signature (Indicates approval for post agenda deadline items)		Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the Agenda Items folders. 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
Department of Safety & Professional Services**

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Sofia Anderson – Administrative Rules Coordinator		2) Date when request submitted: 02/06/2024 <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: Naturopathic Medicine Examining Board			
4) Meeting Date: February 16, 2024	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Rules Matters – Discussion and Consideration 1. Incorporation of Standards Letter for CR 23-074 Nat Med 1 to 10, relating to naturopathic doctors. 2. Update on Emergency Rule EmR 2402 Nat Med 1 to 10, relating to licensure requirements for NDs and limited-scope NDs. 3. Pending and possible rulemaking projects.	
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: 1. Incorporation of Standards letter. 2. AANP Code of Ethics. 3. Nat Med Rules list chart			
11) Authorization <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  <hr/> Signature of person making this request </div> <div style="text-align: center;"> 02/06/2024 <hr/> Date </div> </div> <hr/> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Supervisor (if required) </div> <div style="text-align: center;"> Date </div> </div> <hr/> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Executive Director signature (indicates approval to add post agenda deadline item to agenda) </div> <div style="text-align: center;"> Date </div> </div>			
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.			



Tony Evers, Governor
Daniel Hereth, Secretary

January 31, 2024

The Honorable Josh Kaul
Wisconsin Attorney General
P.O. Box 7857, 17 West Main Street
Madison, Wisconsin 53707-7857

Dear Attorney General Kaul:

Pursuant to sections 227.21 and 466.03 (1) (a) of the Statutes, the Naturopathic Medicine Examining Board is hereby requesting consent from your office to incorporate the American Association of Naturopathic Physicians code of ethics as approved August 2012 by reference Wisconsin Administrative Code, chapter Nat Med 5, entitled Code of Ethics and Unprofessional Conduct.

A copy of this standard is enclosed for your review. This standard is of limited public interest, is readily available, and is promulgated by an organization of recognized national standing. It is the opinion of the Naturopathic Medicine Examining Board that incorporating these standards by reference rather than reprinting them in the Administrative Code will avoid unwarranted expense, be more efficient, and create less confusion.

After reviewing this material, if consent to incorporate is granted, a copy of these standards will be placed on file in the offices of the Legislative Reference Bureau in accordance with section 227.21 of the Statutes.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jill Crista'.

Dr. Jill Crista
Chairperson
Naturopathic Medicine Examining Board

Enclosures



American Association of Naturopathic Physicians:

Code of Ethics

To provide protection to the general public, a naturopathic physician shall abide by the following code of ethics:

1. **Honesty:** A naturopathic physician shall conduct himself or herself in an honest manner; shall not represent him or herself to patients or the public in an untruthful, misleading, or deceptive manner; and shall not engage in advertising that is false or deceptive.
2. **Improper relationship:** A naturopathic physician shall not engage in sexual relations with a patient unless that patient has been released from the naturopathic physician's care for at least one year. The termination of the physician-patient relationship shall be in writing, and the patient shall understand that the physician-patient relationship has ended.
3. **Privacy:** A naturopathic physician shall maintain patient privacy and confidentiality; provided that if the naturopathic physician becomes aware that a patient is a danger to the public or to her or himself, the naturopathic physician shall take reasonable steps to advise appropriate public officials or agencies of the potential danger, within the guidelines of applicable laws.
4. **Performance:** A naturopathic physician shall perform professional tasks and responsibilities to the best of the naturopathic physician's ability, and standards of care and refrain from engaging in any behavior that will detract from his or her ability to engage in the competent practice of naturopathic medicine.
5. **Obligation:** The fundamental and primary obligation of a naturopathic physician is to the patient, and the maintenance and improvement of the patient's health and well-being.
 - a. A naturopathic physician shall at all times seek to employ methods of diagnosis and therapy that are consistent with naturopathic medical philosophy and principles of practice, scientific principles and evidence, and the naturopathic physician's training and experience, and shall provide patients with information about these diagnostic approaches, therapies and potential alternative diagnostic approaches and therapies so that the patient may give fully informed consent to the recommended diagnostic approaches or treatments.
 - b. As part of the obligation to provide care, a naturopathic physician shall use his or her best efforts to facilitate a patient's access to high quality, safe and reliable medicines, medical devices, diagnostic tests and supplements.
 - c. A naturopathic physician shall offer alternative sources for obtaining the items in subparagraph (5b) as long as those alternative sources do not compromise safety or clinical effectiveness.
 - d. The naturopathic physician shall refrain from recommending medicines or treatments of a secret nature, and shall adequately disclose the contents of medicines or the nature and description of treatments recommended to a patient.

- e. Furthermore, all therapies shall be monitored by the naturopathic physician in a timely manner utilizing reliable means in order to accurately assess the patient's response to employed treatments.
 - f. A naturopathic physician shall only provide or recommend services that are medically necessary or deemed to be beneficial for an individual patient
6. **Competence:** A naturopathic physician shall maintain proficiency and competence, and be diligent in the provision and administration of patient care.
- a. A naturopathic physician shall recognize and exercise professional judgment within the limits of his or her qualifications, and collaborate with others, seek counsel, or make referrals as appropriate.
 - b. When expanding the naturopathic treatments or services provided to patients, a naturopathic physician shall pursue the appropriate advanced education and training.
 - c. A naturopathic physician shall dedicate sufficient time to each patient in order to provide (to the best of the naturopathic physician's ability) accurate, comprehensive, and individualized patient assessment and treatment.
7. **Discrimination:** A naturopathic physician is free to decide whether or not to provide naturopathic medical care to a particular person, unless confronted with a medical emergency; provided that the naturopathic physician shall not refuse his or her best care if other reasonable options are not available.
- a. A naturopathic physician shall not decline to provide care for a person or discriminate against others on the basis of race, ethnicity, creed, religion, disability, gender, age, sexual orientation, or national origin.
 - b. Once the naturopathic physician-patient relationship has begun, the naturopathic physician shall provide care until care is complete, the patient ends the relationship, or the naturopathic physician has discharged the patient from care.
 - c. If a naturopathic physician justifiably desires to end the naturopathic physician-patient relationship, and if continued medical care is appropriate, the naturopathic physician shall document a formal referral to an appropriate health care provider.
8. **Communication:** A naturopathic physician has a duty to not only communicate effectively with a patient, but also to educate the patient and convey relevant information in terms the patient can understand, providing adequate opportunity for the patient to ask questions and discuss matters related to the patient's care.
- a. A naturopathic physician shall transfer a patient's records to another health care provider at the request of the patient, in accordance with appropriate and applicable legal guidelines, in a reasonable and timely fashion, and at reasonable cost.
 - b. A naturopathic physician shall maintain confidentiality of all patient records unless otherwise instructed by the patient or required by law.
 - c. A naturopathic physician shall treat the patient as a respected partner in their health and illness process, and treat with respect communication of the patient's concerns, symptoms, perspectives and medical history as a highly valued resource in determining the individual underlying cause(s) of the patient's illness or ill health.
9. **Conflicts of interest:** If a naturopathic physician is faced with a conflict of interest, the conflict shall be resolved in the best interest of the patient.
- a. If a naturopathic physician has any financial interests that may conflict with appropriate medical care, the naturopathic physician shall disclose those interests to the patient.
 - b. A naturopathic physician who makes written or oral public statements concerning specific products sold by a company from which the naturopathic physician receives compensation, or in which the naturopathic physician holds an ownership interest, shall disclose this financial relationship in those public statements.

10. **Improper conduct:** A naturopathic physician shall not prescribe, provide, or seek compensation for medical services that are not specifically indicated for an individual patient.
11. **Influence:** A naturopathic physician shall not exert influence over a patient to undertake any action that is contrary to the patient's best interest.
12. **Accepting gifts:** A naturopathic physician shall not accept gifts from any individual or entity that are deemed to influence the naturopathic physician's professional clinical judgment.

The failure to comply with any of the provisions of this section shall subject a member to reprimand or revocation of membership in the American Association of Naturopathic Physicians.

Naturopathic Medicine Examining Board
Rule Projects (updated 02/06/2024)

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause	Synopsis	Current Stage	Next Step
23-074	001-23	07/03/2025	Nat Med 1 to 10	Naturopathic Doctors	The objective of the proposed rules is to implement the statutory changes from 2021 Wisconsin Act 130 to allow for the licensure, discipline, and practice of Naturopathic Doctors.	Public Hearing and review of Clearinghouse report.	Submission of final rule draft to Governor's office and Legislature.
EmR 2402	071-23	03/25/2026	Nat Med 1 to 10	Licensure requirements for naturopathic doctors and limited-scope naturopathic doctors	The board's primary objective is to promulgate an emergency rule that establishes licensure requirements for naturopathic doctors and limited-scope naturopathic doctors in order to allow professionals currently practicing to be licensed by March of 2024 and avoid issues with continuity of care with their current patients.	Public Hearing	First extension request due on May 10, 2024.