

# State of Wisconsin



1995 Assembly Bill 299

Date of enactment: **December 1, 1995**  
Date of publication\*: **December 15, 1995**

## 1995 WISCONSIN ACT 94

AN ACT to create 446.02 (7m) and 632.875 of the statutes; relating to: independent evaluations of chiropractic treatment that are conducted for insurers and granting rule-making authority.

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

**SECTION 1.** 446.02 (7m) of the statutes is created to read:

446.02 (7m) (a) A chiropractor shall create and maintain a patient record for every patient the chiropractor examines or treats. A patient record created and maintained under this paragraph shall contain complete and comprehensive healthcare information, as defined by the examining board by rule.

(b) A chiropractor shall preserve a patient record created and maintained under par. (a) for at least 3 years after the chiropractor makes his or her last entry or notation in the patient record or for any longer period that is otherwise required by law.

**SECTION 2.** 632.875 of the statutes is created to read:

**632.875 Independent evaluations relating to chiropractic treatment.** (1) In this section:

(a) "Chiropractor" means a person licensed to practice chiropractic under ch. 446.

(b) "Independent evaluation" means an examination or evaluation by or recommendation of a chiropractor or a peer review committee under s. 632.87 (3) (b) 1.

(c) "Patient" means a person whose treatment by a chiropractor is the subject of an independent evaluation.

(d) "Treating chiropractor" means a chiropractor who is treating a patient and whose treatment of the patient is the subject of an independent evaluation.

(2) If, on the basis of an independent evaluation, an insurer restricts or terminates a patient's coverage for the treatment of a condition or complaint by a chiropractor acting within the scope of his or her license and the restriction or termination of coverage results in the patient becoming liable for payment for his or her treatment, the insurer shall provide to the patient and to the treating chiropractor a written statement that contains all of the following:

(a) A statement that an independent evaluation has been conducted under s. 632.87 (3) (b) 1.

(b) The name of the treating chiropractor.

(c) The name of the patient.

(d) A description of the insurer's internal appeal process that is available to the patient.

(e) A statement indicating that the patient may, no later than 30 days after receiving the statement required under this subsection, request an internal appeal of the insurer's restriction or termination of coverage.

(f) The address to which the patient should send the request for an appeal.

(g) A reasonable explanation of the factual basis and of the basis in the policy, plan or contract or in applicable

\* Section 991.11, WISCONSIN STATUTES 1993-94: 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 as designated" by the secretary of state [the date of publication may not be more than 10 working days after the date of enactment].

law for the insurer's restriction or termination of coverage.

(h) A list of records and documents reviewed as part of the independent evaluation.

(3) (a) In this subsection, "claim" means a patient's claim for coverage, under a policy, plan or contract covering diagnosis and treatment of a condition or complaint by a licensed chiropractor within the scope of the chiropractor's professional license, the restriction or termination of which coverage is the subject of an independent evaluation.

(b) A chiropractor who conducts an independent evaluation may not be compensated by an insurer based on a percentage of the dollar amount by which a claim is reduced as a result of the independent evaluation.

(4) Subject to sub. (2) (e), an insurer shall make available to a patient an internal procedure by which the patient may appeal an insurer's decision to restrict or terminate coverage.

(5) This section does not apply to any of the following:

(a) Worker's compensation insurance.

(b) Any line of property and casualty insurance except disability insurance. In this paragraph, "disability insurance" does not include uninsured motorist coverage, underinsured motorist coverage or medical payment coverage.

**SECTION 3. Nonstatutory provisions; chiropractic examining board.**

(1) RULES CONCERNING PATIENT RECORDS. The chiropractic examining board shall submit proposed rules required under section 446.02 (7m) of the statutes, as created by this act, to the legislative council staff for review under section 227.15 (1) of the statutes no later than the first day of the 13th month beginning after the effective date of this subsection.

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