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**VIRTUAL/TELECONFERENCE  
MEDICAL EXAMINING BOARD**  
**Virtual, 4822 Madison Yards Way, Madison**  
**Contact: Valerie Payne (608) 266-2112**  
**January 20, 2021**

*The following agenda describes the issues that the Board plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. Please consult the meeting minutes for a record of the actions of the Board.*

**AGENDA**

**8:00 A.M.**

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

**A. Adoption of Agenda (1-5)**

**B. Approval of Minutes of December 16, 2020 (6-13)**

**C. Introductions, Announcements and Recognition**

- 1) Recognition of Darold Treffert, Former Board Member and Chairperson

**D. Reminders: Conflicts of Interest, Scheduling Concerns**

**E. Administrative Matters – Discussion and Consideration**

- 1) Board, Department and Staff Updates
- 2) Election of Officers, Appointment of Liaisons and Alternates, Delegation of Authorities  
**(14-23)**
- 3) Annual Policy Review **(24)**
- 4) Board Members – Term Expiration Dates
  - a. Milton Bond, Jr. – 7/1/2023
  - b. David A. Bryce – 7/1/2021
  - c. Clarence Chou – 7/1/2023
  - d. Padmaja Doniparthi – 7/1/2021
  - e. Diane Gerlach – 7/1/2024
  - f. Sumeet Goel – 7/1/2023
  - g. Michael Parish – 7/1/2023
  - h. David Roelke – 7/1/2021
  - i. Rachel Sattler – 7/1/2024
  - j. Sheldon Wasserman – 7/1/2023
  - k. Lemuel Yerby – 7/1/2024
  - l. Emily Yu – 7/1/2024
- 5) Appointments, Reappointments, Confirmations, and Committee, Panel and Liaison Appointments
- 6) Assignment of Screening Panel and Examination Panel Liaisons

- 7) Wis. Stat. § 15.085 (3)(b) – Affiliated Credentialing Boards’ Biannual Meeting with the Medical Examining Board to Consider Matters of Joint Interest
- F. Legislative and Policy Matters – Discussion and Consideration
- G. Administrative Rule Matters – Discussion and Consideration (25)**
- 1) Review of Preliminary Draft Rules of the Occupational Therapists Affiliated Credentialing Board **(26-36)**
  - 2) Proposals for Med 13, Relating to Continuing Medical Education Requirements
  - 3) Preliminary Rule Draft – Med 10, Relating to Unprofessional Conduct **(37-39)**
  - 4) Scope Statement – Med 1, Relating to Licenses to Practice Medicine and Surgery **(40-41)**
  - 5) Pending or Possible Rulemaking Projects
- H. CE Broker – Discussion and Consideration**
- I. Budgeting and Maintaining Licensure Fees – Discussion and Consideration**
- J. COVID-19 – Discussion and Consideration**
- K. Federation of State Medical Boards (FSMB) Matters – Discussion and Consideration**
- 1) FSMB Seeks Comment: Interim Report of the FSMB Workgroup on Emergency Preparedness and Response **(42)**
- L. Controlled Substances Board Report
- M. Interstate Medical Licensure Compact Commission (IMLCC) – Report from Wisconsin’s Commissioners – Discussion and Consideration**
- N. Newsletter Matters – Discussion and Consideration**
- O. MED-PA Collaboration Committee Report**
- P. Screening Panel Report**
- Q. Future Agenda Items
- R. Discussion and Consideration of Items Added After Preparation of Agenda:
- 1) Introductions, Announcements and Recognition
  - 2) Elections, Appointments, Reappointments, Confirmations, and Committee, Panel and Liaison Appointments
  - 3) Administrative Matters
  - 4) Election of Officers
  - 5) Appointment of Liaisons and Alternates
  - 6) Delegation of Authorities
  - 7) Education and Examination Matters
  - 8) Credentialing Matters
  - 9) Practice Matters
  - 10) Legislative and Policy Matters
  - 11) Administrative Rule Matters
  - 12) Liaison Reports
  - 13) Board Liaison Training and Appointment of Mentors
  - 14) Informational Items
  - 15) Division of Legal Services and Compliance (DLSC) Matters

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

S. Public Comments

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

T. Credentialing Matters

- 1) **Full Board Oral Examination**
  - a. APPEARANCE – Pamela Vincent **(43-90)**
- 2) **Waiver of Post-Graduate Training**
  - a. Elie Khalifee **(91-136)**

U. Deliberation on DLSC Matters

- 1) **Review of Administrative Warning**
  - a. 9:30 A.M. APPEARANCE – 20 MED 221 – N.A.V. **(137-143)**
- 2) **Proposed Stipulations, Final Decisions and Orders**
  - a. 18 MED 312 – Aaron C. Weaver, R.C.P. **(144-149)**
  - b. 19 MED 090 – Michael J. Bohn, M.D. **(150-155)**
  - c. 19 MED 171 – Vinson M. Di Santo, D.O. **(156-164)**
  - d. 19 MED 545 – Dana J. Akiya, M.D. **(165-171)**
  - e. 20 MED 181 – Nosheen Hasan, M.D. **(172-217)**
  - f. 20 MED 203 – Bradley D. Kruger, P.A. **(218-224)**
  - g. 20 MED 394 – Steven Richardson, P.A. **(225-230)**
- 3) **Complaints**
  - a. 18 MED 376 – K.P.P. **(231-235)**
- 4) **Administrative Warnings**
  - a. 20 MED 434 – D.I.L. **(236-237)**
- 5) **Case Closings**
  - a. 19 MED 190 – D.A.W. **(238-243)**
  - b. 19 MED 216 – L.S.K. **(244-247)**
  - c. 19 MED 273 – A.W. **(248-262)**
  - d. 20 MED 334 – V.C. **(263-271)**

- e. 20 MED 351 – K.M.F. **(272-283)**
- f. 20 MED 358 – N.T. **(284-292)**
- g. 20 MED 359 – G.P.F. **(293-296)**
- h. 20 MED 392 – T.G.S. **(297-300)**

V. Deliberation of Items Added After Preparation of the Agenda

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

W. Open Cases

X. Consulting with Legal Counsel

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

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

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

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

**ADJOURNMENT**

**ORAL EXAMINATION OF CANDIDATES FOR LICENSURE**

**VIRTUAL/TELECONFERENCE**

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

**CLOSED SESSION** – Reviewing Applications and Conducting Oral Examination of **two (2)** (at time of agenda publication) Candidates for Licensure – **Dr. Gerlach** and **Dr. Chou**

**NEXT DATE: FEBRUARY 17, 2021**

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MEETINGS AND HEARINGS ARE OPEN TO THE PUBLIC, AND MAY BE CANCELLED WITHOUT  
NOTICE.

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held at 4822 Madison Yards Way, Madison, Wisconsin, unless otherwise noted. In order to confirm a meeting or to request a complete copy of the board's agenda, please call the listed contact person. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreters for the deaf or hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer, 608-266-2112, or the Meeting Staff at 608-266-5439.

**VIRTUAL/TELECONFERENCE  
MEDICAL EXAMINING BOARD  
MEETING MINUTES  
DECEMBER 16, 2020**

**PRESENT:** Milton Bond, Jr. (*excused at 9:20 a.m.*), David Bryce, M.D; Clarence Chou, M.D.; Padmaja Doniparthi, M.D.; Diane Gerlach, D.O.; Sumeet Goel, D.O.; Michael Parish, M.D.; David Roelke, M.D.; Rachel Sattler; Sheldon Wasserman, M.D.; Lemuel Yerby, M.D.; Emily Yu, M.D.

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

**CALL TO ORDER**

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

**ADOPTION OF AGENDA**

**Amendment to the Agenda**

- Under item “Z. Consulting with Legal Counsel” **REMOVE** “2. CME Violation Procedures”
- Under item “Z. Consulting with Legal Counsel” **REMOVE** “3. Return to Practice After Out of State Service”

**MOTION:** Diane Gerlach moved, seconded by Padmaja Doniparthi, to adopt the Agenda as amended. Motion carried unanimously.

**APPROVAL OF MINUTES OF NOVEMBER 18, 2020**

**MOTION:** David Roelke moved, seconded by Sumeet Goel, to approve the Minutes of November 18, 2020 as published. Motion carried unanimously.

*(Rachel Sattler arrived at 8:08 a.m.)*

**PUBLIC HEARING: CR 20-053 – MED 13, RELATING TO CONTINUING MEDICAL EDUCATION FOR PHYSICIANS**

**Review and Respond to Public Hearing Comments**

**MOTION:** Michael Parish moved, seconded by Clarence Chou, to authorize the Chairperson to approve the Legislative Report and Draft for Clearinghouse Rule CR 20-053, relating to continuing medical education for physicians, for submission to the Governor’s Office and Legislature. Motion carried unanimously.

**PUBLIC HEARING: SCOPE STATEMENT SS 146-20 – MED 13, RELATING TO CONTINUING MEDICAL EDUCATION REQUIREMENTS**

**Review and Respond to Public Hearing Comments**

**MOTION:** David Bryce moved, seconded by Diane Gerlach, to affirm the Board has reviewed the public comments received concerning Scope Statement SS 146-20, relating to continuing medical education requirements. Additionally, after considering the public comments received the Board approves SS 146-20 for implementation after consideration of all public comments and feedback. Motion carried unanimously.

**ADMINISTRATIVE RULE MATTERS**

**Review of Preliminary Draft Rules of the Podiatry Affiliated Credentialing Board**

**MOTION:** David Roelke moved, seconded by Milton Bond, Jr., to reflect the Board's support of the proposed rules revising Wisconsin Administrative Code Chapter Pod 1, relating to reciprocal credentials for service members, former service members, and their spouses, and has no comments for the Podiatry Affiliated Credentialing Board to consider. Motion carried unanimously.

**Pending or Possible Rulemaking Projects**

***Standard of Care – Performance of Physical Examinations***

**MOTION:** Diane Gerlach moved, seconded by Milton Bond, Jr., to request DSPS staff draft a Scope Statement relating to the standard of care and conduct for physical examinations, and to authorize the Chairperson to approve the Scope Statement for submission to the Department of Administration and Governor's Office and for publication. Additionally, the Board authorizes the Chairperson to approve the Scope Statement for implementation no less than 10 days after publication. If the Board is directed to hold a preliminary public hearing on the Scope Statement, the Chairperson is authorized to approve the required notice of hearing. Motion carried unanimously.

*(Milton Bond, Jr. was excused at 9:20 a.m.)*

## **CREATION OF PA COMMITTEE**

**MOTION:** Clarence Chou moved, seconded by David Bryce, to create as an ad hoc committee the MED-PA Collaboration Committee, consisting of Sumeet Goel, Lemuel Yerby, and David Bryce of the Medical Examining Board, Jennifer Jarrett of the Council on Physician Assistants, and Eric Elliot and Reid Bowers of the Wisconsin Academy of Physician Assistants. The committee is charged with reviewing current statutes, rules, and practices related to the practice of physician assistants and provide recommendations to the Medical Examining Board related to same, with a particular focus on improving healthcare access in rural areas. Motion carried unanimously.

## **COVID-19**

**MOTION:** Diane Gerlach moved, seconded by Emily Yu, to document the Wisconsin Medical Examining Board's support of the CDC guidelines related to reducing the spread of COVID-19. In addition, the Board, and each member voting in support of this motion, approves the use of his or her name on a communication to this effect to be drafted, published and disseminated by DSPS staff in conjunction with the Board Chairperson. Motion carried unanimously.

## **INTERSTATE MEDICAL LICENSURE COMPACT COMMISSION – REPORT FROM WISCONSIN'S COMMISSIONERS**

### **Compact Application Process & Licensee Options**

**MOTION:** Clarence Chou moved, seconded by David Roelke, to acknowledge and thank Melinda Boyle-Prior for her appearance and presentation before the Board. Motion carried unanimously.

## **NEWSLETTER MATTERS**

**MOTION:** David Roelke moved, seconded by David Bryce, to delegate authority to the board chairperson to review and approve the final newsletter for publication and dissemination. Motion carried unanimously.



## CLOSED SESSION

**MOTION:** Diane Gerlach moved, seconded by Rachel Sattler, to convene to Closed Session to deliberate on cases following hearing (§ 19.85(1)(a), Stats.); to consider licensure or certification of individuals (§ 19.85(1)(b), Stats.); to consider closing disciplinary investigations with administrative warnings (§ 19.85(1)(b), Stats. and § 448.02(8), Stats.); to consider individual histories or disciplinary data (§ 19.85(1)(f), Stats.); and to confer with legal counsel (§ 19.85(1)(g), Stats.). Sheldon Wasserman, Chairperson, read the language of the motion aloud for the record. The vote of each member was ascertained by voice vote. Roll Call Vote: David Bryce-yes; Clarence Chou-yes; Padmaja Doniparthi-yes; Diane Gerlach-yes; Sumeet Goel-yes; Michael Parish-yes; David Roelke-yes; Rachel Sattler-yes; Sheldon Wasserman-yes; Lemuel Yerby-yes; and Emily Yu-yes. Motion carried unanimously.

The Board convened into Closed Session at 10:22 a.m.

## CREDENTIALING MATTERS

### Full Board Oral Examination

#### *Michael Perez Rodriguez*

**MOTION:** David Roelke moved, seconded by Rachel Sattler, to find that based on the Board's review and consideration of the application of Michael Perez Rodriguez and all materials and evidence presented in support thereof, Applicant has provided satisfactory evidence of documented education and training that is substantially equivalent to the 24 months of postgraduate training required for licensure, and to grant Applicant a waiver of postgraduate training requirements pursuant to Wis. Admin. Code. § Med 1.02(3)(c). Motion carried.

**MOTION:** David Roelke moved, seconded by Diane Gerlach, to grant a limited license to practice medicine and surgery to Michael Perez Rodriguez pursuant to Wis. Stat. § 448.06(1m). Applicant's practice will be limited to Aspirus Inc. Department staff will work with the Board's credentialing liaison to review and approve the limited license. Motion carried.

### Application Review

#### *Navkiran Dhillon*

**MOTION:** Rachel Sattler moved, seconded by David Bryce, to order Applicant to appear for oral examination before two members of the board, pursuant to Wis. Stat. s. 448.05(6) and Wis. Admin. Code s. Med 1.06 and to table action on this application pending the results of the oral examination. Motion carried.

*Pamela Vincent*

**MOTION:** David Roelke moved, seconded by Michael Parish, to order Applicant to appear before the board for oral examination at a regularly scheduled meeting, pursuant to Wis. Stat. s. 448.05(6) and Wis. Admin. Code s. Med 1.06 and to table action on this application pending the results of the oral examination. Motion carried unanimously.

*Cully White*

**MOTION:** Lemuel Yerby moved, seconded by David Roelke, to deny Cully R. White's application for reinstatement of licensure to practice medicine and surgery based on considerations of public health and safety. Basis for denial: after full review and consideration of the application of Cully White and all materials and evidence presented in support thereof, the Board finds that Applicant has not provided adequate evidence that he is currently competent to practice medicine and surgery with reasonable skill and safety; has not demonstrated adequate education, training or performance in past practice; and has engaged in unprofessional conduct. Legal Citation: Wis. Stat. § 448.06(2) and Wisconsin Medical Examining Board Final Decision and Order (# 0002777) dated November 20, 2013, "In the matter of Disciplinary Proceedings against Cully R. White, D.O.". Motion carried.

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

**Complaints**

***19 MED 545 – D.J.A.***

**MOTION:** Lemuel Yerby moved, seconded by David Bryce, to delegate the review of disciplinary cases to the Department's Chief Legal Counsel due to lack of/loss of quorum. Motion carried unanimously.

*(Sheldon Wasserman, David Roelke, and Sumeet Goel recused themselves and left the room for deliberation and voting in the matter concerning 19 MED 545, DLSC Case Number D.J.A.)*

*(Emily Yu disconnected at 12:07 p.m.)*

*(Padmaja Doniparthi disconnected at 12:08 p.m.)*

## Stipulations, Final Decisions and Orders

### *18 MED 487 – Dennis J. Maiman, M.D.*

**MOTION:** David Roelke moved, seconded by Diane Gerlach, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Dennis J. Maiman, M.D., DLSC Case Number 18 MED 487. Motion carried.

### *18 MED 713 – Mohammad R. Khan, M.D.*

**MOTION:** Clarence Chou moved, seconded by Michael Parish, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Mohammad R. Khan, M.D., DLSC Case Number 18 MED 713. Motion carried unanimously.

### *20 MED 194 – John C. Wynsen, M.D.*

**MOTION:** David Roelke moved, seconded by Diane Gerlach, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against John C. Wynsen, M.D., DLSC Case Number 20 MED 194. Motion carried unanimously.

### *20 MED 209 – Laurie B. Scheidegger, R.C.P.*

**MOTION:** David Roelke moved, seconded by Michael Parish, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Laurie B. Scheidegger, R.C.P., DLSC Case Number 20 MED 209. Motion carried unanimously.

## Case Closings

**MOTION:** David Roelke moved, seconded by Sumeet Goel, to close the following DLSC Cases for the reasons outlined below:

1. 17 MED 517 – D.I.S. – Insufficient Evidence
2. 18 MED 101 – K.L. – Prosecutorial Discretion (P3)
3. 18 MED 487 – H.S. – Insufficient Evidence
4. 19 MED 254 – A.K.N. – Insufficient Evidence
5. 20 MED 158 – W.D.L. – Insufficient Evidence
6. 20 MED 342 – K.S. – No Violation

Motion carried unanimously.

**19 MED 545 – D.J.A.**

**MOTION:** Rachel Sattler moved, seconded by Diane Gerlach, to table the request close DLSC Case Number 19 MED 545, against D.J.A. indefinitely. Motion carried unanimously.

*(Sheldon Wasserman, David Roelke, and Sumeet Goel recused themselves and left the room for deliberation and voting in the matter concerning 19 MED 545, DLSC Case Number D.J.A.)*

**Monitoring Matters**

***Westscot G. Krieger, M.D. – Requesting Reinstatement of Full Licensure***

**MOTION:** Michael Parish moved, seconded by David Roelke, to grant the request of Westscot G. Krieger, M.D. for full licensure. Motion carried unanimously.

***Raymond Watts, M.D. – Requesting Full Licensure***

**MOTION:** Lemuel Yerby moved, seconded by David Roelke, to grant the request of Raymond Watts, M.D. for full licensure. Motion carried unanimously.

*(Rachel Sattler disconnected at 1:00 p.m.)*

**CONSULTING WITH LEGAL COUNSEL**

**20 MED 043 – Tatjana Stevanovic**

**MOTION:** Sumeet Goel moved, seconded by David Bryce, to reject the settlement proposal of Tatjana Stevanovic. Motion carried unanimously.

**RECONVENE TO OPEN SESSION**

**MOTION:** Clarence Chou moved, seconded by Sumeet Goel, to reconvene to Open Session. Motion carried unanimously.

The Board reconvened to Open Session at 1:11 p.m.

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

**MOTION:** Diane Gerlach moved, seconded by David Roelke, to affirm all motions made and votes taken in Closed Session. Motion carried unanimously.

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

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

**MOTION:** Michael Parish moved, seconded by Sumeet Goel, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.

**ADJOURNMENT**

**MOTION:** David Roelke moved, seconded by Sumeet Goel, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 1:13 p.m.

DRAFT

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

**AGENDA REQUEST FORM**

<b>1) Name and Title of Person Submitting the Request:</b>  Megan Glaeser, Bureau Assistant		<b>2) Date When Request Submitted:</b> 4 January 2021  Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
<b>3) Name of Board, Committee, Council, Sections:</b> Medical Examining Board			
<b>4) Meeting Date:</b>  20 January 2021	<b>5) Attachments:</b>  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Administrative Matters 1) Election of Officers, Appointment of Liaisons and Alternates, Delegation of Authorities	
<b>7) Place Item in:</b>  <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b>  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b>  N/A	
<b>10) Describe the issue and action that should be addressed:</b>  1) The Board should conduct Election Officers: Chairperson, Vice Chairperson & Secretary 2) The newly elected Chairperson should review and appoint/reappoint Liaisons and Alternates as appropriate 3) The Board should review and then consider its existing delegated authorities and any proposals for modification of delegations. <ul style="list-style-type: none"> <li>a. Credentialing Delegations (Questions: Sarah Norberg)</li> <li>b. Monitoring Delegations (Questions: Amy Mayo)</li> <li>c. Pre-Screening Delegations (Questions: Gretchen Mrozinski)</li> </ul>			
<b>11) Authorization</b>			
Megan Glaeser		4 January 2021	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date			
<b>Directions for including supporting documents:</b> 1. This form should be attached to any documents submitted to the agenda. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

**MEDICAL EXAMINING BOARD  
2020 ELECTION AND APPOINTMENT RESULTS**

<b>2020 ELECTION RESULTS</b>	
<b>Chairperson</b>	Sheldon Wasserman
<b>Vice Chairperson</b>	Sumeet Goel
<b>Secretary</b>	Clarence Chou

**Appointment of Liaisons and Alternates**

<b>2020 LIAISON APPOINTMENTS</b>	
<b>Credentialing Liaison(s)</b>	Lemuel Yerby, Emily Yu, Michael Parish, Diane Gerlach Alternate: Clarence Chou, David Roelke, David Bryce
<b>Office of Education and Examinations Liaison(s)</b>	David Roelke Alternate: David A. Bryce
<b>Continuing Education Liaison(s)</b>	David Roelke Alternate: Michael Parish
<b>Monitoring Liaison(s)</b>	Padmaja Doniparthi Alternate: Clarence Chou
<b>Professional Assistance Procedure (PAP) Liaison(s)</b>	Padmaja Doniparthi Alternate: David Bryce
<b>Legislative Liaison</b>	Sumeet Goel, Sheldon Wasserman
<b>Travel Liaison(s)</b>	David Bryce Alternate: Sumeet Goel
<b>Newsletter Liaison(s)</b>	Sheldon Wasserman Alternate: Sumeet Goel
<b>Prescription Drug Monitoring Program Liaison(s)</b>	Michael Parish Alternate: David Bryce
<b>Website Liaison(s)</b>	Sumeet Goel Alternate: Milton Bond, Jr
<b>Administrative Rules Liaison(s)</b>	David Roelke Alternate: Sumeet Goel
<b>Appointed to Controlled Substances Board as per Wis. Stats. §15.405(5g) (MED)</b>	Padmaja Doniparthi Alternate: David Bryce

**MEDICAL EXAMINING BOARD  
2020 ELECTION AND APPOINTMENT RESULTS**

<b>OTHER APPOINTMENTS</b>	
<b>Council on Anesthesiologist Assistants</b>	Padmaja Doniparthi
<b>IMLCC (2 reps)</b>	Sheldon Wasserman, Clarence Chou
<b>Licensure Forms Committee</b>	David Bryce, Padmaja Doniparthi, David Roelke
<b>MED-PA Collaboration Committee</b>	Sumeet Goel (Chairperson), Lemuel Yerby, David Bryce, Jennifer Jarrett, Eric Elliot, Reid Bowers

**MOTION:** Clarence Chou moved, seconded by Bradley Kudick, to appoint Padmaja Doniparthi to the Council on Anesthesiologist Assistants as the Medical Examining Board representative. Motion carried unanimously.

**MOTION:** David Roelke moved, seconded by Michael Parish, to appoint Sheldon Wasserman and Clarence Chou as Compact Commissioners to the Interstate Medical Licensure Compact. Motion carried unanimously.

**MOTION:** Clarence Chou moved, seconded by David Bryce, to create as an ad hoc committee the MED-PA Collaboration Committee, consisting of Sumeet Goel, Lemuel Yerby, and David Bryce of the Medical Examining Board, Jennifer Jarrett of the Council on Physician Assistants, and Eric Elliot and Reid Bowers of the Wisconsin Academy of Physician Assistants. The committee is charged with reviewing current statutes, rules, and practices related to the practice of physician assistants and provide recommendations to the Medical Examining Board related to same, with a particular focus on improving healthcare access in rural areas. Motion carried unanimously.

**Delegation of Authorities**

***Document Signature Delegations***

**MOTION:** David Roelke moved, seconded by Alaa Abd-Elsayed, 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:** David Roelke moved, seconded by Bradley Kudick, in order to carry out duties of the Board, the Chairperson (or in absence of the Chairperson, the



**MEDICAL EXAMINING BOARD  
2020 ELECTION AND APPOINTMENT RESULTS**

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:** Padmaja Doniparthi moved, seconded by David Roelke, 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.

*Monitoring Delegations*

**MOTION:** David Roelke moved, seconded by Bradley Kudick, to adopt the “Roles and Authorities Delegated to the Monitoring Liaison and Department Monitor” as amended from the January 15, 2020 agenda materials as follows: Strike Paragraph 10, regarding liaison acceptance of voluntary surrenders. Motion carried unanimously.

*Credentialing Authority Delegations*

**Delegation of Authority to Credentialing Liaison (Denial Decisions)**

**MOTION:** David Roelke moved, seconded by Alaa Abd-Elsayed, to delegate authority to the Credentialing Liaison(s) to serve as a liaison between DSPS and the Board and to act on behalf of the Board in regard to credentialing applications or questions presented to them except that potential denial decisions shall be referred to the full Board for final determination. Motion carried unanimously.

**Delegation of Authority to DSPS When Credentialing Criteria is Met**

**MOTION:** Timothy Westlake moved, seconded by Bradley Kudick, to delegate authority to the DSPS attorneys to review and approve ordinance violations which are not substantially related to the practice of medicine, limited to:

1. Littering
2. Loitering
3. Up to two (2) Underage Drinking
4. One (1) OWI two or more years prior to application

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5. Trespassing
  6. Disturbing the Peace
- Motion carried unanimously.

**MOTION:** David Roelke moved, seconded by Sheldon Wasserman, to delegate authority to DSPS attorneys to review and approve conviction reviews for Medicine & Surgery (Physicians) applications which have previously been approved for a full Resident Educational License (REL) license after a criminal background check and there have been no new violations or convictions since the previous license approval. Motion carried unanimously.

***Council Delegation Motion***

**MOTION:** Mary Jo Capodice moved, seconded by Alaa Abd-Elsayed, to delegate to the Board's Councils and/or its liaison(s), the authority to review applications and conduct examinations of candidates for licensure and to make recommendations regarding the licensure of applicants based upon the application reviews and examinations. Recommended credential denials should be considered by the Medical Examining Board. This delegation motion is not intended to be exhaustive of the Councils' advisory authority. Motion carried unanimously.

***Delegated Authority for Application Denial Reviews***

**MOTION:** Mary Jo Capodice moved, seconded by Padmaja Doniparthi, that the Department's Attorney Supervisors, DLSC Administrator, or their designee are authorized to serve as the Board's designee for purposes of reviewing and acting on requests for hearing as a result of a denial of a credential. Motion carried unanimously.

***Education, Continuing Education and/or Examination Delegation(s)***

**MOTION:** Bradley Kudick moved, seconded by David Roelke, to delegate authority to the Continuing Education Liaison(s) and the Office of Education and Examination Liaison(s) to address all issues related to continuing education, and education and examinations. Motion carried unanimously.

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

**MOTION:** Mary Jo Capodice moved, seconded by David Roelke, to authorize DSPS staff to provide national regulatory related bodies with all Board member

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contact information that DSPS retains on file. Motion carried unanimously.

***Optional Renewal Notice Insert Delegation***

**MOTION:** Alaa Abd-Elseyed moved, seconded by Padmaja Doniparthi to designate the Chairperson (or, in the absence of the Chairperson, the highest-ranking officer or longest serving board member in that succession) to provide a brief statement or link relating to board-related business within the license renewal notice at the Board's or Board designee's request. Motion carried unanimously.

***Legislative Liaison Delegation***

**MOTION:** Bradley Kudick moved, seconded by Mary Jo Capodice, to delegate authority to the Legislative Liaison(s) to speak on behalf of the Board regarding legislative matters. Motion carried unanimously.

***Travel Delegation***

**MOTION:** Mary Jo Capodice moved, seconded by David Bryce, to delegate authority to the Travel Liaison to approve any board member travel. Motion carried unanimously.

***Delegation of Authority to Assign and Schedule Members to Screening Panels and Oral Examinations***

**MOTION:** David Roelke moved, seconded by David Bryce, to delegate to Department staff the assignment and scheduling of screening panel and oral examination panel members. Motion carried unanimously.

***Prescreening Delegation***

**MOTION:** David Roelke moved, seconded by Bradley Kudick, to delegate to DLSC staff, the authority to prescreen complaints for the purpose of reviewing submitted continuing medical education (CME) materials and to determine if CME requirements are met. If CME requirements are met, then DLSC staff should remove such CME documentation from the screening materials prior to the screening panel meeting. If the submitted documentation does not clearly establish that CME requirements are met, such documentation shall be forwarded to the screening panel for review. Motion carried unanimously.

## **PROPOSED 2021 CREDENTIALING DELEGATION MOTIONS**

### ***Delegation of Authority to Credentialing Liaison (Denial Decisions)***

**MOTION:** 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, except that potential denial decisions shall be referred to the full Board for final determination.

### ***Delegation of Authority for Predetermination Reviews***

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

### ***Delegation of Authority for Conviction Reviews***

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

*Or, alternatively,*

**MOTION:** to delegate authority to Department Paralegals to review and approve applications with [optional: up to X] municipal/ordinance violations which are not substantially related to the practice of medicine

**MOTION:** to delegate authority to Department Attorneys to review and approve applications with [optional: up to X] municipal/ordinance violations and misdemeanors [optional: each more than X years old and] which are not substantially related to the practice of medicine.

*Or, alternatively, (MEB)*

**MOTION:** to delegate authority to Department Attorneys to review and approve ordinance violations which are not substantially related to the practice of medicine, limited to:

1. Littering
2. Loitering
3. Up to two (2) Underage Drinking
4. One (1) OWI two or more years prior to application
5. Trespassing
6. Disturbing the Peace

### ***Delegation to DSPS When Applicant's History Has Been Previously Reviewed***

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

*Or, alternatively,*

**MOTION:** to delegate authority to Department attorneys to review and approve conviction reviews for Medicine & Surgery (Physicians) applications which have previously been approved for a full Resident Educational License (REL) license after a criminal background check and there have been no new violations or convictions since the previous license approval.

***Council Delegation Motion***

**MOTION:** to delegate to the Board's Councils and/or its liaison(s), the authority to review applications and conduct examinations of candidates for licensure and to make recommendations regarding the licensure of applicants based upon the application reviews and examinations. Recommended credential denials should be considered by the Medical Examining Board. This delegation motion is not intended to be exhaustive of the Councils' advisory authority.

***Delegated Authority for Application Denial Reviews***

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

## 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.

### ~~Current~~ 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 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 extension or payment plan for proceeding costs and/or forfeitures if warranted and requested in writing by Respondent.
7. Grant a maximum of one extension, if warranted and requested in writing by Respondent, to complete a Board/Section-ordered evaluation or exam.
- ~~7.8.~~ 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 ~~the signature of~~ written authorization from the Liaison to sign on their behalf.
- ~~8.9.~~ Grant or deny a request to appear before the Board/Section in closed session.
- ~~9.10.~~ Board Monitoring The Liaison may determine whether Respondent’s petition is eligible for consideration by the full Board/Section.
- ~~10.11.~~ (*Except Pharmacy and Medical*) 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.

~~11.12.~~ *(Except Pharmacy)* 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 Year 1:~~ 49 screens (including 1 hair test, if required by original order)
- b. ~~1st Reduction Year 2:~~ 36 screens (plus 1 hair test, if required by original order)
- c. ~~2<sup>nd</sup> Reduction Year 3:~~ 28 screens plus 1 hair test
- ~~d. Year 4: 28 screens plus 1 hair test~~
- ~~e. Year 5: 14 screens plus 1 hair test~~
- d. 3<sup>rd</sup> Reduction: 14 screens plus 1 hair test

~~12.13.~~ *(Dentistry only)* Ability to approve or deny all requests from a respondent.

~~13.14.~~ *(Except Nursing)* ~~Board Monitoring~~ The Liaison may approve or deny Respondent's request to be excused from drug and alcohol testing for work, travel, etc.

### ~~Current~~ 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 CE 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 CE 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.

### 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.

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

**AGENDA REQUEST FORM**

<b>1) Name and Title of Person Submitting the Request:</b> Kimberly Wood, Program Assistant Supervisor-Adv.		<b>2) Date When Request Submitted:</b> 12/29/2020 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
<b>3) Name of Board, Committee, Council, Sections:</b> All Boards			
<b>4) Meeting Date:</b>	<b>5) Attachments:</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6) How should the item be titled on the agenda page?</b> Annual Policy Review	
<b>7) Place Item in:</b> <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	<b>8) Is an appearance before the Board being scheduled?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>9) Name of Case Advisor(s), if required:</b> N/A	
<b>10) Describe the issue and action that should be addressed:</b> Please be advised of the following Annual Policy Review items: <ol style="list-style-type: none"> <li>1. <b>Attendance/Quorum:</b> Thank you for your service and for your commitment to meeting attendance. If you cannot attend a meeting or if you have scheduling conflicts impacting your attendance, please let us know ASAP. Timely notification is appreciated as quorum is required for our Boards, Sections and Councils to meet pursuant to Open Meetings Law.</li> <li>2. <b>Walking Quorum:</b> Please refrain from discussing Board/Section/Council business with other members outside of legally noticed meetings so to avoid walking quorum issues pursuant to Open Meetings Law.</li> <li>3. <b>Agenda Deadlines:</b> Please communicate agenda topics to your Executive Director before the agenda submission deadline which is 8 business days prior to a meeting.</li> <li>4. <b>Travel Voucher and Per Diem Submissions:</b> Please submit all Per Diem and Reimbursement claims to DSPS within 30 days of the close of each month in which expenses are incurred.</li> <li>5. <b>Lodging Accommodations/Hotel Cancellation Policy:</b> Lodging accommodations are available to eligible members. Standard eligibility: member must leave home before 6:00 a.m. to attend a meeting by the indicated start time.                         <ul style="list-style-type: none"> <li>• If a member cannot attend a meeting it is their responsibility to cancel their reservation within the applicable cancellation timeframe. If a meeting is changed to occur remotely or is cancelled or rescheduled DSPS staff will cancel or modify reservations as appropriate.</li> </ul> </li> <li>6. <b>Inclement Weather Policy:</b> In the event of inclement weather the agency may change a meeting from an in-person venue to one that is executed remotely.</li> </ol>			
<b>11) Authorization</b>			
<i>Kimberly Wood</i>		12/29/2020	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date			
<b>Directions for including supporting documents:</b> <ol style="list-style-type: none"> <li>1. This form should be attached to any documents submitted to the agenda.</li> <li>2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director.</li> <li>3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.</li> </ol>			



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

**AGENDA REQUEST FORM**

1) Name and Title of Person Submitting the Request:  <b>Dale Kleven</b> <b>Administrative Rules Coordinator</b>		2) Date When Request Submitted:  <b>1/7/21</b> Items will be considered late if submitted after 12:00 p.m. on the deadline date: ▪ 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections:  <b>Medical Examining Board</b>			
4) Meeting Date:  <b>1/20/21</b>	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? <b>Administrative Rule Matters – Discussion and Consideration</b> <b>1. Review of Preliminary Draft Rules of the Occupational Therapists Affiliated Credentialing Board</b> <b>2. Proposals for Med 13, Relating to Continuing Medical Education Requirements</b> <b>3. Preliminary Rule Draft – Med 10, Relating to Unprofessional Conduct</b> <b>4. Scope Statement – Med 1, Relating to Licenses to Practice Medicine and Surgery</b> <b>5. Pending or Possible Rulemaking Projects</b>	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session <input type="checkbox"/> Both		8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes ( <a href="#">Fill out Board Appearance Request</a> ) <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:
10) Describe the issue and action that should be addressed:  1. Under s. 15.085 (5), Stats., the Occupational Therapists Affiliated Credentialing Board is required to submit a proposed rule to the Medical Examining Board for comment at least 60 days before the proposed rule is submitted to the Legislative Clearinghouse. Any comments on the proposed rule must be considered and included in the report on the proposed rule submitted to the Legislature.			
11) <i><b>Dale Kleven</b></i> Signature of person making this request		Authorization  <i><b>January 7, 2021</b></i> 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  
OCCUPATIONAL THERAPISTS  
AFFILIATED CREDENTIALING BOARD

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IN THE MATTER OF RULE-MAKING	:	PROPOSED ORDER OF THE
PROCEEDINGS BEFORE THE	:	OCCUPATIONAL THERAPISTS
OCCUPATIONAL THERAPISTS	:	AFFILIATED CREDENTIALING
AFFILIATED CREDENTIALING	:	BOARD
BOARD	:	ADOPTING RULES
	:	(CLEARINGHOUSE RULE )

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PROPOSED ORDER

An order of the Occupational Therapists Affiliated Credentialing Board to amend OT 4.05 (1) and (2) and create ch. OT 6, relating to telehealth.

Analysis prepared by the Department of Safety and Professional Services.

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ANALYSIS

**Statutes interpreted:**

Section 448.965 (1) (c) and (2), Stats.

**Statutory authority:**

Sections 15.085 (5) (b) and 448.965 (1) (c) and (2), Stats.

**Explanation of agency authority:**

Section 15.085 (5) (b), Stats., provides that an affiliated credentialing board, such as the Occupational Therapists Affiliated Credentialing 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 448.965 (1) (c), Stats., provides the Occupational Therapists Affiliated Credentialing Board may promulgate rules that establish “[s]tandards of practice for occupational therapy, including a code of ethics and criteria for referral.”

Section 448.965 (2), Stats., provides “[t]he affiliated credentialing board may promulgate rules that define the scope of practice of occupational therapy or the scope of assisting in the practice of occupational therapy.”

**Related statute or rule:**

Chapter OT 5 establishes the standards of conduct for occupational therapists and occupational therapy assistants. As provided in the proposed rule, these standards of conduct apply regardless of whether occupational therapy services are provided utilizing a telehealth visit or an in-person visit.

**Plain language analysis:**

Current administrative rules of the Occupational Therapy Affiliated Credentialing Board do not address telehealth practice. The proposed rule updates s. OT 4.05 and creates a new chapter, ch. OT 6, to establish standards of practice, care, and conduct for providing occupational therapy services using a telehealth visit.

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

The Code of Federal Regulations administers Medicare, including coverage of telehealth services by Medicare Part B (42 CFR § 410.78). Although generally not covered by Medicare Part B, in April of 2020 the Centers for Medicare & Medicaid Services announced it was using its waiver authority to allow occupational therapists and occupational therapy assistants to perform telehealth services for Medicare beneficiaries. The waiver is retroactive to March 1, 2020, and will remain in effect for the remainder of the COVID-19 Public Health Emergency. The federal Medicare regulations do not restrict the Board's authority to establish standards for the provision of occupational therapy services using telehealth.

Federal regulations also administer the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Specifically, the HIPAA Security Rule establishes national standards to protect individuals' electronic personal health information that is created, received, used, or maintained by a covered entity. The Security Rule requires appropriate administrative, physical, and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information. The Security Rule is located at 45 CFR Part 160 and Subparts A and C of Part 164. The proposed rule requires an occupational therapist or occupational therapy assistant who provides occupational therapy services using a telehealth visit to utilize technology that is secure and HIPAA-compliant.

**Comparison with rules in adjacent states:**

**Illinois:** The Illinois Statutes define "occupational therapy" to include occupational therapy services provided via technology or telecommunication methods, also known as telehealth, and provide that the standard of care is required to be the same whether a patient is seen in person, through telehealth, or other method of electronically enabled health care. (225 ILCS 75/2)

**Iowa:** Rules of the Professional Licensure Division of the Iowa Public Health Department provide the requirements for utilizing a telehealth visit to provide occupational therapy services. "Telehealth visit" is defined as the provision of occupational therapy services by a licensee to a patient using technology where the licensee and the patient are not at the same physical location for the occupational therapy session. (645 IAC 208.3)

**Michigan:** Michigan statutes and rules do not specifically address the provision of occupational therapy services using telehealth.

**Minnesota:** Minnesota statutes and rules do not specifically address the provision of occupational therapy services using telehealth.

**Summary of factual data and analytical methodologies:**

The proposed rules were developed by using the occupational therapy telehealth rules of the Professional Licensure Division of the Iowa Public Health Department (645 IAC 208.3) as a model, and obtaining input and feedback from the Occupational Therapists Affiliated Credentialing Board.

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

The proposed rules were 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 document is 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 Daniel.Hereth@wisconsin.gov, or by calling (608) 267-2435.

**Agency contact person:**

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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

Comments may be submitted to Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, WI 53708-8366, or by email to DSPSAdminRules@wisconsin.gov. Comments must be received at or before the public hearing to be held at \* a.m. on \*, 2021, to be included in the record of rule-making proceedings.

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TEXT OF RULE

SECTION 1. OT 4.05 (1) and (2) are amended to read:

**OT 4.05 (1)** An occupational therapist or occupational therapy assistant must provide direct supervision of non-licensed personnel at all times. Direct supervision requires that the supervising occupational therapist or occupational therapy assistant be ~~on premises and~~ available to assist, either on premises or through technology and equipment meeting the requirements of s. OT 6.03.

**(2)** When an occupational therapist or occupational therapy assistant delegates to non-licensed personnel maintenance or restorative services to clients, the occupational therapist or occupational therapy assistant must be ~~in the immediate area and~~ within audible and visual range of the client and the non-licensed personnel, either on premises in the immediate area or through technology and equipment meeting the requirements of s. OT 6.03.

SECTION 2. Chapter OT 6 is created to read:

## CHAPTER OT 6

### TELEHEALTH

**OT 6.01 Authority and purpose.** The rules in this chapter are adopted by the board under the authority of ss. 15.085 (5) (b) and 448.965 (1) (c) and (2), Stats., to establish standards of practice, care, and conduct for providing occupational therapy services using a telehealth visit.

**OT 6.02 Definitions.** As used in this chapter:

(1) “HIPAA” means the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.

(2) “Telehealth visit” means the provision of occupational therapy services using technology where the occupational therapist or occupational therapy assistant and the patient are not at the same physical location for the occupational therapy session.

**OT 6.03 Technology and equipment.** An occupational therapist or occupational therapy assistant who provides occupational therapy services using a telehealth visit shall utilize technology that is secure and HIPAA-compliant and that includes, at a minimum, audio and video equipment that allows two-way real-time interactive communication with the patient. Technology that is not real-time may be utilized to prepare for an occupational therapy session or to communicate with a patient between occupational therapy sessions.

**OT 6.04 Standards of practice, care, and conduct.**

(1) An occupational therapist or occupational therapy assistant shall be held to the same standards of practice, care, and professional conduct regardless of whether occupational therapy services are provided utilizing a telehealth visit or an in-person visit.

(2) A telehealth visit may not be utilized if the standard of care for the particular occupational therapy services provided cannot be met.

(3) An occupational therapist or occupational therapy assistant may provide an occupational therapy service using a telehealth visit only when the use of technology to provide the service is consistent with the education, training, and experience of the occupational therapist or occupational therapy assistant.

(4) When determining if a telehealth visit should be utilized as a medium for accomplishing the goals of a patient’s occupational therapy program, an occupational therapist shall collaborate, as appropriate, with the occupational therapy assistant, the patient, the patient’s family, other health care professionals, and community resources.

**OT 6.05 Wisconsin license required.** An occupational therapist or occupational therapy assistant who uses a telehealth visit to provide occupational therapy services to a patient located in this state shall be licensed by the board.

**OT 6.06 Informed consent.** Prior to an initial telehealth visit, an occupational therapist or occupational therapy assistant shall obtain informed consent from the patient specific to the occupational therapy services that will be provided using a telehealth visit. At a minimum, the informed consent shall specifically inform the patient of all the following:

- (1) The risks and limitations of the use of a telehealth visit to provide occupational therapy services.
- (2) The potential for unauthorized access to protected health information.
- (3) The potential for disruption of technology during a telehealth visit.

**OT 6.07 Recordkeeping.** An occupational therapist or occupational therapy assistant shall identify in the clinical record when occupational therapy services are provided utilizing a telehealth visit.

**OT 6.08 Supervision.** Supervision of an occupational therapy assistant or unlicensed personnel providing services to or assisting a client during a telehealth visit shall meet the requirements of s. OT 4.04 or 4.05, as appropriate.

SECTION 3. 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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## 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 28, 2020
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) OT 1 to 6	
4. Subject Telehealth	
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected
7. Fiscal Effect of Implementing the Rule <input checked="" type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
8. The Rule Will Impact the Following (Check All That Apply) <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses <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). \$0	
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11. Policy Problem Addressed by the Rule Current administrative rules of the Occupational Therapy Affiliated Credentialing Board do not address telehealth practice. The proposed rule updates s. OT 4.05 and creates a new chapter, ch. OT 6, to establish standards of practice, care, and conduct for providing occupational therapy services using a telehealth visit.	
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 proposed rule was posted on the Department of Safety and Professional Services' website for 14 days in order to solicit comments from businesses, representative associations, local governmental units, and individuals that may be affected by the rule. No comments were received.	
13. Identify the Local Governmental Units that Participated in the Development of this EIA. No local governmental units participated in the development of this EIA.	
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) The proposed rule will not have a significant impact on specific businesses, business sectors, public utility rate payers, local governmental units, or the state's economy as a whole.	
15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The benefit to implementing the rule is established standards of practice, care, and conduct for providing occupational therapy services using a telehealth visit. If the rule is not implemented, these standards will remain unclear	

## ADMINISTRATIVE RULES

### Fiscal Estimate & Economic Impact Analysis

#### 16. Long Range Implications of Implementing the Rule

The long range implication of implementing the rule is established standards of practice, care, and conduct for providing occupational therapy services using a telehealth visit.

#### 17. Compare With Approaches Being Used by Federal Government

The Code of Federal Regulations administers Medicare, including coverage of telehealth services by Medicare Part B (42 CFR § 410.78). Although generally not covered by Medicare Part B, in April of 2020 the Centers for Medicare & Medicaid Services announced it was using its waiver authority to allow occupational therapists and occupational therapy assistants to perform telehealth services for Medicare beneficiaries. The waiver is retroactive to March 1, 2020, and will remain in effect for the remainder of the COVID-19 Public Health Emergency. The federal Medicare regulations do not restrict the Board's authority to establish standards for the provision of occupational therapy services using telehealth.

Federal regulations also administer the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Specifically, the HIPAA Security Rule establishes national standards to protect individuals' electronic personal health information that is created, received, used, or maintained by a covered entity. The Security Rule requires appropriate administrative, physical, and technical safeguards to ensure the confidentiality, integrity, and security of electronic protected health information. The Security Rule is located at 45 CFR Part 160 and Subparts A and C of Part 164. The proposed rule requires an occupational therapist or occupational therapy assistant who provides occupational therapy services using a telehealth visit to utilize technology that is secure and HIPAA-compliant.

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

**Illinois:** The Illinois Statutes define "occupational therapy" to include occupational therapy services provided via technology or telecommunication methods, also known as telehealth, and provide that the standard of care is required to be the same whether a patient is seen in person, through telehealth, or other method of electronically enabled health care. (225 ILCS 75/2)

**Iowa:** Rules of the Professional Licensure Division of the Iowa Public Health Department provide the requirements for utilizing a telehealth visit to provide occupational therapy services. "Telehealth visit" is defined as the provision of occupational therapy services by a licensee to a patient using technology where the licensee and the patient are not at the same physical location for the occupational therapy session. (645 IAC 208.3)

**Michigan:** Michigan statutes and rules do not specifically address the provision of occupational therapy services using telehealth.

**Minnesota:** Minnesota statutes and rules do not specifically address the provision of occupational therapy services using telehealth.

<b>19. Contact Name</b>	<b>20. Contact Phone Number</b>
Dale Kleven	(608) 261-4472

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
-

## **Chapter Med 13**

### **CONTINUING MEDICAL EDUCATION FOR PHYSICIANS**

**Med 13.01 Authority and purpose.** The rules in this chapter are adopted by the medical examining board pursuant to the authority delegated by ss. 15.08 (5) (b), 227.11 (2) and 448.13, Stats., and govern the biennial training requirements for physicians as provided under s. 448.13, Stats.

**Med 13.02 Continuing medical education required; waiver.**

**(1)** Each physician required to complete the biennial training requirements provided under s. 448.13, Stats., shall, in each second year at the time of making application for a certificate of registration as required under s. 448.07, Stats., sign a statement on the application for registration certifying that the physician has completed at least 30 hours of acceptable continuing medical educational programs within the biennial registration period.

**(1g)**

**(a)** Except as provided under par. (b), for a renewal date occurring in 2017 or 2018, a minimum of 2 of the 30 hours of continuing medical education required under sub. (1) shall be an educational course or program related to the guidelines issued by the board under s. 440.035 (2m), Stats., that is approved under s. Med 13.03 (3) at the time of the physician's attendance.

**(b)** This subsection does not apply to a physician who, at the time of making application for a certificate of registration, does not hold a U.S. drug enforcement administration number to prescribe controlled substances.

**(1r)**

**(a)** Except as provided under par. (b), for the renewal date occurring on November 1, 2019, a minimum of 2 of the 30 hours of continuing medical education required under sub. (1) shall be an educational course or program related to the guidelines issued by the board under s. 440.035 (2m), Stats., that is approved under s. Med 13.03 (3) at the time of the physician's attendance.

**(b)** This subsection does not apply to a physician who, at the time of making application for a certificate of registration, does not hold a U.S. drug enforcement administration number to prescribe controlled substances.

**(1v)**

**(a)** Except as provided under par. (b), for the renewal date occurring on November 1, 2021, a minimum of 2 of the 30 hours of continuing medical education required under sub. (1) shall be an educational course or program related to opioid prescribing that is approved under s. Med 13.03 (3) at the time of the physician's attendance.

**(b)** This subsection does not apply to a physician who, at the time of making application for a certificate of registration, does not hold a U.S. drug enforcement administration number to prescribe controlled substances.

**(1x)**

**(a)** Except as provided under par. (b), for the renewal date occurring on November 1, 2023, a minimum of 2 of the 30 hours of continuing medical education required under sub. (1) shall be an educational course or program related to opioid prescribing that is approved under s. Med 13.03 (3) at the time of the physician's attendance, and whose subject matter meets the requirements of s. Med 13.03 (3) (b) 2s.

**(b)** This subsection does not apply to a physician who, at the time of making application for a certificate of registration, does not hold a U.S. drug enforcement administration number to prescribe controlled substances.

Proposed revisions for the Board's discussion and consideration are marked below in red.

- (2) A physician may apply to the board for waiver of the requirements of this chapter on grounds of prolonged illness or disability or other similar circumstances, and each case will be considered individually on its merits by the board.

**Med 13.03 Acceptable continuing medical educational programs.** The board shall accept the following in satisfaction of the biennial training requirement provided under s. 448.13, Stats.:

(1)

- (a) *Program approval.* Educational courses and programs approved in advance by the board may be used for credit, except that the board may approve for credit completed programs and courses conducted in other countries.
- (b) *Physicians.* The board recognizes only those educational programs recognized as approved at the time of the physician's attendance by the council on medical education of the American medical association, or the American osteopathic association, or the accreditation council for continuing medical education or may recognize program providers outside the United States unless any of the foregoing have been previously disapproved by the board. The board will accept attendance at and completion of programs accredited as the American medical association's or the American osteopathic association's "Category I" or an equivalent as fulfilling the requirements of this chapter for continuing medical education. One clock hour of attendance shall be deemed to equal one hour of acceptable continuing medical education.

(2)

- (a) The board shall accept for continuing medical education credit, voluntary, uncompensated services provided by physicians specializing in psychiatry in assisting the department of health services in the evaluation of community outpatient mental health programs, as defined in s. 51.01 (3n), Stats., and approved by the department of health services according to rules promulgated under s. 51.42 (7) (b), Stats. Four hours of assistance, including hours expended in necessary training by the department of health services, shall be deemed to equal one hour of acceptable continuing medical education for the purposes of this chapter.
- (b) Physicians wishing to apply for continuing medical education credit under this subsection shall register in advance with the board and shall notify the board on forms provided by the board of the dates and the total number of hours in any biennium for which the applicant will be available to provide assistance. Referrals shall be made to the department of health services in the order received pursuant to requests for assistance received from that department by the medical examining board and by the psychology examining board.

**Note:** Forms to apply for continuing medical education credit are available ~~upon request to the board office located at 1400 East Washington Avenue, P.O. Box 8935, Madison, Wisconsin 53708~~ from the department of safety and professional services by phone at (608) 266-2112 or by email at [dspd@wisconsin.gov](mailto:dspd@wisconsin.gov).

(3)

- (a) Only educational courses and programs approved by the board may be used to satisfy the requirement under s. Med 13.02 (1g) (a), ~~and (1r) (a), (1v) (a), and (1x) (a).~~ To apply for approval of a continuing education course or program, a provider shall submit to the board an application on forms provided by the department. The application shall include all of the following concerning the course or program:

1. The title.
2. A general description and a detailed outline of the content.
3. The dates and locations.
4. The name and qualifications of the instructor.
5. The sponsor.

**Note:** An application for continuing education course or program approval may be obtained from the board at the Department of Safety and Professional Services, Office of Education and Examinations, P.O. Box 8366, Madison, Wisconsin, 53708, or from the department's website at <http://dspd.wi.gov>.

Proposed revisions for the Board's discussion and consideration are marked below in red.

(b) A continuing education course or program must meet all of the following criteria to be approved:

1. The course or program is accepted by the board under sub. (1) (b).
  2. The subject matter of a course under s. Med 13.02 (1g) (a) or (1r) (a) shall pertain to the guidelines issued by the board under s. 440.035 (2m), Stats.
  - 2m. The subject matter of a course under s. Med 13.02 (1v) (a) shall pertain to opioid prescribing.
  - 2s. The subject matter of a course under s. Med 13.02 (1x) (a) shall pertain to responsible opioid prescribing, with an emphasis on the guideline issued by the board under s. 440.035 (2m), Stats., relating to informed consent of all patients on chronic opioid therapy.
  3. The provider agrees to monitor the attendance and furnish a certificate of attendance to each participant. The certificate of attendance shall certify successful completion of the course or program.
  4. The provider is approved by the board.
  5. The course or program content and instructional methodologies are approved by the board.
- (c) A separate application shall be submitted for each continuing education course or program approval request.
- (d) A course or program sponsor may repeat a previously approved course or program without application, if the subject matter and instructor has not changed.

**Med 13.04 Physician postgraduate training program; length of service.** The board will accept postgraduate training in a program approved by the board under the provisions of s. Med 1.02 (3), as fulfilling the requirements of this chapter for continuing medical education for physicians. Three consecutive months of such postgraduate training shall be deemed to equal 30 hours of acceptable continuing medical education for the purposes of this chapter.

**Med 13.05 Evidence of compliance.**

- (1) PHYSICIANS. The board will accept as evidence of compliance by physicians with the requirements of this chapter, as original documents or verified copies thereof, any or all or any combination of the following:
- (a) Certification by either the providing institution or organization or the American medical association or the American osteopathic association, or components thereof, of attendance at and completion of continuing medical education programs approved under the provisions of s. Med 13.03 (1) (a).
  - (b) A "Physician's Recognition Award" of the American medical association or a certificate of continuing medical education from the American academy of family physicians awarded not more than 12 months prior to the beginning of the calendar year for which application for registration is being made.
  - (c) Certification by a chief of service or head of department or director of medical education of the providing facility of appointment to and satisfactory participation in a postgraduate training program approved under the provisions of s. Med 13.04.
- (2) RETENTION REQUIREMENT. Evidence of compliance shall be retained by each physician through the biennium for which 30 hours of credit are required for registration.

**Med 13.06 Audit.** The board shall conduct a random audit of licensees on a biennial basis for compliance with the continuing education requirement stated in s. Med 13.02 (1). The board may require any physician to submit evidence of compliance with the continuing education requirement to the board during the biennium for which 30 hours of credit are required for registration to audit compliance.

STATE OF WISCONSIN  
MEDICAL EXAMINING BOARD

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

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PROPOSED ORDER

An order of the Medical Examining Board to amend Med 10.03 (3) (h), relating to unprofessional conduct.

Analysis prepared by the Department of Safety and Professional Services.

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ANALYSIS

**Statutes interpreted:**

Section 448.015 (4) (am) 1., Stats.

**Statutory authority:**

Section 15.08 (5) (b), Stats.

**Explanation of agency authority:**

Section 15.08 (5) (b), Stats., provides an examining board “shall promulgate rules for its own guidance and for the guidance of the trade or profession to which it pertains. . .”

**Related statute or rule:**

Section SPS 4.09 sets forth provisions related to credential holder charges and convictions.

**Plain language analysis:**

The proposed rule revises the Board’s rules related to professional conduct. Specifically, s. Med 10.03 (3) (h) is revised to clarify a licensee is required to comply with the reporting requirement under s. SPS 4.09 (2).

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

None.

**Comparison with rules in adjacent states:**

**Illinois:** The Illinois Statutes authorize the Illinois Department of Financial Regulation to take disciplinary or non-disciplinary action against a physician’s license. Grounds for action include failure to report to the Department any adverse final action taken against a physician by any law enforcement agency or any court, for acts or conduct similar to acts or conduct that would constitute grounds for action against the physician’s license [225 ILCS 60/22 (A) (34)].

**Iowa:**

Rules of the Iowa Board of Medicine provide the Board with authority to impose disciplinary sanctions for certain acts and offenses (653 IAC 23.1). The rules do not specifically provide that a physician may be subject to a disciplinary sanction for failure to report a conviction.

**Michigan:**

The Michigan Public Health Code requires a licensee or registrant to notify the Michigan Department of Licensing and Regulatory Affairs of any criminal conviction within 30 days after the date of the conviction. Failure of a licensee or registrant to notify the Department under this subsection shall result in administrative action against the license or registration [MCL 333.16222 (3)].

**Minnesota:**

The Minnesota Statutes require a physician to self-report to the Minnesota Board of Medical Practice within 30 days of any judgement or other determination of a court of competent jurisdiction that adjudges or includes a finding that a physician is guilty of a felony or a violation of a federal or state narcotics law or controlled substances act (2020 Minnesota Statutes, Section 147.111).

**Summary of factual data and analytical methodologies:**

The proposed rules were developed by obtaining input and feedback from the Medical Examining Board.

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

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

**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 Daniel.Hereth@wisconsin.gov, or by calling (608) 267-2435.

**Agency contact person:**

Dale Kleven, Administrative Rules Coordinator, Department of Safety and Professional Services, Division of Policy Development, P.O. Box 8366, Madison, Wisconsin 53708-8366; telephone 608-261-4472; email at DSPSAdminRules@wisconsin.gov.

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TEXT OF RULE

SECTION 1. Med 10.03 (3) (h) is amended to read:

**Med 10.03 (3) (h)** Failing, within 48 hours of the entry of judgement of conviction of any crime, to provide notice as required under s. SPS 4.09 (2), or failing,

within 30 days of conviction of any crime, to provide the board with certified copies of the criminal complaint and judgment of conviction.

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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# STATEMENT OF SCOPE

## Medical Examining Board

**Rule No.:** Med 1

**Relating to:** Licenses to Practice Medicine and Surgery

**Rule Type:** Permanent

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

N/A

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

The Medical Examining Board will conduct a comprehensive evaluation and update of ch. Med 1 to ensure the rules are consistent with current professional, academic, examination, and licensing practices, and applicable Wisconsin statutes. Updates to other chapters of the Board's rules may also be necessary to reflect updates to ch. Med 1.

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

Chapter Med 1 currently contains the rules of the Medical Examining Board governing application and examination for a license to practice medicine and surgery under s. 448.04 (1) (a), Stats. The Board has identified the need for a comprehensive evaluation and update of these rules to ensure they are consistent with current professional, academic, examination, and licensing practices, and applicable Wisconsin statutes.

The alternative of not conducting this evaluation and update would be to leave the rules unchanged, which may be less beneficial for individuals applying for a license to practice medicine and surgery under s. 448.04 (1) (a), Stats.

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

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

Section 448.05 (2) (a) 3., Stats., requires an applicant for any class of license to practice medicine and surgery to supply evidence satisfactory to the board "[t]hat the applicant satisfies any other requirement established by the board by rule for issuing the license."

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

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

70 hours



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

Applicants for a license to practice medicine and surgery under s. 448.04 (1) (a), Stats.

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

None.

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

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

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

Approved for publication:

Approved for implementation:

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date Submitted

\_\_\_\_\_  
Date Submitted

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

**AGENDA REQUEST FORM**

1) Name and title of person submitting the request: Valerie Payne, Executive Director on behalf of Dr. Sheldon Wasserman, Chair		2) Date when request submitted: 1/13/2021 <small>Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting</small>	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 1/20/2021	5) Attachments: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6) How should the item be titled on the agenda page? Beneath agenda item, "Federation of State Medical Boards". 1. FSMB Seeks Comment: Interim Report of the FSMB Workgroup on Emergency Preparedness and Response – Discussion and Consideration	
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 <a href="#">Appearance Request</a> for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required:	
10) Describe the issue and action that should be addressed: The FSMB's Workgroup on Emergency Preparedness and Response has authored a draft Interim Report and Recommendations for which it is seeking comment and feedback.  The FSMB Workgroup on Emergency Preparedness and Response was formed at the beginning of the COVID-19 pandemic to discuss the experiences and lessons learned from medical and other health professional boards during the COVID-19 pandemic, identify key learnings and best practices, and consider potential recommendations for the ongoing situation and to better prepare for future pandemics.  The document can be accessed at the following link: <a href="http://www.fsmb.org/siteassets/advocacy/pdf/epr_interim_report_distribution_draft_w_appendix.pdf">http://www.fsmb.org/siteassets/advocacy/pdf/epr_interim_report_distribution_draft_w_appendix.pdf</a>  Comments are due to Executive Director Valerie Payne by <b>February 8, 2021</b> to compile for Medical Examining Board Chair review prior to submission. Once the comment period is closed, the Workgroup will consider feedback received. The final policy document will then be presented to the FSMB Board of Directors and thereafter, presented to the House of Delegates Annual Business Meeting for consideration in April 2021.			
11) <b>Authorization</b>			
<i>Valerie Payne</i>		1/13/2020	
Signature of person making this request		Date	
Supervisor (if required)		Date	
Executive Director signature (indicates approval to add post agenda deadline item to agenda)    Date			
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.			