



**VIRTUAL/TELECONFERENCE
MEDICAL EXAMINING BOARD**
Virtual, 4822 Madison Yards Way, Madison
Contact: Tom Ryan (608) 266-2112
October 19, 2022

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 September 21, 2022 (6-11)

C. Introductions, Announcements and Recognition

D. Reminders: Conflicts of Interest, Scheduling Concerns

E. Administrative Matters – Discussion and Consideration

- 1) Department, Staff and Board Updates
- 2) Board Members – Term Expiration Dates
 - a. Bond, Jr., Milton – 7/1/2023
 - b. Chou, Clarence P. – 7/1/2023
 - c. Ferguson, Kris – 7/1/2025
 - d. Gerlach, Diane M. – 7/1/2024
 - e. Goel, Sumeet K. – 7/1/2023
 - f. Lerma, Carmen – 7/1/2024
 - g. Parish, Michael A. – 7/1/2023
 - h. Sattler, Rachel E. – 7/1/2024
 - i. Schmeling, Gregory J. – 7/1/2025
 - j. Siebert, Derrick R. – 7/1/2025
 - k. Wasserman, Sheldon A. – 7/1/2023
 - l. Yerby, Lemuel G. – 7/1/2024
 - m. Yu, Emily S. – 7/1/2024
- 3) Appointments, Reappointments, Confirmations, and Committee, Panel and Liaison Appointments
- 4) Assignment of Screening Panel and Examination Panel Liaisons
- 5) Wis. Stat. § 15.085 (3)(b) – Affiliated Credentialing Boards’ Biannual Meeting with the Medical Examining Board to Consider Matters of Joint Interest
 - a. Physician Assistant Affiliated Credentialing Board – Jennifer Jarrett, Chairperson

- F. Legislative and Policy Matters – Discussion and Consideration
- G. Legislature Agenda Request: Status of Kratom – Discussion and Consideration**
- H. Administrative Rule Matters – Discussion and Consideration (12)**
 - 1) Drafting Proposals: Med 26, Relating to Military Medical Personnel **(13-19)**
 - 2) Pending or Possible Rulemaking Projects **(20)**
- I. Board Opioid Abuse Goal Setting and Report Pursuant to Wis. Stat. § 440.035(2m)(c) (21-25)**
- J. Federation of State Medical Boards (FSMB) Matters – Discussion and Consideration
- K. Newsletter Matters – Discussion and Consideration**
 - 1) October 2022 Newsletter Distribution Report **(26-36)**
- L. COVID-19 – Discussion and Consideration
- M. Controlled Substances Board Report – Discussion and Consideration
- N. Interstate Medical Licensure Compact Commission (IMLCC) – Report from Wisconsin’s Commissioners – Discussion and Consideration
- O. Screening Panel Report
- P. Future Agenda Items
- Q. 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

R. 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.).

S. Deliberation on DLSC Matters

- 1) Proposed Stipulations, Final Decisions and Orders**
 - a. 20 MED 073 – Bianca A. Belli, M.D. **(37-43)**
 - b. 21 MED 552 – Elizabeth A. Polacheck, M.D. **(44-50)**
 - c. 22 MED 297 – Blaise P. Vitale, M.D. **(51-57)**
- 2) Administrative Warnings**
 - a. 21 MED 322 – J.R.B. **(58-59)**
 - b. 22 MED 087 – L.C. **(60-61)**
 - c. 22 MED 179 – K.K.R. **(62-63)**
 - d. 22 MED 297 – A.H.R. **(64-66)**
- 3) Case Closings**
 - a. 21 MED 236 – J.J.E. **(67-75)**
 - b. 21 MED 279 – M.V. **(76-79)**
 - c. 21 MED 486 – W.M.S. **(80-88)**
 - d. 21 MED 518 – J.A.H. **(89-96)**
 - e. 21 MED 561 – B.M.W. **(97-109)**
 - f. 21 MED 564 – A.K.S. **(110-115)**
 - g. 22 MED 286 – N.I. **(116-118)**
 - h. 22 MED 300 – J.G.A. **(119-122)**
 - i. 22 MED 304 – M.A.H. **(123-132)**
 - j. 22 MED 356 – K.M.K. **(133-141)**
- 4) Monitoring Matters**
 - a. Amy J. Kaiser, R.C.P. – Request for Termination of Direct Supervision and Decrease in Frequency of Specimen Collection **(142-171)**

T. Deliberation on Review of Administrative Warnings

- 1) **APPEARANCE:** Gretchen Mrozinski, DLSC Attorney; J.A.P., Respondent: WARN00001492 – 21 MED 337 – J.A.P. **(172-191)**
- 2) WARN00001506 – 22 MED 122 – R.L.S.

U. Credentialing Matters

- 1) Application Reviews**
 - a. David Stein – Medicine and Surgery (MD) Renewal Applicant
 - b. Jason Wilson – Medicine and Surgery (MD) Renewal Applicant **(192-270)**
- 2) Waiver of 24 Months of ACGME/AOA Accredited Post-Graduate Training**

a. Gazanfar Rahmathulla M.D. (271-351)

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. Confer with Legal Counsel with Respect to Litigation in which it is or is Likely to Become Involved

RECONVENE TO OPEN SESSION IMMEDIATELY FOLLOWING CLOSED SESSION

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

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

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

ADJOURNMENT

ORAL INTERVIEWS OF CANDIDATES FOR LICENSURE

VIRTUAL/TELECONFERENCE

11:00 A.M. OR IMMEDIATELY FOLLOWING THE FULL BOARD MEETING

CLOSED SESSION – Reviewing Applications and Conducting Oral Interview(s) of **zero (0)** (at time of agenda publication) Candidate(s) for Licensure – **Dr. Yu** and **Dr. Schmeling**

NEXT MEETING: NOVEMBER 16, 2022

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

Times listed for meeting items are approximate and depend on the length of discussion and voting. All meetings are held virtually unless otherwise indicated. In-person meetings are typically conducted at 4822 Madison Yards Way, Madison, Wisconsin, unless an alternative location is listed on the meeting notice. In order to confirm a meeting or to request a complete copy of the board's agenda, please visit the Department website at <https://dps.wi.gov>. The board may also consider materials or items filed after the transmission of this notice. Times listed for the commencement of disciplinary hearings may be changed by the examiner for the convenience of the parties. Requests for interpreters for the hard of hearing, or other accommodations, are considered upon request by contacting the Affirmative Action Officer at 608-266-2112, or the Meeting Staff at 608-266-5439.

**VIRTUAL/TELECONFERENCE
MEDICAL EXAMINING BOARD
MEETING MINUTES
SEPTEMBER 21, 2022**

PRESENT: Milton Bond, Jr. (*excused at 8:31 a.m.*); Clarence Chou, M.D.; Kris Ferguson, M.D.; Diane Gerlach, D.O.; Sumeet Goel, D.O.; Michael Parish, M.D. (*fully connected at 8:04 a.m.*); Gregory Schmeling, M.D. (*arrived at 8:31 a.m., excused at 9:51 a.m.*); Derrick Siebert, M.D. (*fully connected at 8:04 a.m.*); Sheldon Wasserman, M.D.; Lemuel Yerby, M.D.; Emily Yu, M.D.

(Derrick Siebert & Michael Parish were connected at the start of the meeting but did not have audio connection.)

EXCUSED: Carmen Lerma, Rachel Sattler

STAFF: Tom Ryan, Executive Director; Jameson Whitney, Legal Counsel; Nilajah Hardin, Administrative Rules Coordinator; Kimberly Wood, Program Assistant Supervisor-Adv.; Dialah Azam, 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 eight (8) members present.

ADOPTION OF AGENDA

MOTION: Clarence Chou moved, seconded by Emily Yu, to adopt the Agenda as published. Motion carried unanimously.

APPROVAL OF MINUTES OF AUGUST 17, 2022

MOTION: Lemuel Yerby moved, seconded by Sumeet Goel, to approve the Minutes of August 17, 2022 as published. Motion carried unanimously.

(Derrick Siebert & Michael Parish achieved full audio connection at 8:04 a.m.)

NEWSLETTER MATTERS

(Gregory Schmeling arrived at 8:31 a.m.)

(Milton Bond, Jr. was excused at 8:31 a.m.)

MOTION: Michael Parish moved, seconded by Sumeet Goel, to request that DSPS include licensed Physician Assistants in the distribution list for the MED Board Newsletter, at the request of Jennifer Jarrett, Chairperson – Physician Assistant Affiliated Credentialing Board. Motion carried unanimously.

CLOSED SESSION

MOTION: Sumeet Goel moved, seconded by Lemuel Yerby, 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: Clarence Chou-yes; Kris Ferguson-yes; Diane Gerlach-yes; Sumeet Goel-yes; Michael Parish-yes; Gregory Schmeling-yes; Derrick Siebert-yes; Sheldon Wasserman-yes; Lemuel Yerby-yes; and Emily Yu-yes. Motion carried unanimously.

The Board convened into Closed Session at 8:47 a.m.

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

Proposed Stipulations, Final Decisions and Orders

19 MED 304 – Rudy V. Byron, Jr., M.D.

MOTION: Sumeet Goel moved, seconded by Diane Gerlach, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Rudy V. Byron, Jr., M.D., DLSC Case Number 19 MED 304. Motion carried unanimously.

20 MED 393 – Kurt J. Duncan, M.D.

MOTION: Sumeet Goel moved, seconded by Emily Yu, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Kurt J. Duncan, M.D., DLSC Case Number 20 MED 393. Motion carried unanimously.

21 MED 322 – Michael D. D’Amico, M.D.

MOTION: Clarence Chou moved, seconded by Emily Yu, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Michael D. D’Amico, M.D., DLSC Case Number 21 MED 322. Motion carried unanimously.

21 MED 345 – Everett A. Beguin Jr., M.D.

MOTION: Lemuel Yerby moved, seconded by Clarence Chou, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Everett A. Beguin Jr., M.D., DLSC Case Number 21 MED 345. Motion carried unanimously.

21 MED 538 – Eric C. Gowing, M.D.

MOTION: Michael Parish moved, seconded by Emily Yu, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Eric C. Gowing, M.D., DLSC Case Number 21 MED 538. Motion carried unanimously.

21 MED 578 – Maria B. Mainolfi-Palarata, M.D.

MOTION: Clarence Chou moved, seconded by Lemuel Yerby, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Maria B. Mainolfi-Palarata, M.D., DLSC Case Number 21 MED 578. Motion carried unanimously.

22 MED 278 – Lynn M. Budzak, M.D.

MOTION: Lemuel Yerby moved, seconded by Sumeet Goel, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Lynn M. Budzak, M.D., DLSC Case Number 22 MED 278. Motion carried unanimously.

22 MED 127 – David V. Pinto, M.D.

MOTION: Sumeet Goel moved, seconded by Lemuel Yerby, to reject the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against David V. Pinto, M.D., DLSC Case Number 22 MED 127 and to close this case for insufficient evidence. Motion carried unanimously.

22 MED 297 – Norman H. Rechsteiner, M.D.

MOTION: Diane Gerlach moved, seconded by Emily Yu, to adopt the Findings of Fact, Conclusions of Law and Order in the matter of disciplinary proceedings against Norman H. Rechsteiner, M.D., DLSC Case Number 22 MED 297. Motion carried unanimously.

Administrative Warnings

22 MED 018 – K.A.L.

MOTION: Sumeet Goel moved, seconded by Michael Parish, to issue an Administrative Warning in the matter of K.A.L., DLSC Case Number 22 MED 018. Motion carried unanimously.

22 MED 253 – S.D.O.

MOTION: Michael Parish moved, seconded by Diane Gerlach, to issue an Administrative Warning in the matter of S.D.O., DLSC Case Number 22 MED 253. Motion carried unanimously.

22 MED 279 – C.M.G.

MOTION: Lemuel Yerby moved, seconded by Sumeet Goel, to issue an Administrative Warning in the matter of C.M.G., DLSC Case Number 22 MED 279. Motion carried unanimously.

Case Closings

MOTION: Gregory Schmeling moved, seconded by Michael Parish, to close the following DLSC Cases for the reasons outlined below:

1. 21 MED 207 – S.A.K. – No Violation
2. 21 MED 305 – W.R.S. – Prosecutorial Discretion (P1)
3. 21 MED 432 – A.E.H. – Insufficient Evidence
4. 21 MED 511 – J.Y.S. – No Violation
5. 21 MED 512 – S.S., R.A.S. – No Violation
6. 22 MED 092 – J.A.L. – No Violation
7. 22 MED 144 – A.V.R. – No Violation
8. 22 MED 174 – J.A.L. – Prosecutorial Discretion (P1)
9. 22 MED 181 – W.G.K. – No Violation
10. 22 MED 199 – M.K. – No Violation
11. 22 MED 226 – W.M.L. – No Violation
12. 22 MED 287 – D.H.S. – No Violation

Motion carried unanimously.

(Gregory Schmeling was excused at 9:51 a.m.)

22 MED 137 – J.D.S.

MOTION: Michael Parish moved, seconded by Lemuel Yerby, to close DLSC Case Number 22 MED 137, against J.D.S., for No Violation. Motion carried unanimously.

(Sheldon Wasserman recused and left the meeting connection for deliberation and voting in the matter concerning J.D.S., DLSC Case Number 22 MED 137. Clarence Chou presided for the duration of this topic.)

22 MED 229 – A.A.E.

MOTION: Emily Yu moved, seconded by Lemuel Yerby, not to close DLSC Case Number 22 MED 229, against A.A.E. and to refer the case back to DLSC for further action. Motion carried unanimously.

DELIBERATION ON REVIEW OF ADMINISTRATIVE WARNINGS

APPEARANCE: Julie Zimmer, DLSC Attorney, Lori Gendelman, Attorney for Respondent, R.L.S., Respondent: WARN00001506 – DLSC Case Number 22 MED 122 – R.L.S.

MOTION: Clarence Chou moved, seconded by Diane Gerlach, to continue the review of issuance of the administrative warning in the matter of WARN00001506, R.L.S., DLSC Case Number 22 MED 122 at the October meeting, and to authorize Legal Counsel to contact the respondent's attorney. Motion carried unanimously.

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

Monitoring Matters

*Jesse Van Bommel, M.D.
Requesting Full Licensure*

MOTION: Sumeet Goel moved, seconded by Kris Ferguson, to grant the request of Jesse Van Bommel, M.D., for full licensure. Motion carried unanimously.

*Stephen B. Mason, M.D.
Requesting Full Licensure*

MOTION: Lemuel Yerby moved, seconded by Kris Ferguson, deny the request of Stephen B. Mason, M.D., for full licensure, and to grant limited licensure requiring respondent to comply with the provisions of the 1/27/2022 Michigan Board Order. **Reason for Denial:** Failure to demonstrate continuous and successful compliance. Respondent needs to fully comply with the complete terms and conditions of the original Board Order (8/21/2019). Motion carried unanimously.

CREDENTIALING MATTERS

Application Reviews

Jason Wilson, Medicine and Surgery (MD/DO) Renewal Applicant

MOTION: Sumeet Goel moved, seconded by Clarence Chou, to continue review of the Medicine and Surgery (MD) renewal application of Jason Wilson, at the October meeting. Motion carried unanimously.

RECONVENE TO OPEN SESSION

MOTION: Diane Gerlach moved, seconded by Lemuel Yerby, to reconvene to Open Session. Motion carried unanimously.

The Board reconvened to Open Session at 12:01 p.m.

VOTE ON ITEMS CONSIDERED OR DELIBERATED UPON IN CLOSED SESSION

MOTION: Clarence Chou moved, seconded by Emily Yu, 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: Lemuel Yerby moved, seconded by Emily Yu, to delegate ratification of examination results to DSPS staff and to ratify all licenses and certificates as issued. Motion carried unanimously.


ADJOURNMENT

MOTION: Clarence Chou moved, seconded by Lemuel Yerby, to adjourn the meeting. Motion carried unanimously.

The meeting adjourned at 12:03 p.m.

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Nilajah Hardin, Administrative Rules Coordinator		2) Date when request submitted: 10/07/22 Items will be considered late if submitted after 12:00 p.m. on the deadline date which is 8 business days before the meeting	
3) Name of Board, Committee, Council, Sections: Medical Examining Board			
4) Meeting Date: 10/19/22	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Administrative Rule Matters – Discussion and Consideration 1. Drafting Proposals: Med 26, Relating to Military Medical Personnel 2. Pending or Possible Rulemaking Projects a. Rule Projects Chart	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <i>(If yes, please complete Appearance Request for Non-DSPS Staff)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if required: N/A	
10) Describe the issue and action that should be addressed: Attachments: Med 26 Draft Rule Text Med 26 Adjacent State Analysis 2021 WI Act 158 Rule Project Chart (Board Rule projects can be Viewed Here if Needed: https://dsps.wi.gov/Pages/RulesStatutes/PendingRules.aspx)			
11) Authorization			
 Signature of person making this request		10/07/22 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.			

Chapter Med 26
MILITARY MEDICAL PERSONNEL

Med 26.01 Authority and Purpose. The rules in this chapter are adopted by the Medical Examining Board pursuant to the authority delegated by ss. 15.08 (5) (b) and 448.40 (1m), Stats.

Med 26.02 Definitions.

- (1) “Board” means the Medical Examining Board.
- (2) “Community-based residential facility” has the meaning given in s. 50.01 (1g), Stats.
- (3) “Department” means the Department of Safety and Professional Services.
- (4) “Inpatient health care facility” has the meaning given in s. 50.135 (1), Stats.
- (5) “Military medical personnel” has the meaning given in s. 440.077 (1) (d), Stats.
- (6) “Residential care apartment complex” has the meaning given in s. 50.01 (6d), Stats.
- (7) “Skilled health services” has the meaning given in s. 440.077 (1) (h), Stats.

Med 26.03 Minimum Practice Standards. Each military medical personnel shall satisfy all of the following requirements in order to participate in the program specified under s. 440.077 (2) (a), Stats:

- (1) Pursuant to s. 440.077 (3) (a), Stats., notify the department of their timeline to acquire a license.
- (2) Complete the Memorandum of Understanding form outlined in Med 26.05.
- (3) Practice skilled health services that reflect their individual training and experience under a supervisor as outlined in Med 26.04.
- (4) Practice under supervision at any of the following locations:
 - (a) A community-based residential facility.
 - (b) An inpatient health care facility.
 - (c) A residential care apartment complex.

Med 26.04 Supervision. (1) Each military medical personnel participating in the program specified under s. 440.077 (2) (a), Stats. shall practice under the supervision of any of the following Wisconsin licensed healthcare practitioners:

- (a) Advanced practice nurse prescriber certified under s. 441.16 (2), Stats;
 - (b) Physician licensed under s. 448.03 (1), Stats;
 - (c) Physician assistant licensed under s. 448.974 (1), Stats;
 - (d) Podiatrist licensed under s. 448.63 (1), Stats; or,
 - (e) Registered professional nurse licensed under s. 441.06, Stats.
- (2) The supervising healthcare practitioners under sub. (1) shall retain responsibility for the care of any patient treated by the military medical personnel.

Med 26.05 Memorandum of Understanding. The Memorandum of Understanding form for military medical personnel shall contain all of the following information:

- (1) A description of all relevant military or civilian healthcare training.
- (2) A detailed list of scope of practice duties.
- (3) The signature of the program participant.
- (4) The signature of the supervising healthcare practitioner.

Med 26.06 Extension of Timeline to Obtain Licensure. An extension of the timeline required under s. 440.077 (3) (a), Stats., may be requested by a program participant and must be approved by the Board. A maximum of one extension request may be granted by the Board to each military medical personnel program participant.

DRAFT

Comparison with rules in adjacent states:

Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of the practice of medicine in Illinois, with input from the Illinois State Medical Board. The Illinois Department is also responsible for the promulgation of rules to implement certain sections of the Illinois Medical Practice Act of 1987. This Act contains requirements for applications, licensure, and discipline for physicians [225 Illinois Compiled Statutes ch. 60]. The rules in the Illinois Administrative Code include requirements for education programs, visiting physician permits, and disciplinary proceedings, among others. [Illinois Administrative Code Title 68, ch. 7, s. 1285]. Neither the Illinois statutes nor the administrative rules for medical practice include requirements for military medical personnel. The Illinois Service Member Employment and Reemployment Rights Acts includes general provisions for employment for all military personnel, but none are specific to medical or healthcare practice [330 Illinois Compiled Statutes ch. 61].

Iowa: The Iowa Board of Medicine is responsible for the licensure and regulation of medicine and surgery in Iowa. Chapter 148 of the Iowa Code includes statutory requirements for licensure, composition and powers of the Iowa Board, and discipline for physicians [Iowa Code ch. 148]. The Iowa Administrative Code includes rules relating to medical practice. These requirements also include rules on military service and veteran reciprocity. Military service members can apply to have their service and training counted for credit toward licensure as a medical physician or surgeon, osteopathic physician or surgeon, or licensed acupuncturist. Veterans can apply for provisional licensure to service members who are licensed in another jurisdiction with a credential that is not substantially equivalent to an Iowa license. This provisional license allows for that Veteran to obtain the additional experience or education needed for a regular Iowa license. Iowa also has rules for reciprocal licensure for veterans and their spouses that are licensed in other jurisdictions and that license is substantially equivalent to an Iowa license [653 Iowa Administrative Code ch. 18]. The Iowa statutes and rules for medicine and surgery do not include requirements specifically for military medical personnel supervision and practice.

Michigan: The Michigan Board of Medicine is responsible for the licensure and regulation of medical practice in Michigan. Act 368 Article 15 Part 170 of the Michigan Compiled Laws includes the regulations for medicine in Michigan, among several other occupations. Some of the requirements in this part include those for licensure, informed consent, and duties of the Michigan Board. This part of the Michigan rules also includes requirements for physician assistants and genetic counselors in addition to physicians. [Michigan Compiled Laws ss. 333.17001-333.17097]. The Michigan rules for medicine do not include requirements specifically for military medical personnel supervision and practice.

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of medicine in Minnesota. Part 6800 of the Minnesota Administrative Code includes requirements for licensure, continuing education, and hearings before the Minnesota Board. [Minnesota Administrative Rules part 5600]. Chapter 147 of the Minnesota Statutes, or the Minnesota Medical Practice Act, also includes requirements for licensure, practice, and discipline for physicians [Minnesota Statutes ch. 147]. Chapter 197 of the Minnesota Statutes includes requirements for expedited licensing processing and temporary licensure for former and

current military personnel. The expedited licensing process is for those service members who are otherwise qualified to obtain licensure in an efficient manner. The temporary license process allows certain qualified service members who are licensed in another state to practice while waiting for a regular license to be granted [Minnesota Statutes ch. 197]. The Minnesota statutes and rules for medicine do not include requirements specifically for military medical personnel supervision and practice.

State of Wisconsin



2021 Assembly Bill 720

Date of enactment: **March 8, 2022**

Date of publication*: **March 9, 2022**

2021 WISCONSIN ACT 158

AN ACT *to amend* 441.06 (4) and 448.61; and *to create* 440.077, 448.03 (2) (bm) and 448.40 (1m) of the statutes; **relating to:** practice of certain skilled health services by military medical personnel, extending the time limit for emergency rule procedures, providing an exemption from emergency rule procedures, and granting rule-making authority.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 440.077 of the statutes is created to read:
440.077 Military medical personnel program. (1)

In this section:

(a) "Advanced practice nurse prescriber" means an advanced practice nurse prescriber certified under s. 441.16 (2).

(am) "Community-based residential facility" has the meaning given in s. 50.01 (1g).

(b) "Disease" means any pain, injury, deformity, physical or mental illness, or departure from complete health or the proper condition of the human body or any of its parts.

(c) "Inpatient health care facility" has the meaning given in s. 50.135 (1).

(d) "Military medical personnel" means a person who has served as an army medic, a navy or coast guard corpsman, or an air force aerospace medical technician in the U.S. armed forces and who was discharged or released from such service in the previous 12 months under honorable or general conditions.

(e) "Physician assistant" has the meaning given in s. 448.971 (2).

(f) "Podiatrist" has the meaning given in s. 448.60 (3).

(g) "Registered professional nurse" means a registered nurse who is licensed under ch. 441 or who holds a multistate license, as defined in s. 441.51 (2) (h), issued in a party state, as defined in s. 441.51 (2) (k).

(gm) "Residential care apartment complex" has the meaning given in s. 50.01 (6d).

(h) 1. "Skilled health services" means any of the following:

a. To examine into the fact, condition, or cause of human health or disease, or to treat, operate, prescribe, or advise for the same, by any means or instrumentality.

b. To apply principles or techniques of medical sciences in the diagnosis or prevention of any of the conditions in subd. 1. a. and par. (b).

c. To penetrate, pierce, or sever the tissues of a human being.

d. To offer, undertake, attempt, or hold oneself out in any manner as able to do any of the acts described in this paragraph.

2. "Skilled health services" does not include surgical procedures or issuing prescription orders.

* Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

(2) (a) The department, in collaboration with the department of veterans affairs, the medical examining board, and the board of nursing, shall establish a program in which military medical personnel may temporarily perform certain skilled health services while supervised in an inpatient health care facility, outpatient health care facility, community-based residential facility, or a residential care apartment complex without having to obtain a license under s. 441.06, 441.10, 448.04, 448.61, or 448.974.

(b) Under the program under par. (a), the services that a military medical personnel may provide shall reflect the level of training and experience of the military medical personnel. Before performing any services under the program under par. (a), the military medical personnel shall complete and sign a memorandum of understanding on a form prescribed by the medical examining board and shall submit the memorandum of understanding to their employer. The memorandum of understanding shall detail the military medical personnel's scope of practice.

(c) Under the program under par. (a), a participating military medical personnel shall be supervised by a physician, physician assistant, podiatrist, registered professional nurse, or advanced practice nurse prescriber. The supervising physician, physician assistant, podiatrist, registered professional nurse, or advanced practice nurse prescriber shall retain responsibility for the care of the patient.

(3) (a) In order to participate in the program under sub. (2) (a), a military medical personnel shall establish a reasonable timeline with his or her employer that describes the actions the military medical personnel intends to take to acquire a license under s. 441.06, 441.10, 448.04, 448.61, or 448.974 including the date by which the military medical personnel agrees to acquire the license. The military medical personnel shall submit the timeline to the department on a form provided by the department.

(b) A military medical personnel becomes ineligible to participate in the program under sub. (2) (a) beginning on the day after the date that the military medical personnel agreed to acquire a license under par. (a).

(c) The timeline to acquire a license under par. (a) may not be longer than is reasonably necessary considering the license the military medical personnel intends to acquire, his or her education and experience, and any other relevant factors.

(d) The medical examining board may extend the timeline under par. (a) if it appears that, because of unforeseen circumstances, the applicant requires more time to receive a license under s. 441.06, 441.10, 448.04, 448.61, or 448.974.

(4) The medical examining board shall oversee the operations of the program under sub. (2) (a).

(5) The department may promulgate any rules necessary for the administration of this section.

SECTION 2. 441.06 (4) of the statutes is amended to read:

441.06 (4) Except as provided in ~~s. ss. 257.03 and 440.077~~, no person may practice or attempt to practice professional nursing, nor use the title, letters, or anything else to indicate that he or she is a registered or professional nurse unless he or she is licensed under this section. Except as provided in ~~s. ss. 257.03 and 440.077~~, no person not so licensed may use in connection with his or her nursing employment or vocation any title or anything else to indicate that he or she is a trained, certified or graduate nurse. This subsection does not apply to any registered nurse who holds a multistate license, as defined in s. 441.51 (2) (h), issued by a jurisdiction, other than this state, that has adopted the enhanced nurse licensure compact under s. 441.51.

SECTION 3. 448.03 (2) (bm) of the statutes is created to read:

448.03 (2) (bm) The activities of military medical personnel, as defined in s. 440.077 (1) (d), while supervised under s. 440.077.

SECTION 4. 448.40 (1m) of the statutes is created to read:

448.40 (1m) The board may promulgate rules to establish minimum standards for military medical personnel, as defined in s. 440.077 (1) (d), who perform skilled health services, as defined in s. 440.077 (1) (g), that are supervised under s. 440.077.

SECTION 5. 448.61 of the statutes is amended to read:

448.61 License required. Except as provided in ss. 257.03, ~~440.077~~, and 448.62, no person may practice podiatry, designate himself or herself as a podiatrist, use or assume the title "doctor of surgical chiropody", "doctor of podiatry" or "doctor of podiatric medicine", or append to the person's name the words or letters "doctor", "Dr.", "D.S.C.", "D.P.M.", "foot doctor", "foot specialist" or any other title, letters or designation which represents or may tend to represent the person as a podiatrist unless the person is licensed under this subchapter.

SECTION 6. Nonstatutory provisions.

(1) The department of safety and professional services may promulgate emergency rules under s. 227.24 to implement s. 440.077 (5). Notwithstanding s. 227.24 (1) (c) and (2), emergency rules promulgated under this subsection remain in effect until December 1, 2023, or the date on which permanent rules take effect, whichever is sooner. Notwithstanding s. 227.24 (1) (a) and (3), the department of safety and professional services is not required to provide evidence that promulgating a rule under this subsection as emergency rules is necessary for the preservation of public peace, health, safety, or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection.

(2) The medical examining board may promulgate emergency rules under s. 227.24 to establish minimum standards for military medical personnel under s. 448.40

2021 Assembly Bill 720

– 3 –

2021 Wisconsin Act 158

(1m). Notwithstanding s. 227.24 (1) (c) and (2), emergency rules promulgated under this subsection remain in effect until December 1, 2023, or the date on which permanent rules take effect, whichever is sooner. Notwithstanding s. 227.24 (1) (a) and (3), the medical examining board is not required to provide evidence that promulgating a rule under this subsection as emergency rules is necessary for the preservation of public peace, health, safety,

or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection.

SECTION 7. Effective dates. This act takes effect on April 2, 2022, or on the day after publication, whichever is later, except as follows:


(1) SECTION 6 of this act takes effect on the day after publication.

**Medical Examining Board
Rule Projects (updated 10/07/22)**

Clearinghouse Rule Number	Scope #	Scope Expiration	Code Chapter Affected	Relating clause (description)	Current Stage	Next Step
Not Assigned Yet	012-21	08/08/2023	Med 10	Performance of Physical Examinations (Chaperones and Observers during Physical Examinations)	Clearinghouse Review	Public Hearing Anticipated for November 16, 2022 Meeting
20-053	094-20	01/20/2023	Med 13	Continuing Medical Education (Physician use of Electronic CE Tracking)	Legislative Review After 01/03/2023	Adoption
Not Assigned Yet	035-22	10/25/2024	Med 13	Continuing Medical Education (Controlled Substances Prescribing CE)	Clearinghouse Review	Public Hearing Anticipated for December 21, 2022 Meeting
Not Assigned Yet	Not Assigned Yet	Not Assigned Yet	Med 20	Respiratory Care Practitioner Examinations (RCP Jurisprudence Exam)	Project on hold pending results of spring 2022 test software update	N/A
Not Assigned Yet	044-22	11/23/2024	Med 26	Military Medical Personnel	Drafting	Board Approval of Emergency and Preliminary Rule Drafts

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Nilajah Hardin, Administrative Rule Coordinator		2) Date when request submitted: 10/07/22 <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: 10/19/22	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Board Opioid Abuse Goal Setting and Report Pursuant to Wis. Stat. § 440.035(2m)(c)	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed: <p>Pursuant to Wis. Stat. § 440.035(2m)(c) the Board is required to annually set and act on goals to address the issue of opioid abuse. Additionally, this statute requires the Board to submit a report detailing efforts taken to achieve its goals. The reporting timeframe runs from November 1 thru October 31 of the following year.</p> <p>Board Action: Discuss and Take Action as Necessary on Opioid Abuse Report Goals. (Opioid Abuse Report Liaison has delegated authority to review and approve the report for 2022).</p> <p>Attachments: 2021 Report</p>			
11)  Signature of person making this request		Authorization 10/07/22 Date	
Supervisor (Only required for post agenda deadline items)		Date	
Executive Director signature (Indicates approval for post agenda deadline items)		Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the Agenda Items folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

Sheldon Wasserman
Chairperson

WISCONSIN MEDICAL EXAMINING BOARD

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Wisconsin Medical Examining Board (MEB) Wis. Stat. s 440.035 (2m) Report on Opioid Abuse – December 2021

Proactive Efforts Taken by the Board to Address the Issue of Opioid Abuse

Continuing Education Related to Prescribing Controlled Substances

The MEB's goal, as stated in its 2020 Act 262 Report, was to have rules in place at the beginning of the 2021-2023 biennium that would extend the requirement for the completion of continuing medical education related to prescribing controlled substances through the end of that biennium. The objective of that rule was to continue to promote best practices for prescribing controlled substances, and it has recently added stimulants to the CE requirement. The Board finalized a rule in March 2021 extending the 2-credit requirement. Over 100 opioid prescribing courses have been approved. In addition, the MEB conducts a random audit of continuing education in each biennium to verify proof of attendance.

Statewide Outreach

Through its partnership with the Wisconsin Department of Safety and Professional Services (DSPS), the Board will continue to develop its established collaborative relationship with the Wisconsin Enhanced Prescription Drug Monitoring Program (ePDMP). The ePDMP is a tool to help combat the ongoing prescription drug abuse epidemic in Wisconsin. By providing information about controlled substance prescriptions that are dispensed in the state, it aids healthcare professionals in their prescribing and dispensing decisions. The ePDMP also fosters the ability of pharmacies, healthcare professionals, law enforcement agencies, and public health officials to work together to reduce the misuse, abuse, and diversion of prescribed controlled substance medications. More information is available on the ePDMP website: <https://pdmp.wi.gov/> In addition, the Wisconsin Controlled Substances Board (CSB) Referral Criteria Work Group (also administered by DSPS) uses ePDMP data to determine whether to refer prescribing concerns to the MEB. Its Annual and Quarterly ePDMP Reports are published on the CSB website.

National Outreach and Leadership

The MEB is a member of the Federation of State Medical Boards (FSMB). Dr. Kenneth Simons, former member and Chair of the MEB, served as Chair of the Board of Directors for the FSMB in 2021. During his term, the FSMB undertook several initiatives related to opioid abuse, including the launch of the Opioid Regulatory Collaborative, a new partnership among state regulatory boards that license U.S. physicians, physician assistants, pharmacists, nurses and dentists, aimed at addressing the nation's opioid epidemic. In addition, the FSMB plays an important national and international role in providing education on the issue of opioid abuse. Its Journal of Medical Regulation published an article in its April 2021 Issue on "Saskatchewan Physician's Opinions of Their Personalized Prescribing Profiles Related to Opioids, Benzodiazepines, Stimulants, and Gabapentin." In its July 2021 Issue, an article on

“The Adoption and Increased Use of Electronic Prescribing of Controlled Substances” was published. Board members have also participated in the FSMB Annual Meeting in past years, which is an educational and networking forum for physician regulators. The topic of opioid prescribing, which a recent FSMB annual survey of state medical boards found to be the most important topic facing state boards, is often a topic on the Annual Meeting agenda.

Opioid Prescribing Guideline

In July 2016, the Board issued its Opioid Prescribing Guideline. The Guideline, which encourages providers to implement best practices for responsible prescribing, was developed using the Centers for Disease Control and Prevention’s Guideline for Prescribing Opioids for Chronic Pain and the Wisconsin Department of Workforce Development’s Chronic Opioid Clinical Management Guidelines for Wisconsin Worker’s Compensation Patient Care as primary resources. The Guideline was updated in 2019 and remains in place. The Board continues to monitor the Guideline. The Guideline is posted on the Department’s website and is available here:

<https://dsps.wi.gov/Documents/BoardCouncils/MED/MEBGuidelinesv9.pdf>

2022 Goals for Addressing the Issue of Opioid Abuse as it Relates to the Practice of Medicine and Surgery in Wisconsin

Goal 1: Continuing Education Related to Prescribing Controlled Substances

The Board’s goal is to continue to promote best practices for prescribing controlled substances in alignment with current data, including Board evaluation of its 2-hour opioid continuing education requirement and Department review of courses on opioid prescribing that may be used to meet the requirement.

Goal 2: Take Enforcement Action When Appropriate

The Board’s goal is to, independently and in partnership with the Controlled Substances Board Referral Criteria Work Group, continue to proactively investigate physicians whose prescriptive practices with opioids may be inconsistent with the standard of minimally competent medical practice. In addition, the Board will continue to exercise its disciplinary authority to hold practitioners accountable for opioid diversion and abuse.

Goal 3: Opioid Prescribing Guideline

The Board will continue to monitor its prescribing Guideline and make updates as needed to keep it current and relevant to physicians and their patients.

Goal 4: Track and Monitor Physician Prescribing of Controlled Substances

The MEB will continue to explore ways to leverage the expertise of the ePDMP to effectively track and monitor physician prescribing of controlled substances and to identify opioid abuse trends. This may include discussions at Board meetings with ePDMP staff and/or review of CSB referrals, PDMP and CSB data and reports.

Goal 5: Continued Outreach and Leadership

The Board will continue to explore avenues independently and with other organizations such as the ePDMP and the FSMB to advance its active participation in statewide and national efforts to combat opioid abuse.

Actions taken by the Board to Achieve the Goals Identified in 2021 and Previous Reports

Goal 1: Continuing Education Related to Prescribing Controlled Substances

One of the Board's goals in 2020 was to assess the need to extend the requirement to complete continuing medical education related to prescribing controlled substances into the future. **Update:** The Board finalized a rule in March 2021 extending the requirement through the Board's renewal period that concludes in 2023.

Goal 2: Enforcement Action

The Board's goal is to, in partnership with the Controlled Substances Board, continue to proactively investigate physicians whose prescriptive practices with controlled substances may be inconsistent with the standard of minimally competent medical practice. **Update:** The Board has continued to proactively investigate physicians whose prescriptive practices with controlled substances may be inconsistent with the standard of minimally competent medical practice. They have done this in response to complaints directly from the public and in partnership with the CSB Referral Criteria Work Group, which reviews reports generated from the ePDMP to determine whether physicians will be referred to the MEB for possible investigation. Through December 8, 2022, the CSB Referral Criteria Work Group had referred 10 cases to the MEB for further review.

Goal 3: Opioid Prescribing Guideline

The Board continues to monitor its Opioid Prescribing Guideline to ensure it is current and relevant to physicians and their patients. **Update:** The Guideline was monitored throughout 2021.

Goal 4: Continued Outreach and Leadership

As the Board recently experienced a significant change in its membership and leadership, it is the Board's goal to explore avenues through which it can continue its active participation in the statewide and national efforts to combat opioid abuse. **Update:** The Medical Examining Board (MEB) appointed Dr. Kris Ferguson, an Anesthesiologist and Pain Management specialist, to serve as the Board's representative on the State of CSB. The MEB includes a report from the CSB as a standing item on its monthly meeting agendas. The CSB's core functions include oversight of the Prescription Drug Monitoring Program (ePDMP), referral of licensees to their disciplinary Boards due to dangerous prescribing practices through CSB Referral Criteria Workgroup, controlled substances drug scheduling, holding an annual hearing with law enforcement agencies and prosecutors to receive information on drug trends, and issuance of Special Use Authorization (SUA) Permits for controlled substances.

The ePDMP is increasingly important as a means for the CSB and the MEB to address the issue of opioid abuse. The ePDMP publishes quarterly reports and an interactive Public Statistics Dashboard that serve to proactively monitor licensees and their prescribing and dispensing practices for suspicious or critically dangerous conduct and when appropriate, to guide the CSB in its referral decisions. The ePDMP also tracks dispensing trends, such as the top 15 most dispensed monitored prescription drugs, and patient prescription history. Advanced data analytics empower the ePDMP to alert ePDMP users to potential indications of abuse or diversion, such as high daily dose and concurrent benzodiazepine

and opioid prescription notifications. The ePDMP also receives referrals from Wisconsin law enforcement agencies. The latest CSB ePDMP Quarterly Report is available on the CSB webpage: <https://dsps.wi.gov/Pages/BoardsCouncils/CSB/Reports.aspx>

In addition to the ePDMP online resources, the Medical Examining Board will continue to develop its online resources through the DSPS website. A link to the ePDMP website is available on the CSB's webpage. Agendas and minutes of MEB and CSB meetings are available on the DSPS website. The MEB's Prescribing Guideline is published on its website. The CSB ePDMP Quarterly Reports and CSB Annual Report are posted on the CSB website.

Finally, the CSB maintains a statutory position on the State Council on Alcohol and Other Drug Abuse (SCAODA), which provides leadership and coordination of alcohol and other drug abuse issues confronting the state. More information about SCAODA is available here: <https://www.dhs.wisconsin.gov/scaoda/index.htm>

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

AGENDA REQUEST FORM

1) Name and title of person submitting the request: Kimberly Wood, Program Assistant Supervisor		2) Date when request submitted: 10/3/2022 <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: 10/19/2022	5) Attachments: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6) How should the item be titled on the agenda page? Newsletter Matters • October 2022 Newsletter Distribution Report	
7) Place Item in: <input checked="" type="checkbox"/> Open Session <input type="checkbox"/> Closed Session	8) Is an appearance before the Board being scheduled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9) Name of Case Advisor(s), if applicable: N/A	
10) Describe the issue and action that should be addressed: <u>October 2022 Newsletter Distribution Report:</u> The Board should review the enclosed distribution report for the most recently transmitted newsletter. Review and discuss as needed. Also see the document entitled "Information on Review of Bulletin Detail Reports" to better understand the distribution data. (Attachments: "Information on Review of Bulletin Detail Reports" & "October 2022 Bulletin Details Report")			
11) Authorization			
<i>Kimberly Wood</i>		10/3/2022	
Signature of person making this request		Date	
Supervisor (Only required for post agenda deadline items)		Date	
Executive Director signature (Indicates approval for post agenda deadline items)		Date	
Directions for including supporting documents: 1. This form should be saved with any other documents submitted to the Agenda Items folders. 2. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a meeting.			

GovDelivery (Granicus)

Information on Review of Bulletin Detail Reports

Channel and Deployment Summary

In this section of the report, you can see how many subscribers received the bulletin, which channels were used to send the bulletin, the percent delivered, and the percentage of Pending, Bounced, Opens and Clicks.

Recipient Number	Number of subscribers who received the bulletin
Channels	A green check mark indicates whether the bulletin was sent via Email, SMS, Facebook, Twitter, and/or RSS
Pending	The percentage of bulletins that are pending delivery
Open Rate	Percentage of emails that were opened (Unique Emails Opened divided by Emails Delivered).
Click Rate	The percentage of unique clicks out of all recipients of the message.

Landing Page Links

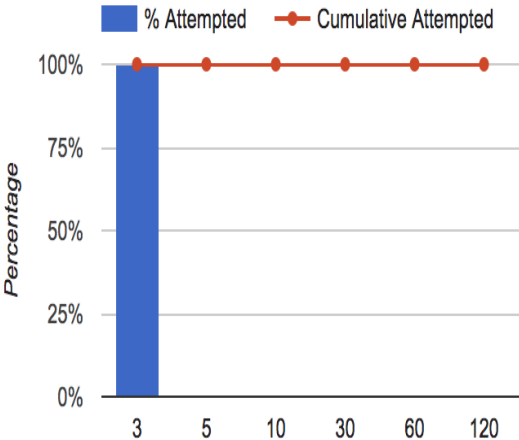
If your bulletin included links to one or more [Landing Pages](#), there will be an additional section in this report listing the landing page links in your bulletin, which anchor they point to (if any), and the number of unique and total clicks for each of the links. This makes it easy to see and track the engagement of your landing pages. This information is also included at the bottom of the report in the [Bulletin Link Overview](#).

Landing Page Links			
NAME	ANCHOR	UNIQUE CLICKS	TOTAL CLICKS
Summer Fundraiser Page	#Donate-CAD	3	3
Summer Fundraiser Page	#Donate-USD	3	3
Summer Fundraiser Page	#Donate-EUR	1	1
Summer Fundraiser Page	#Donate-GBP	1	1

Email Delivery Stats

The Email Delivery Stats section will show how quickly the email was delivered over time. In the example below, the bulletin fully deployed within 3 minutes.

Email Delivery Stats



Minutes	Cumulative Attempted
3	100%
5	100%
10	100%
30	100%
60	100%
120	100%

Delivery Metrics and Bulletin Analytics

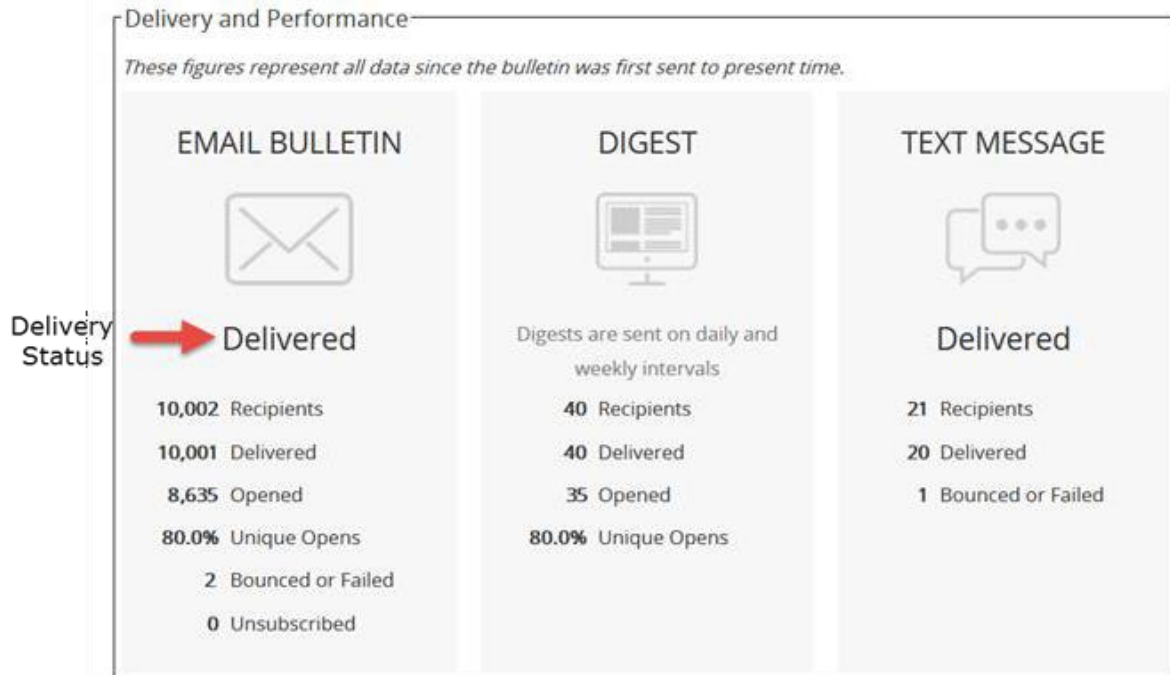
This section shows information relating to the bulletin delivery and subscriber engagement activity with the bulletin. The metrics include:

Delivery Metrics - Details	Bulletin Analytics
8,061 Total Sent	1,364 Total Opens
7,807 (97%) Delivered	937 (12%) Unique Opens
0 (0%) Pending	158 Total Clicks
254 (3%) Bounced	147 (2%) Unique Clicks
21 (0%) Unsubscribed	12 # of Links

- **Total Sent** - The number of bulletins sent from your account; includes all email, wireless, and digested message recipients.
- **Delivered** - The number of bulletins successfully delivered to the recipients' email server or wireless service; includes all email, wireless, and digested message recipients.
- **Pending** - The number of recipients whose bulletins are pending delivery.
- **Bounced** - The number of messages that failed to be successfully handed off to the recipients' servers
- **Unsubscribed** - The total number of recipients who unsubscribed from a topic using the one-click unsubscribe link found in the standard footer of a message delivered with govDelivery. Note that your organization has the option of customizing your message footers and excluding this link. For more information about one-click unsubscribe, see Reserved Macros in [Macros](#).
- **Cumulative Attempted** - The cumulative percentage of emails marked in their final state as either 'delivered' or 'failed' since the time the bulletin started.
- **Total Opens** - Number of emails that were opened by immediate email recipients.
- **Unique Opens** - Number of bulletins opened by recipients. For the open to be recorded, the embedded web beacon included in the bulletin must render. Therefore, this value does not include bulletins opened in text-only email clients or many wireless devices. Only the unique opens are counted (i.e., if a recipient opens the bulletin three times, only one open will be counted).
- **Total Clicks** - Total number of links clicked by immediate email recipients. **Note:** This section only collects link tracking metrics for 15 days after the bulletin is sent. For more up-to-date link tracking, see the Bulletin Links Overview section of this report.
- **Unique Clicks** - The number of recipients who clicked a link included in the bulletin. The link must contain the redirect (tracking code) added by govDelivery and the mail sender. The link will typically open the client's site. **Note:** This section only collects link tracking metrics for 15 days after the bulletin is sent. For more up-to-date link tracking, see the Bulletin Links Overview section of this report.
- **# of Links** - Number of links that were included in the bulletin. For example, a bulletin that includes 2 links was sent to 100 recipients. Thus, the Bulletin Links Included count is 2.

Delivery Performance Overview

The Delivery Performance section lets you see the volume of subscribers receiving bulletins through these channels and monitor delivery and open metrics for each. These metrics include:



- **Delivery Status (unlabeled)** - The status will display as **Sending** until all bulletins have been delivered through this channel. Once all bulletins have been sent, this status will change to **Delivered**. This status doesn't apply to digest bulletins.
- **Recipients** - The total number of potential recipients through this channel.
- **Delivered** - The total number of recipients to whom bulletins were successfully delivered through this channel. This metric excludes all failed/bounced bulletins.
- **Opened** - This metric reflects the number of bulletins opened by recipients. For the open to be recorded, the embedded web beacon included in the bulletin must render. Therefore, this value does not include bulletins opened in text-only email clients or many wireless devices. Only the unique opens are counted (i.e., if a recipient opens the bulletin three times, only one open will be counted).
- **Unique Opens** - This metric is the percentage of emails that were opened (Unique Opens divided by Total Delivered).
- **Bounced or Failed** - The number of messages that failed to be successfully handed off to the recipients' servers.
- **Unsubscribed** - The number of recipients who unsubscribed from the topic from a bulletin sent via this channel.

Bulletin Link Overview

In the Bulletin Link Overview, see the web addresses for each link that was included in the bulletin, how many Unique Clickers and Total Clicks each link received, and the email addresses for those who clicked. You can also click through the web address URL to see link performance across other bulletins (if the particular link was used in previously sent bulletins). Click through the numbers in the click columns to see the email addresses for those who clicked on the associated link.

Link URL	Unique Clicks	Total Clicks
https://www.govdelivery.com/blog/plain-language-series-part-1-planning-m...	56	61
https://www.govdelivery.com/blog/important-acronym-youve-never-heard/	39	45
https://www.govdelivery.com/blog/tips-optimizing-internal-communications/	40	44
https://www.govdelivery.com/blog/govdelivery-named-2016-international-da...	24	25
https://www.govdelivery.com/blog/?utm_content=mktg&utm_medium=bulletin&u...	24	24
https://content.govdelivery.com/accounts/GD_MKTG/bulletins/14e9a0a	18	21
https://www.govdelivery.com/blog/welcome-govdeliverys-new-user-experience/	19	19
https://public.govdelivery.com/accounts/GD_MKTG/subscriber/one_click_uns...	16	16
http://www.govdelivery.com?utm_content=mktg&utm_medium=bulletin&utm_name...	7	7
https://public.govdelivery.com/accounts/GD_MKTG/subscriber/new?preferenc...	3	3
http://www.linkedin.com/company/42382?utm_content=mktg&utm_medium=bullet...	2	3
http://www.govdelivery.com/?utm_content=mktg&utm_medium=bulletin&utm_nam...	2	2
http://www.facebook.com/govdelivery?utm_content=mktg&utm_medium=bulletin...	1	1
https://subscriberhelp.govdelivery.com/	1	1
http://www.twitter.com/govdelivery?utm_content=mktg&utm_medium=bulletin&...	0	0

Last Updated on 06/23/2016 10:40 AM CDT

The "Last Updated" stamp at the bottom of the report, just below the Bulletin Link Overview Box, communicates when the statistics for that individual bulletin were last made current. You can use this date and time to know exactly how up-to-date your deliveries, opens, clicks and more.

Subject: Wisconsin Medical Examining Board Newsletter
 Sent: 10/03/2022 08:52 AM CDT
 Sent By: Kimberly.Wood@wisconsin.gov
 Sent To: Subscribers of Medical Examining Board

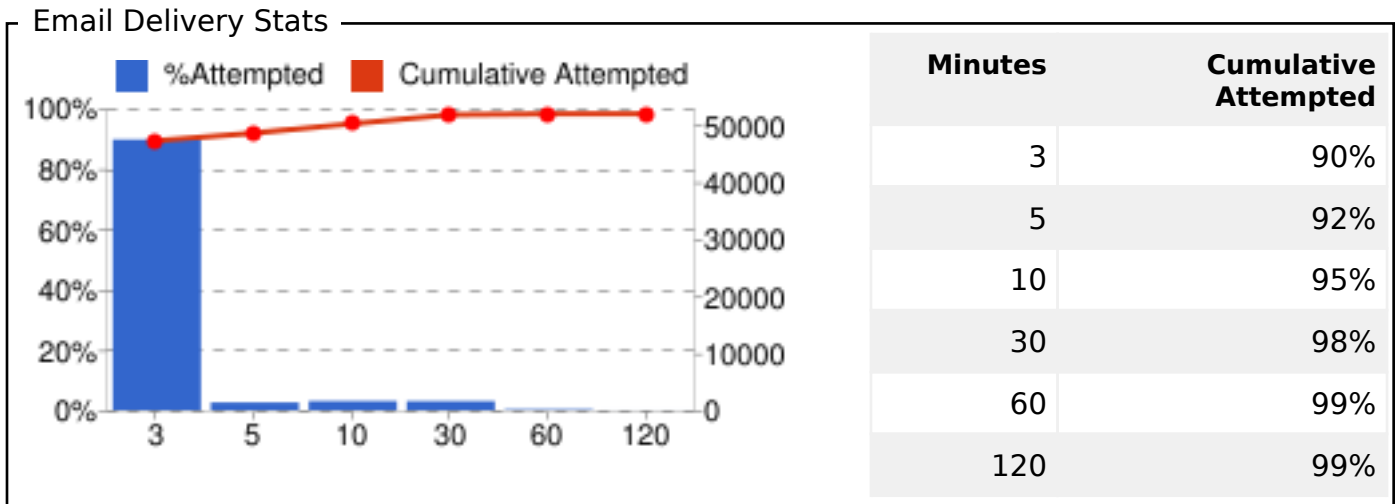
52,899
 Recipients

- ✓ Email
- ✗ SMS
- ✗ Facebook
- ✗ Twitter
- ✓ RSS

95%
 Delivered



0% Pending
 5% Bounced
 32% Open Rate
 17% Click Rate



Delivery Metrics - Details

- 52,899** Total Sent
- 50,122 (95%)** Delivered
- 0 (0%)** Pending
- 2,777 (5%)** Bounced
- 0 (0%)** Unsubscribed

Bulletin Analytics

- 24,028** Total Opens
- 16234 (32%)** Unique Opens
- 12,776** Total Clicks
- 8524 (17%)** Unique Clicks
- 74** # of Links

Delivery and performance

These figures represent all data since the bulletin was first sent to present time.

	Progress	% Delivered	Recipients	# Delivered	Opened Unique	Bounced/Failed	Unsubscribes
Email Bulletin	Delivered	94.7%	52,668	49,891	16234 / 32.5%	2,777	0
Digest	n/a	n/a	231	231	0 / 0.0%	0	0
SMS Message	Delivered	0.0%	0	0	n/a	0	n/a

Link URL	Unique Clicks	Total Clicks
https://online.drl.wi.gov/decisions/2022/ORDER0008125-000...	287	511
https://online.drl.wi.gov/decisions/2022/ORDER0007980-000...	365	483
https://online.drl.wi.gov/decisions/2022/ORDER0008022-000...	266	373
https://online.drl.wi.gov/decisions/2022/ORDER0007979-000...	181	340
https://online.drl.wi.gov/decisions/2022/ORDER0007935-000...	240	340
https://online.drl.wi.gov/decisions/2022/ORDER0008019-000...	222	333
https://online.drl.wi.gov/decisions/2022/ORDER0003234-000...	247	333
https://online.drl.wi.gov/decisions/2022/ORDER0008045-000...	214	323
https://online.drl.wi.gov/decisions/2022/ORDER0008123-000...	212	322
https://online.drl.wi.gov/decisions/2022/ORDER0002362-000...	194	302
https://online.drl.wi.gov/decisions/2022/ORDER0008021-000...	204	300
https://online.drl.wi.gov/decisions/2022/ORDER0008019-000...	200	299
https://online.drl.wi.gov/decisions/2022/ORDER0008121-000...	200	285
https://online.drl.wi.gov/decisions/2022/ORDER0007939-000...	182	283
https://online.drl.wi.gov/decisions/2022/ORDER0008021-000...	189	275
https://online.drl.wi.gov/decisions/2022/ORDER0008119-000...	194	271
https://dsps.wi.gov/Pages/SelfService/OrdersDisciplinaryActio...	177	265
https://online.drl.wi.gov/decisions/2022/ORDER0006348-000...	172	258
https://online.drl.wi.gov/decisions/2022/ORDER0007981-000...	127	245
https://online.drl.wi.gov/decisions/2022/ORDER0008120-000...	170	241
https://online.drl.wi.gov/decisions/2022/ORDER0008043-000...	173	228
https://online.drl.wi.gov/decisions/2022/ORDER0008042-000...	136	211

Link URL	Unique Clicks	Total Clicks
https://online.drl.wi.gov/decisions/2022/ORDER0007606-000...	129	207
https://online.drl.wi.gov/decisions/2022/ORDER0008124-000...	141	206
https://online.drl.wi.gov/decisions/2022/ORDER0007226-000...	137	202
https://online.drl.wi.gov/decisions/2022/ORDER0008018-000...	131	199
https://online.drl.wi.gov/decisions/2022/ORDER0008024-000...	138	199
https://online.drl.wi.gov/decisions/2022/ORDER0007977-000...	109	196
https://online.drl.wi.gov/decisions/2022/ORDER0006795-000...	134	196
https://online.drl.wi.gov/decisions/2022/ORDER0007940-000...	133	191
https://online.drl.wi.gov/decisions/2022/ORDER0007172-000...	118	190
https://online.drl.wi.gov/decisions/2022/ORDER0007129-000...	111	186
https://online.drl.wi.gov/decisions/2022/ORDER0008126-000...	123	183
https://online.drl.wi.gov/decisions/2022/ORDER0008122-000...	125	182
https://online.drl.wi.gov/decisions/2022/ORDER0008022-000...	127	181
https://online.drl.wi.gov/decisions/2022/ORDER0008032-000...	119	179
https://online.drl.wi.gov/decisions/2022/ORDER0007940-000...	123	174
https://online.drl.wi.gov/decisions/2022/ORDER0007227-000...	122	167
https://dsps.wi.gov/Pages/RulesStatutes/PendingRules.aspx?...	94	167
https://online.drl.wi.gov/decisions/2022/ORDER0007936-000...	99	166
https://online.drl.wi.gov/decisions/2022/ORDER0008023-000...	92	163
https://online.drl.wi.gov/decisions/2022/ORDER0008041-000...	114	162
https://online.drl.wi.gov/decisions/2022/ORDER0008044-000...	115	162
https://online.drl.wi.gov/decisions/2022/ORDER0007937-000...	103	159
https://online.drl.wi.gov/decisions/2022/ORDER0007688-000...	105	146
https://public.govdelivery.com/accounts/WIDSPS/subscriber/e...	107	145
https://online.drl.wi.gov/decisions/2022/ORDER0008030-000...	89	132
https://dsps.wi.gov/Pages/BoardsCouncils/CSB/Reports.aspx?...	98	128
https://online.drl.wi.gov/decisions/2022/ORDER0007649-000...	85	127
https://online.drl.wi.gov/decisions/2022/ORDER0008020-000...	86	125
https://online.drl.wi.gov/decisions/2022/ORDER0007980-000...	91	123

Link URL	Unique Clicks	Total Clicks
https://online.drl.wi.gov/decisions/2022/ORDER0007941-000...	84	118
https://online.drl.wi.gov/decisions/2022/ORDER0007696-000...	74	114
https://online.drl.wi.gov/decisions/2022/ORDER0007938-000...	64	97
https://online.drl.wi.gov/decisions/2022/ORDER0007978-000...	73	96
https://online.drl.wi.gov/decisions/2022/ORDER0007942-000...	59	90
https://dsps.wi.gov/Pages/BoardsCouncils/MEB/Meetings.asp...	48	83
https://dsps.wi.gov/Pages/BoardsCouncils/MEB/Default.aspx?...	49	74
https://dsps.wi.gov/Pages/RulesStatutes/Medicine.aspx?utm_...	36	63
https://content.govdelivery.com/accounts/WIDSPS/bulletins/3...	24	42
https://drlornabreen.org/?utm_medium=email&utm_source=...	29	42
https://evers.wi.gov/Pages/Application_Process.aspx?utm_me...	21	29
https://dsps.wi.gov/pages/Home.aspx?utm_medium=email&...	18	25
https://dsps.wi.gov/Documents/2657DLSC.pdf?utm_medium...	13	21
https://dsps.wi.gov/Pages/SelfService/Default.aspx?utm_med...	16	20
https://dsps.wi.gov/Pages/RulesStatutes/Rulemaking.aspx?ut...	13	18
https://www.dhs.wisconsin.gov/prevent-suicide/index.htm?ut...	9	14
https://dsps.wi.gov/Pages/SelfService/ProfessionalAssistance...	10	14
https://subscriberhelp.govdelivery.com/	8	11
https://dsps.wi.gov/Pages/RulesStatutes/RealEstate.aspx?ut...	6	11
https://subscriberhelp.granicus.com/?utm_medium=email&u...	7	11
https://dsps.wi.gov/Documents/2654DLSC.pdf?utm_medium...	7	11
https://twitter.com/wi_dsps?utm_medium=email&utm_sourc...	6	8