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**Tony Evers, Governor**  
**Dawn B. Crim, Secretary**

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Sent via Electronic Mail to: [christine.poleski@wisconsin.gov](mailto:christine.poleski@wisconsin.gov)

October 6, 2020

Peter J. Kallio, Chair  
C/O Christine Poleski  
Department of Safety and Professional Services  
4822 Madison Yards Way  
Madison, WI 53705

Dear Chair Kallio,

Thank you for your request that credentialing staff attend and present at the Board of Nursing Meeting.

It is my understanding that during the September 10, 2020 meeting, the board was advised by Division of Policy Development (DPD) staff that the 2021 Licensed Practical Nurse (LPN) nursing workforce survey was not yet available to review and as a result the Division of Professional Credentialing Processing (DPCP) was unable to demonstrate the renewal processes associated with the 2021 LPN renewal.

As of the date of this letter the survey remains under development. I have been advised that the Department of Workforce Development (DWD) anticipates finalizing the survey question at the end of October 2020. After the survey questions are finalized DWD will then engage with the vendor to build the electronic survey for utilization in the renewal process.

While the Registered Nurse (RN) renewal was conducted in accordance with all laws and rules governing the renewal process, the Board of Nursing's preference for direct integration of the survey into the DSPS renewal process has been noted. DWD anticipates working to include an integrated survey as a part of the LPN Renewal. It is also worth noting that despite the RN survey not being integrated, as a result of the extensive outreach by DPCP staff the number of RNs who completed the 2020 RN renewal nursing workforce survey was at an all-time high.

I will work with your executive director to update you as new information regarding the 2021 LPN renewal becomes available.

Sincerely,

*Krystal Oby*  
Krystal Oby

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# State of Wisconsin

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**Governor Tony Evers**

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**Secretary-designee Andrea Palm**

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## **Emergency Order #2**

### **Order to Aid our Healthcare Facilities to Provide Treatment to Wisconsinites Impacted by COVID-19**

SARS-CoV-2 is a deadly respiratory virus. The immediate and long-term health impacts are still being identified by victims and medical experts. COVID-19, the disease that is caused by SARS-CoV-2, is widespread in Wisconsin.

Make no mistake – COVID-19 is not the flu. During the 2019-2020 flu season, there were 36,175 cases of influenza in Wisconsin, which led to 4,425 flu-related hospitalizations, and 183 deaths. Approximately 0.1% of people infected with seasonal influenza die. COVID-19, the disease that is caused by SARS-CoV-2, has been far more prolific and deadly. Since the start of this pandemic less than 10 months ago, Wisconsin has seen 122,747 confirmed COVID-19 cases, 7,300 COVID-19 related hospitalizations, and 683 COVID-19 related deaths. The fall and winter months – which bring more severe respiratory illnesses – are expected to cause a rise in COVID-19 cases and deaths.

As we head into these colder months, hospital capacity in this state is already increasingly strained in certain areas. The State of Wisconsin is divided into seven healthcare emergency readiness coalition regions (HERC regions), which coordinate how public health, healthcare institutions, and first responder agencies respond to health emergencies and catastrophic events. Today, every HERC region in the state has a high disease activity level.

The following data describes the current situation in three of the HERC regions of the state—all experiencing surges:

- North Central has tripled the number of patients with COVID-19 in the past two weeks with 94 total patients with COVID-19 currently hospitalized and 38 of those patients in the Intensive Care Unit; 4 of 17 hospitals reporting critical staffing shortages;
- North East has increased the number of patients with COVID-19 by 2.5 times with 113 total patients with COVID-19 currently hospitalized and 38 of those patients in the Intensive Care Unit; 3 of 10 hospitals reporting critical staffing shortages; and
- Fox Valley has doubled the number of patients with COVID-19 in the past two weeks with 112 total patients with COVID-19 currently hospitalized and 38 of those patients in the Intensive Care Unit; 3 of 13 hospitals reporting critical staffing shortages.

In the remaining four HERC regions, the number of patients with COVID-19 has also begun to rise in the past week and these regions are likewise experiencing critical staffing shortages—largely due to staff members experiencing infection or exposure to COVID-19.

Because of the increasing magnitude of the COVID-19 pandemic in Wisconsin, there may soon be too little space and too few healthcare professionals to treat everyone who needs medical care.

Healthcare capacity will increasingly be strained as long as the virus spreads. Even before COVID-19, more than half of Wisconsin counties had a shortage of physicians, and many other types of healthcare workers were in short supply. Now, as our efforts against the COVID-19 pandemic strains our healthcare systems, we must swiftly act to do all that we can to make sure those systems are able to provide medical aid. This means welcoming the help of as many skilled healthcare providers as possible and working to establish an agile workforce.

As such, I, Tony Evers, Governor of the State of Wisconsin, and I, Andrea Palm, Secretary-designee of the Department of Health Services, by the authority vested in us by the Constitution and laws of this State, including but not limited to Article I, Section I of the Wisconsin Constitution, Section 252.02(2) of the Wisconsin Statutes, and Section 15.001(2) of the Wisconsin Statutes, direct the following:

**I. Increasing our credentialed workforce**

1. Definitions

For purposes of this Order, the following definitions control:

“Healthcare provider” has the meaning given in Wis. Stat. § 146.81(1)(a) through (hp).

“Healthcare facility” refers to any system, care clinic, care provider, long-term care facility, alternative care facility, or any other healthcare facility where medical services are or may be provided.

“Interstate reciprocity temporary license” refers to temporary licensure issued under Section I-2.

“Emergency declaration” refers to the public health emergency declared pursuant to Section 319 of the Public Health Service Act, last declared July 23, 2020, and including any renewals.

2. Interstate Reciprocity

Any healthcare provider with a valid and current license or credential issued by another state may practice under that license and within the scope of that license in Wisconsin, including via telehealth/telemedicine technology, without first obtaining a

license or credential from the Department of Safety and Professional Services (DSPS), so long as the following conditions are met:

1. The practice is necessary for an identified healthcare facility to ensure the continued and safe delivery of healthcare services;
2. The healthcare provider is not currently under investigation and does not currently have any restrictions or limitations placed on their license by their credentialing state or any other jurisdiction;
3. The healthcare facility's needs reasonably prevented in-state credentialing in advance of practice;
4. Except as provided in Section I-5, the healthcare provider must apply for an interstate reciprocity temporary license, or another form of temporary or permanent license provided for by Wisconsin law, within 30 days of first working at a healthcare facility in reliance on this Section;
5. The healthcare facility must notify DSPS at [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov) within 10 days of a healthcare provider practicing at its facility, including via telehealth/telemedicine technology, in reliance on this Section.

For a healthcare provider who possessed a temporary interstate license under Emergency Order 16, as modified in Emergency Order 20, or 2019 Wis. Act 185 and is seeking reinstatement, the provider may attest that the information contained in the original application is the same. The healthcare provider need not submit a new application form.

DSPS shall make the application form, notification form, and reinstatement attestation form readily available as soon as practicably possible on its website: <https://dsps.wi.gov/pages/Home.aspx>.

DSPS may withdraw an individual's authority to practice pursuant to this Section for good cause as determined by DSPS.

The Office of the Commissioner of Insurance (OCI) is directed to work with healthcare providers practicing under this provision to ensure they have the proper liability insurance coverage.

### 3. Expiring Credentials

A temporary interstate license provided under Section I-2, or any otherwise valid healthcare provider license that expires during the emergency declaration, shall remain valid for 30 days after the conclusion of the emergency declaration.

### 4. Reinstatement of Recently Lapsed Credentials

Any healthcare provider with a license that has recently lapsed (meaning within 5 years of expiration) who applies to DSPS for reinstatement shall not be required to pay any late renewal fees, and shall not be required to fulfill lapsed continuing education requirements.

## 5. Telemedicine

Except for as provided in Section I-2, a physician providing telemedicine in the diagnosis and treatment of a patient located in this state must have a valid and current license issued by this State, another state, or Canada. Where a requirement in Wis. Admin. Med. Ch. 24 applies to physicians licensed to practice by the medical examining board, such requirements extend to any physician practicing telemedicine in this state.

A physician practicing under this section must not currently be under investigation and must not currently have any restrictions or limitations placed on their license by their credentialing state or any other jurisdiction.

Insured patients are encouraged to continue to work with their insurance providers to ensure they are selecting providers in-network, if applicable and where possible.

An out-of-state physician who provides telemedicine in the diagnosis and treatment of a patient in Wisconsin pursuant to this Section who does not hold a valid interstate reciprocity temporary license as provided for in Section I-2, or another form of temporary or permanent license provided for by Wisconsin law, must provide notice that they have provided healthcare to a Wisconsin resident within 10-days to DSPS at [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov). Such notice must include verification of credentials. Notice need only be provided once.

DSPS shall make the notification form readily available as soon as practicably possible on its website: <https://dsps.wi.gov/pages/Home.aspx>

OCI is directed to continue working with malpractice insurance carriers to facilitate coverage outside of the traditional healthcare facility settings and to continue working with health insurers to minimize out-of-network barriers for insured patients seeking telemedicine services.

## **II. Maximizing existing workforce resources**

Practice and training flexibility for certain healthcare professions that were implemented previously have been identified by our healthcare partners as tools to help maximize available workforce resources during times of high volume COVID-19 care. As such, Sections IV and V of Emergency Order #16 issued March 27, 2020 are incorporated here by reference.

## **III. Other Provisions**

Nothing in this Order should be construed to facilitate the practice by a credential-holder who has unmet disciplinary requirements, or whose credential has been suspended, revoked, or rescinded. Nothing in this Order should be construed to prevent civil or criminal action against a person or entity who falsely reports required information to DSPS or who otherwise violates the terms of this Order.

If any provision of this Order or its application to any person or circumstance is held to be invalid, then the remainder of the Order, including the application of such part or provision to other persons or circumstances, shall not be affected and shall continue in full force and effect. To this end, the provisions of this Order are severable.

This Order is effective immediately and shall remain in effect for the duration of the federal public health emergency declared July 23, 2020 pursuant to Section 319 of the Public Health Service Act, including any renewals, or until a superseding order is issued by either the Governor or the Secretary of the Department of Health Services.



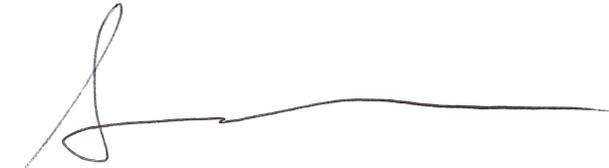
10/1/2020

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Tony Evers  
Governor  
State of Wisconsin

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Date



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Andrea Palm  
Secretary-designee  
State of Wisconsin Department of Health Services

10/01/2020

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Date