

CR 87-123

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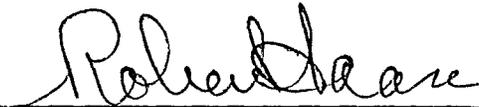
STATE OF WISCONSIN)
OFFICE OF THE COMMISSIONER OF INSURANCE)

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Robert D. Haase, Commissioner of Insurance and custodian of the official records of said office, do hereby certify that the annexed order amending and creating a rule relating to fees for health care providers participating in the Patients Compensation Fund was issued by this office on November 23, 1987.

I further certify that said copy has been compared by me with the original on file in this office and that the same is a true copy thereof, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name in the City of Madison, State of Wisconsin, this 23rd day of November, 1987.


Robert D. Haase
Commissioner of Insurance

9478K-1

STATE OF WISCONSIN
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DOUGLAS LA FOLLETTE
SECRETARY OF STATE

STATE OF WISCONSIN
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DOUGLAS LA FOLLETTE
SECRETARY OF STATE

ORDER OF THE COMMISSIONER OF INSURANCE

AMENDING AND CREATING A RULE

To amend Ins 17.28 (6) (i) (intro.) and 1 and (j); and to create Ins 17.28 (6) (k) to (o) and (6m), relating to fees for health care providers participating in the patients compensation fund.

ANALYSIS BY THE OFFICE OF THE COMMISSIONER OF INSURANCE

Statutory authority: ss. 601.41 (3) and 655.003, Stats.

Statutes interpreted: s. 655.27 (3) (b) 1, Stats.

The commissioner of insurance is required to promulgate by administrative rule the fees charged to health care providers who participate in the patients compensation fund. The fees must first be approved by the board of governors of the fund. This rule establishes, for the following providers, fees approved by the board on May 21, 1987: partnerships comprised of physicians and nurse anesthetists, corporations providing the medical services of physicians or nurse anesthetists, cooperative health maintenance organizations, ambulatory surgery centers and entities owned or controlled by hospitals that assist in the diagnosis or treatment of patients of the hospitals. The fees will first apply to the fiscal year beginning July 1, 1988.

The rule allows the fund to require health care providers to report any information necessary to determine the fees.

SECTION 1. Ins 17.28 (6) (i) is amended to read:

Ins 17.28 (6) (i) For hospitals other than ambulatory surgery centers:

1. Per occupied bed \$ 137; plus

2. Per 100 outpatient visits during the last calendar year for which

totals are available \$6.75

SECTION 2. Ins 17.28 (6) (j) is amended to read:

Ins 17.28 (6) (j) For nursing homes:

~~1.~~ Per occupied bed \$ 26

SECTION 3. Ins 17.28 (6) (k) to (o) and (6m) are created to read:

Ins 17.28 (6) (k) For partnerships comprised of physicians or nurse
anesthetists: \$ 50

(L) For corporations providing the medical services of physicians or
nurse anesthetists:

1. With one shareholder \$ 0

2. With more than one shareholder \$ 50

(m) For operational cooperative sickness care plans:

1. Per 100 outpatient visits during the last calendar year for which
totals are available \$ 0.17; plus

2. 2.5% of the total annual fund fees assessed against all physicians
employed on July 1 of the previous fiscal year

(n) For ambulatory surgery centers:

Per 100 outpatient visits during the last calendar year for which
totals are available \$33.75

(o) For an entity owned or controlled by a hospital or hospitals:
28.6% of the amount that is or would be paid to the plan for primary liability coverage for the specific type of entity

(6m) The fund may require any health care provider to report, at the times and in the manner prescribed by the fund, any information necessary for the determination of a fee specified under sub. (6).

EFFECTIVE DATE: This rule takes effect on July 1, 1988, as provided in s. 227.22 (2) (b), Stats.

Dated at Madison, Wisconsin, this 23rd day of November, 1987.



Robert D. Haase
Commissioner of Insurance

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10/08/87



The State of Wisconsin
Office of the Commissioner of Insurance

Robert D. Haase
Commissioner
(608) 266-3585

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DATE: November 23, 1987
TO: Gary Poulson
FROM: Fred Nepple, General Counsel
Office of the Commissioner of Insurance
SUBJECT: Ins 17.28, Clearinghouse No. 87-123

Enclosed are two copies of an Order of the Commissioner of Insurance amending and creating Ins 17.28, Clearinghouse No. 87-123 relating to fees for health care providers participating in the Patients Compensation Fund.

FN:LH:imk
Enclosure
9478K-3