

**STATE OF WISCONSIN  
NATUROPATHIC MEDICINE EXAMINING BOARD**

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**IN THE MATTER OF RULEMAKING :  
PROCEEDINGS BEFORE THE : REPORT TO THE LEGISLATURE  
NATUROPATHIC MEDICINE : CR 23 - 074  
EXAMINING BOARD :  
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**I. THE PROPOSED RULE:**

The proposed rule, including the analysis and text, is attached.

**II. REFERENCE TO APPLICABLE FORMS: N/A**

**III. FISCAL ESTIMATE AND EIA:**

The Fiscal Estimate and EIA is attached.

**IV. DETAILED STATEMENT EXPLAINING THE BASIS AND PURPOSE OF THE PROPOSED RULE, INCLUDING HOW THE PROPOSED RULE ADVANCES RELEVANT STATUTORY GOALS OR PURPOSES:**

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.

**V. SUMMARY OF PUBLIC COMMENTS AND THE BOARD’S RESPONSES, EXPLANATION OF MODIFICATIONS TO PROPOSED RULES PROMPTED BY PUBLIC COMMENTS:**

The Naturopathic Medicine Examining Board held a public hearing on February 16, 2024. The following statement was submitted by Dr. Timothy Birdsall:

“In the statute, 466.04 (1) (e) states:

b. For graduates of approved naturopathic medical programs prior to the existence of the Council on Naturopathic Medical Education, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.

In the proposed regs, Nat Med 3.04 (1) (a) states:

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.

It is accurate that CNME (the US Department of Education recognized accrediting agency for naturopathic medical schools) was formed in 1978, but to the best of my knowledge, the first NPLEX exam was not administered until 1987. I believe it is possible that the statute and regulations unintentionally confuse the formation date of the CNME, the naturopathic accrediting agency, (1978) with the date of first availability of the NPLEX national licensing examination (1987). Leaving the 1978 date in place in the regulations would effectively disenfranchise graduates of all approved naturopathic medical programs graduating between 1978 and 1987, since the NPLEX exam was not in existence during that time, and the only examinations available were competency-based state naturopathic medicine licensing examinations.

Therefore, my recommendation would be to correct this in the regs as follows:

Nat Med 3.04 (1) (a) (2):

“For graduates of approved naturopathic medical programs prior to ~~1978~~ 1987, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.”

The Naturopathic Medicine Examining Board made the following changes prompted by public comments:

- The Board added a provision in s. Nat Med 3.04 (1) (a) 2. that reads: “For graduates of approved naturopathic medical programs prior to the first administration of the NPLEX, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.”
- The Board amended the Council on Naturopathic Medical Education provision in s. Nat Med 3.04 (1) 3. to read: “For graduates of approved naturopathic medical programs prior to the creation of the Council on Naturopathic Medical Education, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.”

## **VI. RESPONSE TO LEGISLATIVE COUNCIL STAFF RECOMMENDATIONS:**

**Comment:** 2.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.]

**Response:** The Board rejects this comment. While the reference to the manual is accurate, the content of the referenced section is outdated due to the changes to s. 227.21 (2) (b), Stats., made by 2021 Wisconsin Act 246, which states: "...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), Stats., that the standards are on file at the ~~offices of the agency and the~~ legislative reference bureau.

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."

**Comment:** 5.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".

**Response:** The Board rejects this comment. It is the intention of the Board that the naturopathic doctor be required to inform the patient of reasonable alternate modes of treatment outside of the scope of naturopathic medicine.

**Comment:** 5.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).

**Response:** The Board accepts the first part of this comment and has revised s. Nat Med 2.01 (1) accordingly. The Board rejects the second part of the comment to maintain consistency. Other health related boards contain the same provision without further explanation.

**Comment:** 5.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".

**Response:** The Board rejects the first part of this comment. It is the intention of the Board to be general in this provision to cover not only the patient but also any potential guardian or other legally responsible person authorized to make decisions on behalf of the patient. The Board accepts the second part of this comment and has revised s. Nat Med 2.01 (3) accordingly.

**Comment:** 5.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.

**Response:** The Board rejects this comment. The provision was drafted intentionally broadly to allow a patient to withdraw consent in any manner that would be obvious to a reasonable practitioner. 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.

**Comment:** 5.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.

**Response:** The Board rejects this comment. It is not within this rule project's scope statement to interpret or explain the statutes relating to pending charges and conviction record.

**Comment:** 5.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.

**Response:** The Board rejects this comment to maintain consistency. The term "specified" is used consistently in administrative rules promulgated by other boards for the same provision.

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

**Response:** The Board rejects this comment. 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.

**Comment:** 5.k. In s. Nat Med 3.02 (6), consider specifying that the applicant must submit "evidence of" completion of a required oral examination.

**Response:** The Board rejects this comment. 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.

**Comment:** 5.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.

**Response:** The Board rejects this comment to maintain consistency. Other health related boards contain the same provisions for unprofessional conduct without specifying the relevant actors.

**Comment:** 5.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.

**Response:** The Board rejects this comment. By qualifying for the exemption under s. 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 those applicants have met the continuing education requirements under Nat Med 4.02.

**Comment:** 5.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.

**Response:** The Board rejects the first part of this comment. 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. The Board accepts the second part of the comment and has revised s. Nat Med 4.02 (1) accordingly.

**Comment:** 5.v. In s. Nat Med 4.04 (2), consider specifying how a license is restored.

**Response:** The Board rejects this comment to maintain consistency. Other health related boards contain the same provision without further explanation.

**Comment:** 5.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.

**Response:** The Board rejects this comment to maintain consistency. Other health related boards contain the same provision including the duplicate use of “aiding or abetting.”

**Comment:** 5.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.

**Response:** The Board rejects this comment to maintain consistency. The term “specified” is used consistently in administrative rules promulgated by other boards for the same provision.

**Comment:** 5.cc. In s. Nat Med 6.03 (1), consider specifying what evidence is satisfactory to the board.

**Response:** The Board rejects this comment. 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.

**Comment:** 5.dd. In s. Nat Med 6.03 (1) (i), consider specifying that the applicant must submit “evidence of” completion of a required oral examination.

**Response:** The Board rejects this comment. 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.

All of the remaining recommendations suggested in the Clearinghouse Report have been accepted in whole.

**VII. REPORT FROM THE SBRRB AND FINAL REGULATORY FLEXIBILITY ANALYSIS:**

N/A

STATE OF WISCONSIN  
NATUROPATHIC MEDICINE EXAMINING BOARD

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IN THE MATTER OF RULEMAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	NATUROPATHIC MEDICINE
NATUROPATHIC MEDICINE	:	EXAMINING BOARD
EXAMINING BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE 23-074)

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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.

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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., and approval has been granted.

**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](mailto: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](mailto:DSPSAdminRules@wisconsin.gov).

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TEXT OF RULE

SECTION 1. Chapters 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) “Emergency” means a circumstance in which there is an immediate risk to a patient's life, body part or function which demands prompt action.
- (4) “Jurisprudence examination” means the board approved examination on the state law related to the practice of naturopathic medicine.
- (5) “Licensee” means a person licensed to practice as a naturopathic doctor or limited-scope naturopathic doctor in this state.
- (6) “Limited-scope naturopathic doctor” means a person licensed under s. 466.04 (2), Stats.
- (7) “Modes of treatment” means treatment, including diagnostic procedures, generally considered to be within the scope of current and acceptable standards of care.
- (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 treatment. 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, information about alternate modes of treatment, if failure to provide immediate treatment would be more harmful to a patient than immediate treatment.
  - (g) 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, a naturopathic doctor may not threaten or carry out 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 licensee, and be sufficiently legible to allow interpretation by others 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 type of license held, and any applicable limitations or expansions of the licensee's scope of practice.

### **Nat Med 3**

#### **Licensure requirements and renewal**

**Nat Med 3.01 License not required.** Pursuant to 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:

**(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 the first administration of the NPLEX, a competency-based state naturopathic medicine licensing examination or equivalent Canadian provincial licensing examination for the practice of naturopathic medicine approved by the board.

**3.** For graduates of approved naturopathic medical programs prior to the creation of the Council on Naturopathic Medical Education, 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 examination.

**(c)** Except as specified in par. (d), a jurisprudence examination 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 December 31, 2024.

**(2) FAILURE AND REEXAMINATION.** If an applicant has failed any of the examinations 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 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 passing grade for an oral examination under this section 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) 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 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 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 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 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 ss. 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 provided under sub. (2) or 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 licensee is 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 through the Federation of Naturopathic Medicine Regulatory Authority.

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

(3) American Association of Naturopathic Physicians.

(4) National Association of Boards of Pharmacy.

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

#### **Nat Med 4.04 Evidence of compliance.**

(1) Except as provided in ss. Nat Med 4.02 (2) and (3), 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 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, 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

### Limited-scope naturopathic doctors

**Nat Med 6.01 Scope of practice.** (1) Except as otherwise conflicts with any other rule or statute or 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 to s. 466.05 (2) (a) 2., Stats.

**Nat Med 6.02 License not required.** Pursuant to 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:

(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), a jurisprudence examination 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 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) 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 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 a limited-scope naturopathic doctor with the additional provision that a limited-scope naturopathic doctor shall also disclose their license type and authorized scope of practice.

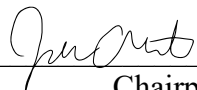
**Nat Med 6.08 Recordkeeping.** All provisions established under s. Nat Med 2.02 also apply to the practice of a limited-scope naturopathic doctor.

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.

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(END OF TEXT OF RULE)  
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This Proposed Order of the Naturopathic Medicine Examining Board is approved for submission to the Governor and Legislature.

Dated 02/23/24

Agency   
Chairperson  
Naturopathic Medicine Examining Board

## ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date December 14, 2023
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Nat Med 1 to 10 (Permanent Rule)	
4. Subject Naturopathic doctors	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected s.20.165(1)(hg)
7. Fiscal Effect of Implementing the Rule <input type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input checked="" type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input checked="" type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses <b>(if checked, complete Attachment A)</b>	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$N/A	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule The objective of the proposed rules is to implement the statutory changes from 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.	
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The rule will be posted on the Department's website for 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals.	
13. Identify the Local Governmental Units that Participated in the Development of this EIA. None	
14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred) DSPS estimates a total of \$15,600 in one-time costs for staffing and an indeterminate one-time IT impact to implement the rule. The estimated need for 0.3 limited term employees (LTE) is attributed to the rule promulgation aspect required to implement the rule, including examination standards, continuing education, and renewal requirements, and the establishment of practice standards and ethical guidelines, as well as staff training and web and forms updates. The one-time estimated costs cannot be absorbed in the currently appropriated agency budget.	
15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The benefits of implementing this rule are the creation of the Naturopathic Medicine Examining Board chapters of the Administrative Code that aligns with the Wisconsin State Statutes. If these new rules are not implemented, the Naturopathic Medicine Examining Board will not be in compliance with the Statutes, which will create confusion and may adversely affect the ability of Naturopathic Doctors to fully practice in Wisconsin.	



## ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

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16. Long Range Implications of Implementing the Rule

The long range implications of implemennting this rule is clear requirements for the licensure of naturopathic doctors and limited-scope naturopathic doctors in Wisconsin.

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17. Compare With Approaches Being Used by Federal Government

N/A

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

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]

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19. Contact Name

Sofia Anderson

20. Contact Phone Number

(608) 261-4463

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This document can be made available in alternate formats to individuals with disabilities upon request.

**ADMINISTRATIVE RULES**  
**Fiscal Estimate & Economic Impact Analysis**

**ATTACHMENT A**

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

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

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

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

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

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5. Describe the Rule's Enforcement Provisions

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

- Yes    No
-