

2007 DRAFTING REQUEST

Bill

Received: **11/14/2006**

Received By: **tkuczens**

Wanted: **As time permits**

Identical to LRB:

For: **Alberta Darling (608) 266-5830**

By/Representing: **David Volz**

This file may be shown to any legislator: **NO**

Drafter: **tkuczens**

May Contact:

Addl. Drafters:

Subject: **Occupational Reg. - prof lic**

Extra Copies: **CTS**

Submit via email: **YES**

Requester's email: **Sen.Darling@legis.wisconsin.gov**

Carbon copy (CC:) to: **tracy.kuczenski@legis.wisconsin.gov**

Pre Topic:

No specific pre topic given

Topic:

Licensure for genetic counselors.

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/P1	tkuczens 01/31/2007	wjackson 02/09/2007	jfrantze 02/09/2007	_____	cduerst 02/09/2007		State
	tkuczens 05/23/2007	wjackson 05/29/2007		_____			
/P2	tkuczens 08/21/2007	wjackson 08/23/2007	nmatzke 05/29/2007	_____	sbasford 05/29/2007		State
/1	tkuczens 08/29/2007	jdye 08/30/2007	pgreensl 08/24/2007	_____	sbasford 08/24/2007		State

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/2	tkuczens 03/07/2008	wjackson 03/10/2008	jfrantze 08/30/2007	_____	mbarman 08/30/2007		State
/3			rschluet 03/10/2008	_____	lparisi 03/10/2008	cduerst 03/12/2008	State

FE Sent For: "1/3" @ intro. 3-12-08
<END>

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Handwritten signature and date: 3/15/08

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2/28 jld

To 8/30

*HSK
8/30*

Vers. Drafted Reviewed Typed Proofed Submitted Jacketed Required

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FE Sent For:

Handwritten signatures and initials:
8/24
P8
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FE Sent For: */p2 WJ 5/25* *nwn 5/29* *nwn/rs 5/29*
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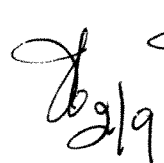
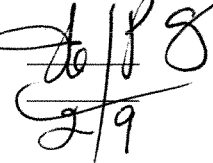
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/P1	tkuczens	/pl wlj 2/8	 2/9	 2/9			

FE Sent For:

<END>

RESEARCH APPENDIX - Draft Transfer/Copy Request Form

- Atty's please complete this form and give to Mike Barman

(Request Made By: TKK) (Date: 11 / 27 / 06)



Please transfer the drafting file for
2005 LRB 3151/P1 to the drafting file
for 2007 LRB 0760

The final version of the 2005 draft and the final Request Sheet will copied on yellow paper, and returned to the original 2005 drafting file. A new cover sheet will be created/included listing the new location of the drafting file's "guts".

For research purposes, because the 2005 draft was incorporated into a 2007 draft, the complete drafting file will be transferred, as a separate appendix, to the new 2007 drafting file. This request form will be inserted into the "guts" of the 2007 draft. If introduced, the appendix will be scanned/added to the electronic drafting file folder.

-- OR --

Please copy the drafting file for
2007 LRB / _____ (include the version) and place it in the
drafting file for 2007 LRB / _____

For research purposes, because the original 2007 draft was incorporated into another 2007 draft, the original drafting file will be copied on yellow paper (darkened/auto centered/reduced to 90%) and added, as a separate appendix, to the new 2007 drafting file. This request form will be inserted into the "guts" of the new 2007 draft. If introduced the appendix will be scanned/added to the electronic drafting file folder.

The original drafting file will then returned, intact, to its folder and filed. For future reference, a copy of the transfer/copy request form will also be added to the "guts" of the original draft.

National Society of Genetic Counselors
Scope of Practice

The purpose of this document is to define the scope of practice of genetic counselors, focusing primarily on those who work in a clinical setting. Genetic counselors are typically Master's level professionals who have successfully completed programs accredited by the American Board of Genetic Counseling (ABGC). They are uniquely trained to provide information, counseling and support to individuals and families whose members have birth defects or genetic disorders, or who may be at risk for these conditions.

Genetic counselors work as members of a health care team in a medical genetics program or other specialty/subspecialty; including oncology, neurology, cardiology, and obstetrics and gynecology, among others.

The genetic counseling scope of practice is carried out through collaborative relationships with clinical geneticists and other physicians, as well other allied healthcare professionals such as nurses, physician assistants, and social workers.

This document was written by the Ad Hoc committee on Scope of Practice in Genetic Counseling. (Bonnie Baty, Edward Kloza, Sharon Solomon, Aimee Walter, LuAnn Weik, and Karen Hanson, chair).

Revised and approved by NSGC Board of Directors October 2006

Section I: Clinical Genetics Skills

As members of a team of healthcare professionals, genetic counselors:

1. Explain the nature of genetics' evaluation to clients. Elicit and interpret comprehensive and appropriate medical and family histories, based on the referral indication, and document the family history using standard pedigree nomenclature.
2. Identify additional client and family medical information that is necessary for risk assessment and consideration of differential diagnoses, and assist in obtaining such information.
3. Research and summarize pertinent data from the published literature, databases, and other professional resources, as necessary for each client.
4. Synthesize client and family medical information and data obtained from additional research as the basis for risk assessment, differential diagnosis, genetic testing options, reproductive options, follow-up recommendations, and case management.
5. Assess and calculate the risk of occurrence or recurrence of a genetic condition or birth defect using a variety of techniques, including knowledge of inheritance patterns, epidemiologic data, quantitative genetics principles, statistical models, and evaluation of clinical information, as applicable.
6. Explain to clients, verbally and/or in writing, medical information regarding the diagnosis or potential occurrence of a genetic condition or birth defect, including etiology, natural history, inheritance, and potential treatment options.
7. In collaboration with licensed physicians discuss available options with clients, recommend appropriate genetic tests and clinical assessments and, to the extent allowed by local regulations, order and interpret genetic tests. Describe the potential benefits, risks, and limitations of each test or option so that clients may make informed decisions.
8. Develop, implement and periodically assess a case management plan for each client in collaboration with licensed physicians; communicate with the client, laboratory, physicians and other healthcare providers, as necessary.
9. Document case information clearly and concisely in the medical record and in correspondence to referring physicians, and discuss case information with other members of the healthcare team, as necessary.

10. Access information about current studies, evaluate the risks, benefits and limitations of their client's participation in research, present research options and issues to clients and their families, and facilitate the informed consent process.
11. Identify and access local, regional, and national resources such as support groups and ancillary services, as appropriate for specific genetic conditions; discuss the availability of such resources with clients; and provide referrals, as necessary.
12. Plan, organize and conduct public and professional education programs on medical genetics, patient care and genetic counseling issues.

Section II: Counseling and Communication Skills

Genetic counselors:

1. Develop a genetic counseling agenda with client, which includes identification and negotiation of client/counselor priorities and expectations.
2. Interpret individual family experiences, behaviors, emotions, perceptions, values, and cultural and religious beliefs in order to facilitate individualized decision making and coping.
3. Assess client understanding and response to medical information and its implications, and adjust the level of the educational intervention according to client competencies.
4. Utilize appropriate interviewing techniques and empathic listening to establish rapport, identify major concerns and engage clients in an exploration of their responses to the implications of the findings, genetic risks, and available options/interventions.
5. Identify client's psychological needs, stressors and sources of emotional and psychological support in order to determine appropriate interventions and/or referrals.
6. Promote client-specific decision making in an unbiased non-coercive manner which respects a clients' culture, language, tradition, lifestyle, religious beliefs and values.
7. Use knowledge of psychological defenses, grief process, crisis intervention techniques, family theory and family dynamics to facilitate adjustment of the family to the occurrence or risk of occurrence of a congenital or genetic disorder.

Section III: Professional Ethics and Values

Genetic Counselors:

1. Act in accordance with the Code of Ethics adopted by the National Society of Genetic Counselors¹. This Code of Ethics is based on relationships and addresses

who genetic counselors are for themselves, their clients, their colleagues and society. Counselors can access the Ethics Subcommittee of the National Society of Genetic Counselors for assistance with difficult ethical cases.

2. Recognize and respond to ethical and moral dilemmas arising in practice, identify factors that promote or hinder client autonomy, and understand issues surrounding privacy, informed consent, confidentiality, and real or potential discrimination.
3. Advocate for clients, which includes understanding client needs and perceptions, representing their interests in accessing services, and eliciting responses from the medical and social service systems as well as the community at large.
4. Recognize personal limitations in knowledge and/or capabilities and seek consultation or appropriately refer clients to other providers.
5. Maintain professional growth, which includes acquiring relevant information required for a given situation, keeping abreast of current standards of practice as well as societal developments, and seeking out or establishing mechanisms for peer support.
6. Serve as a source of reliable information and expert opinion for policymakers and public officials as well as the general public and participate in activities necessary to bring about socially responsible change.
7. Respect a client's right to confidentiality, being mindful of federal and state regulations governing release of personal health information.

Background and History:

In 1971, Sarah Lawrence College in Bronxville, NY bestowed master's degrees to its first class of genetic counselors. Since then, genetic counseling professionals equipped with their unique knowledge and skills in counseling and human genetics, have become important contributing members of health care teams worldwide.

Growth within the profession and the development of a unique identity provided the impetus for the formation of a professional society responsive to the needs of the profession. To that end, the National Society of Genetic Counselors (NSGC) was incorporated in 1979.

The Society's Vision: to be the leading voice, authority and advocate for the genetic counseling profession.

The Society's Mission: to promote the genetic counseling profession as a recognized and integral part of health care delivery, education, research and public policy.

The NSGC promotes the professional interests of genetic counselors and provides a network for professional communications. NSGC membership includes local and national continuing education opportunities, professional guidance, and a forum for the discussion of issues relevant to human genetics and the genetic counseling profession. In addition, the NSGC serves as a policy making body for the genetic counseling profession.

The American Board of Genetic Counseling (ABGC), established in 1993, is the accreditation and certification body for the genetic counseling profession. Prior to 1993, board certification was performed under the aegis of the American Board of Medical Genetics. Certification is achieved by successfully completing educational and training requirements and a comprehensive examination offered every two years. As of 2005, there are about 2000 members of the National Society of Genetic Counselors, and about 1700 board certified genetic counselors worldwide.

All graduating entry-level counselors must demonstrate proficiency in a number of different areas, defined by the ABGC's Practice Based Competencies (1). These competencies are categorized into the following domains: Communication Skills, Critical-Thinking Skills, Interpersonal, Counseling, and Psychosocial Assessment Skills, and Professional Ethics and Values. These competencies also define areas of practice, and were the guidelines for developing this document. In 2005, about 200 students graduated from 27 graduate level genetic counseling programs in the United States.

Genetic counselors are guided by additional documents that currently shape genetic counseling practice. These include a comprehensive Code of Ethics (2) as well as position statements on issues of importance to the field of genetic counseling, and practice guidelines that provide assistance with difficult areas of clinical genetics. This

Scope of Practice is intended to complement these existing documents and was written with those in mind.

This document is also intended to educate other health care professionals, insurers, administrators, as well as the general public about the role of genetic counselors. An additional goal of this document is to provide guidance to members of the National Society of Genetic Counselors to help shape job descriptions and clarify duties. We also hope this document will complement the Practice-Based Competencies for the continuing development of educational programs for genetic counselor training.

This committee recognizes that a significant proportion of genetic counselors work in settings which are non-clinical. Professional opportunities for genetic counselors continue to expand, and many are working as program administrators, educators, or research coordinators. Other genetic counselors are employed in various capacities by public health departments, community agencies, diagnostic laboratories, and biotechnology companies.

Finally, we acknowledge that "scope of practice" is a dynamic concept. The profession of genetic counseling is evolving, and must be adaptive to changes in the surrounding health care environment. Expectations are ever changing for genetic counseling as a profession, and vary on a state-by-state basis. A few states currently license genetic counselors, and the number of these is expected to grow in the near future. This committee recognizes that state statutes prescribe to a great extent how genetic counselors practice. In addition, this Scope of Practice is not intended to limit in any way the extent to which counselors individually develop and exercise skills and talents beyond those defined by their education, general expectation, or state regulation. This committee fully recognizes that the expansion of genetic counseling as a profession is the result of individual counselors whose entrepreneurial spirit led them to identify and fill needs within the community. We encourage our colleagues to identify opportunities that may further serve individuals and families in need.

1. American Board of Genetic Counseling: www.abgc.net
2. National Society of Genetic Counselors: www.nsgc.org

Sundberg, Christopher

From: Sundberg, Christopher
Sent: Friday, August 11, 2006 1:29 PM
To: Volz, David
Subject: RE: Licensure for genetic counselors

If the regulation of genetic counselors is entrusted to the Medical Examining Board, input from members of the genetic counseling profession would be limited to the notice-and-comment procedures under ch. 227. This means that genetic counselors, like the public at large, would be entitled to notice before rules are promulgated and an opportunity to critique the proposed rules. The MEB consists of 9 MDs, 1 DO, and three public members, all appointed by the governor.

If you want genetic counselors to have a more direct role in the regulation of the profession, there are some options. One would be to create a council to advise the MEB. A council would not have the authority to promulgate rules, impose discipline, etc., but would provide something of an official voice for the profession to advise the MEB. You could specify who would make up the board. This is how perfusionists and massage therapists are regulated.

If you want to create a body with the authority to regulate the profession, an affiliated credentialing board attached to the MEB would have the authority to regulate the profession itself, after consulting with the MEB. An affiliated credentialing board generally consists of members of the profession and members of the public. Dieticians and podiatrists are regulated by affiliated credentialing boards.

The Perfusionists Examining Council advises the MEB, but lacks authority to promulgate its own rules. It consists of three licensed perfusionists appointed by the MEB, a physician appointed by the MEB, and one member of the public appointed by the governor.

Does this help?

From: Hurley, Peggy
Sent: Friday, August 11, 2006 9:15 AM
To: Volz, David
Cc: Sundberg, Christopher
Subject: RE: Licensure for genetic counselors

Hi David,

I am forwarding this question to Chris Sundberg, who will be drafting Occupational Regulation this session. I'm sure he'll be able to assist you.

Peggy Hurley

From: Volz, David
Sent: Thursday, August 10, 2006 3:27 PM
To: Hurley, Peggy
Subject: Licensure for genetic counselors

Peggy,

At our request, you prepared a preliminary draft relating to licensing genetic counselors (LRB-3151/P1). I had forwarded the draft to the genetic counselors we were working with for their review. For various reasons, some time passed before we heard back from them. They responded with a number of questions that I am hoping you can address (or direct me to someone else, if appropriate). Their questions follow:

1. Some specialties have their own subchapter of 448 (Medical Practices) versus being added to subchapter II (Medical Examining Board). Do you know the pros and cons of doing it this way? We are concerned that the medical examining board that would create and enforce the rules of our licensure would be made up of other healthcare professionals who may not completely understand genetic counseling. What role would we play in the board itself, in creating our rules, and in amending the rules of our licensure?

2. In the existing 448.40(2)(b) Rules (not the draft of the amendment), it says that the board shall promulgate the rules regarding scope of practice by consulting with the (perfusionists) examining council. What is the examining council? What kind of influence does this council have regarding creating/enforcing the rules?

Thank you for your assistance.

David Volz
Office of Sen. Darling

Kuczenski, Tracy

From: deborah.wham@aurora.org
Sent: Monday, December 11, 2006 3:01 PM
To: Volz, David; Kuczenski, Tracy
Subject: Re: Injured Patients and Families Compensation

Dave-
Thanks so much for Pam's info. She was very helpful.

Dave and Tracy-
Here is some of the info you needed from us.
1. We do not need to write anything about liability/malpractice insurance into the bill.
2. We decided that our affiliated credentialing board should be made up of 4 genetic counselors, 2 physicians (one of whom is a medical/clinical geneticist), and one member of the public.
3. We have not yet figured out what we want to do about a grandfather clause. We are going to consult with folks from other states for guidance. I am hoping to have this info to you by the first of the year (if not sooner).

Thanks. Happy Holidays.

Deborah Wham, MS, CGC
Certified Genetic Counselor
Women's Health/Cancer Services
Aurora Health Care Metro Region
2900 Oklahoma Avenue
Milwaukee, WI 53201-2901
414 649-5786 - M, W
414 219-5561 - T, Th, F
fax 414 385-2751

"Volz, David" <David.Volz@legis.wisconsin.gov>

"Volz, David"
<David.Volz@legis.wisconsin.gov>

To<deborah.wham@aurora.org>
cc
SubjectInjured Patients and Families Compensation

12/05/2006 12:46 PM

Deborah,

FYI...according to Chris Sundberg, the drafter who handles the Injured Patients and Families Compensation under ch. 655 is Pam Kahler (608/266-2682), in case your group wants to follow-up on that issue or has questions.

Dave Volz
Office of Sen. Darling

Kuczenski, Tracy

From: Kuczenski, Tracy
Sent: Tuesday, January 16, 2007 9:15 AM
To: 'deborah.wham@aurora.org'
Cc: Volz, David
Subject: RE: Genetic Counseling Licensure Bill info

Hi Deborah and David -

I do have a first draft completed and I forwarded it for review to another attorney in our office who has experience drafting in Occupational Regulation and Licensing. He anticipated that his review would be complete this week (although we are in the midst of budget drafting, and that may push things back a bit); then the draft goes to editing and typing and is forwarded as a PDF file to Senator Darling's office.

As drafted, I left space for grandfathering options and asked a series of questions on that point for consideration. I will not modify the draft at this point, primarily so that it can get out to the Senator's office as soon as possible, but also because I think a review of the questions will be helpful to be sure that I have captured the desired intent.

Let me know if you have any other questions.

Happy new year and happy snow!

Tracy K. Kuczenski
Legislative Attorney
Wisconsin Legislative Reference Bureau
(608) 266-9867
Tracy.Kuczenski@legis.wisconsin.gov

From: deborah.wham@aurora.org [mailto:deborah.wham@aurora.org]
Sent: Tuesday, January 16, 2007 9:00 AM
To: Kuczenski, Tracy
Cc: Volz, David
Subject: Genetic Counseling Licensure Bill info

Hi Tracy and Dave-

I finally got a consensus from our group and we decided that we do not want a grandfather clause in the bill. Also, once a first draft is finished, would it be possible to get an electronic copy (either a word document or PDF, etc)? This will make it easier for me to distribute to the group. Finally, can you give me a time frame as to when the first draft might be ready for us to see? Thanks so much for all of your help. Happy new year!

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1/29/2007



State of Wisconsin
2007 - 2008 LEGISLATURE

LRB-0760/P1

TKK:.....

in 1/31/07

by 2/9/07
if possible

d-note
NL

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

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Gen

1 AN ACT ...; relating to: the regulation and licensure of genetic counselors,
2 creating a genetic counselors affiliated credentialing board, requiring the
3 exercise of rule-making authority, and providing a penalty.

Analysis by the Legislative Reference Bureau

This is a preliminary draft. An analysis will be provided in a later version.
For further information see the **state** fiscal estimate, which will be printed as
an appendix to this bill.

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

4 SECTION 1. 15.085 (1m) (b) of the statutes is amended to read:
5 15.085 (1m) (b) The public members of the physical therapists affiliated
6 credentialing board, podiatrists affiliated credentialing board, or occupational
7 therapists affiliated credentialing board, or genetic counselors affiliated
8 credentialing board shall not be engaged in any profession or occupation concerned
9 with the delivery of physical or mental health care.

1 **SECTION 2.** 15.406 (6) of the statutes is created to read:

2 15.406 (6) GENETIC COUNSELORS AFFILIATED CREDENTIALING BOARD. There is
3 created in the department of regulation and licensing, attached to the medical
4 examining board, a genetic counselors affiliated credentialing board consisting of the
5 following members appointed for 4-year terms:

6 (a) Four genetic counselors who are licensed under subch. VIII of ch. 448.

7 (b) Two members who are licensed to practice medicine and surgery under
8 subch. II of ch. 448, one of whom is a clinical geneticist.

9 (c) One public member.

10 **SECTION 3.** 48.981 (2) (a) 30. of the statutes is created to read:

11 48.981 (2) (a) 30. A genetic counselor.

12 **SECTION 4.** 146.81 (1) (dd) of the statutes is created to read:

13 146.81 (1) (dd) A genetic counselor licensed under subch. VIII of ch. 448.

14 **SECTION 5.** 146.997 (1) (d) 4. of the statutes is amended to read:

15 146.997 (1) (d) 4. A physician, podiatrist, perfusionist, physical therapist, or
16 physical therapist assistant, or genetic counselor licensed under ch. 448.

History: 1999 a. 176, 186; 2001 a. 38, 70, 74, 89, 105; 2003 a. 33; 2005 a. 22.

17 **SECTION 6.** 155.01 (7) of the statutes is amended to read:

18 155.01 (7) "Health care provider" means a nurse licensed or permitted under
19 ch. 441, a chiropractor licensed under ch. 446, a dentist licensed under ch. 447, a
20 physician, physician assistant, perfusionist, podiatrist, physical therapist, physical
21 therapist assistant, occupational therapist, or occupational therapy assistant, or
22 genetic counselor licensed under ch. 448, a person practicing Christian Science
23 treatment, an optometrist licensed under ch. 449, a psychologist licensed under ch.
24 455, a partnership thereof, a corporation or limited liability company thereof that

1 provides health care services, an operational cooperative sickness care plan
2 organized under ss. 185.981 to 185.985 that directly provides services through
3 salaried employees in its own facility, or a home health agency, as defined in s. 50.49
4 (1) (a).

5 History: 1989 a. 200; 1991 a. 281; 1993 a. 27, 105, 112, 490; 1995 a. 27 ss. 4395, 9126 (19); 1997 a. 35, 67; 1999 a. 9, 180; 2001 a. 70, 89, 105; 2005 a. 22.

SECTION 7. 252.14 (1) (ar) 4q. of the statutes is renumbered 252.14(1)(ar)4n.

6 SECTION 8. 252.14 (1) (ar) 4q. of the statutes is created to read:

7 252.14 (1) (ar) 4q. A genetic counselor licensed under subch. VIII of ch. 448.

8 SECTION 9. 440.03 (13) (b) 30m. of the statutes is created to read:

9 440.03 (13) (b) 30m. Genetic counselor.

10 SECTION 10. 440.08 (2) (a) 37m. of the statutes is created to read:

11 440.08 (2) (a) 37m. Genetic counselor: November 1 of each odd-numbered year;

12 \$ ____.

***NOTE: Pursuant to s. 440.03 (9), the Department of Regulation and Licensing includes a base renewal fee in its biennial budget request. Because the Department's biennial budget request for this year is not finalized, I left the renewal fee blank, to be revised at a later date.

13 SECTION 11. 448.970 of the statutes is renumbered 448.9695.

SECTION 12. Subchapter VIII of chapter 448 [precedes 448.970] of the statutes is created to read:

14 CHAPTER 448

15 SUBCHAPTER VIII

16 GENETIC COUNSELORS AFFILIATED CREDENTIALING BOARD

17 448.970 Definitions. In this subchapter:

18 (1) "Affiliated credentialing board" means the genetic counselors affiliated
19 credentialing board.

20 (2) "Genetic counseling" means the interpretation, analysis, integration and
21 delivery of any of the following information to individuals and families in order to

1 provide guidance about the medical, psychological, and familial implications of
2 genetic contributions to disease; assess the chance of disease occurrence or
3 recurrence; or promote informed choices and adaptations to a risk or condition:

4 (a) Individual and family medical histories.

5 (b) Education about inheritance, testing, management, prevention, resources,
6 and research.

7 (c) Social and psychological support.

8 (3) "Genetic counselor" means an individual who is licensed by the affiliated
9 credentialing board to practice genetic counseling.

10 (4) "Licensee" means an individual granted a license under this subchapter.

11 **448.971 License required.** (1) Except as provided in s. 448.972, no person
12 may practice genetic counseling unless the person is licensed as a genetic counselor
13 under this subchapter.

14 (2) No person may designate him^{self} or herself as a genetic counselor or use or
15 assume the title "genetic counselor," "licensed genetic counselor," or "registered
16 genetic counselor," or append to the person's name the letters "G.C.," "L.G.C.," or
17 "R.G.C.," or claim to render genetic counseling services unless the person is licensed
18 as a genetic counselor under this subchapter.

19 **448.972 Applicability.** (1) A license is not required under this subchapter
20 for any of the following if the person does not claim to be licensed as a genetic
21 counselor under this subchapter:

22 (a) Any person lawfully practicing within the scope of a license, permit,
23 registration or certification granted by this state or the federal government.

24 (b) Any person assisting a genetic counselor in practice under the direct,
25 on-premises supervision of the genetic counselor.

1 (c) A student of genetic counseling assisting a genetic counselor in the practice
2 of genetic counseling if the assistance is within the scope of the student's education
3 or training.

4 (d) A person who is licensed to practice genetic counseling in another state or
5 country and is providing a consultation or demonstration with a genetic counselor
6 who is licensed under this subchapter.

7 **448.973 Duties and powers of affiliated credentialing board.** (1) The
8 affiliated credentialing board shall promulgate rules that establish each of the
9 following:

10 (a) Standards of practice for and a code of ethics governing the professional
11 conduct of genetic counselors.

12 (b) Continuing education requirements for license renewal for a genetic
13 counselor including the requirement that an applicant for renewal of a license must
14 demonstrate continued competence as a genetic counselor.

15 (2) The affiliated credentialing board may promulgate rules that define the
16 scope of practice of genetic counseling.

17 **448.974 Licensure of genetic counselors.** (1) Except as provided in sub.
18 (2), the affiliated credentialing board shall grant a license as a genetic counselor to
19 a person who does all of the following:

20 (a) Submits an application for the license to the department on a form provided
21 by the department.

22 (b) Pays the fee specified in s. 440.05 (1).

23 (c) Subject to ss. 111.321, 111.322 and 111.335, submits evidence satisfactory
24 to the affiliated credentialing board that the applicant does not have an arrest or a
25 conviction record.

1 (d) Submits evidence satisfactory to the affiliated credentialing board that he
2 or she has done all of the following:

3 1. Successfully completed the academic and clinical requirements of and
4 developed the practice-based competencies required by a degree-granting program
5 in genetic counseling approved by the affiliated credentialing board and accredited
6 by the American Board of Genetic Counseling or, as determined by the affiliated
7 credentialing board, a successor organization.

8 2. Unless the affiliated credentialing board waives this requirement under sub.
9 (3), obtained certification and, if applicable, recertification from the American Board
10 of Genetic Counseling or, as determined by the affiliated credentialing board, a
11 successor organization.

12 (e) Passes an examination under s. 448.975.

13 (f) If the person was educated at a genetic counseling program that is not in the
14 United States, the person satisfies any additional requirements for demonstrating
15 competence to practice genetic counseling that the board may establish by rule.

16 (2) The affiliated credentialing board may grant a license as a genetic
17 counselor to a person who establishes, to the satisfaction of the affiliated
18 credentialing board, all of the following:

***NOTE: Please see attached drafter's note for questions related to grandfathering
and waivers.

19 (3) The affiliated credentialing board may waive the requirement under sub.
20 (1) (d) 2. for an applicant who establishes, to the satisfaction of the affiliated
21 credentialing board, all of the following:

***NOTE: Please see attached drafter's note for questions related to grandfathering
and waivers.

1 **448.975 Examination.** (1) The affiliated credentialing board shall conduct
2 or arrange for examinations for genetic counselor licensure at least annually and at
3 times and places determined by the affiliated credentialing board.

4 (2) Examinations under sub. (1) may consist of written or oral tests, or both, and
5 shall require applicants to demonstrate minimum competency in subjects
6 substantially related to the practice of genetic counseling.

7 (3) Notwithstanding s. 448.974 (1) (f), the affiliated credentialing board may
8 not require an applicant for genetic counseling licensure to take an oral examination
9 or an examination to test proficiency in the English language for the sole reason that
10 the applicant was educated in a genetic counseling program that is not in the United
11 States if the applicant establishes, to the satisfaction of the affiliated credentialing
12 board, that he or she satisfies the requirements under s. 448.974 (2).

13 **448.976 Issuance of license; expiration and renewal.** (1) The department
14 shall issue a certificate of licensure to each person who is licensed under this
15 subchapter.

16 (2) The renewal dates for licenses granted under this subchapter are specified
17 under s. 440.08 (2) (a). Renewal applications shall be submitted to the department
18 on a form provided by the department, and shall include the renewal fee specified in
19 s. 440.08 (2) (a) and proof of compliance with the requirements established by rules
20 promulgated by the department pursuant to s. 448.973 (1) (b).

21 **448.977 Disciplinary proceedings and actions.** (1) Subject to the rules
22 promulgated under s. 440.03 (1), the affiliated credentialing board may make
23 investigations and conduct hearings to determine whether a violation of this
24 subchapter or any rule promulgated under this subchapter has occurred.

1 (2) Subject to the rules promulgated under s. 440.03 (1), the affiliated
2 credentialing board may reprimand a licensee or may deny, limit, suspend or revoke
3 a license granted under this subchapter if it finds that the applicant or licensee has
4 done any of the following:

5 (a) Made a material misstatement in an application for a license or for renewal
6 of a license.

7 (b) Interfered with an investigation or disciplinary proceeding by using threats,
8 harassment, or intentional misrepresentation of facts.

9 (c) Subject to ss. 111.321, 111.322, and 111.335, been convicted of an offense the
10 circumstances of which substantially relate to the practice of genetic counseling.

11 (d) Been adjudicated mentally incompetent by a court.

12 (e) Advertised in a manner that is false, deceptive or misleading.

13 (f) Advertised, practiced or attempted to practice under another's name.

14 (g) Subject to ss. 111.321, 111.322, and 111.34, practiced or assisted in the
15 practice of genetic counseling while the applicant's or licensee's ability to practice or
16 assist was impaired by alcohol or other drugs.

17 (h) Engaged in unprofessional or unethical conduct in violation of the code of
18 ethics established in the rules promulgated under s. 448.973 (1) (a).

19 (i) Engaged in conduct while practicing genetic counseling ^{that} which evidences a
20 lack of knowledge or ability to apply professional principles or skills.

21 (j) Violated this subchapter or any rule promulgated under this subchapter.

22 (3)(a) A licensee may voluntarily surrender his or her license to the affiliated
23 credentialing board, which may refuse to accept the surrender if the affiliated
24 credentialing board has received allegations of unprofessional conduct against the

1 licensee. The affiliated credentialing board may negotiate stipulations in
2 consideration for accepting the surrender of licenses.

3 (b) The affiliated credentialing board may restore a license that has been
4 voluntarily surrendered under par. (a) on such terms and conditions as it considers
5 appropriate.

6 (4) The affiliated credentialing board shall prepare and disseminate to the
7 public an annual report that describes final disciplinary action taken against
8 licensees during the preceding year.

9 (5) The affiliated credentialing board may report final disciplinary action taken
10 against a licensee to any national database that includes information about
11 disciplinary action taken against health care professionals.

12 **448.978 Injunctive relief.** If the affiliated credentialing board has reason to
13 believe that any person is violating this subchapter or any rule promulgated under
14 this subchapter, the affiliated credentialing board, the department, the attorney
15 general, or the district attorney of the proper county may investigate and may, in
16 addition to any other remedies, bring an action in the name and on behalf of this state
17 to enjoin the person from the violation.

18 **448.979 Penalties.** Any person who violates this subchapter or any rule
19 promulgated under this subchapter may be fined not more than \$10,000 or
20 imprisoned for not more than 9 months or both.

21 **SECTION 13.** 450.10 (3) (a) 5. of the statutes is amended to read:

1 450.10 (3) (a) 5. A physician, physician assistant, podiatrist, physical
2 therapist, physical therapist assistant, occupational therapist, or occupational
3 therapy assistant, or genetic counselor licensed under ch. 448.

History: 1985 a. 146; 1987 a. 264, 289; 1989 a. 31, 316; 1991 a. 39, 160; 1993 a. 222, 443; 1995 a. 27 s. 9145 (1); 1995 a. 448; 1997 a. 27, 67, 75, 175; 1999 a. 9, 32, 180; 2001 a. 70, 80.

4 **SECTION 14. Nonstatutory provisions.**

5 (1) INITIAL APPOINTMENTS. Notwithstanding the lengths of the terms specified
6 in section 15.406 (6) (intro.) of the statutes, as created by this act, the initial members
7 of the genetic counselors affiliated credentialing board shall be initially appointed
8 for the following terms:

9 (a) One genetic counselor and one person licensed to practice medicine and
10 surgery under subchapter II of chapter 448 of the statutes who is a clinical geneticist, for terms
11 expiring on July 1, 2008.

12 (b) One genetic counselor and one person licensed to practice medicine and
13 surgery under subchapter II of chapter 448 of the statutes, for terms expiring on July 1, 2009.

14 (c) Two genetic counselors and one public member, for terms expiring on July
15 1, 2010.

16 (2) QUALIFICATIONS OF INITIAL MEMBERS OF THE GENETIC COUNSELORS AFFILIATED
17 CREDENTIALING BOARD. Notwithstanding section 15.406 (6) of the statutes, as created
18 by this act, an initial member of the genetic counselors affiliated credentialing board
19 appointed under section 15.406 (6) of the statutes is not required to be a licensed
20 genetic counselor under section 448.974 of the statutes, as created by this act, if the
21 appointment occurs before the effective date of this act and at the time of the
22 appointment the individual holds a valid certification issued by the American Board
23 of Genetic Counseling or a successor organization.

④

1 (3) RULE MAKING. (a) The genetic counselors affiliated credentialing board shall
 2 submit in proposed form the rules required under section 448.973 of the statutes, as
 3 created by this act, to the legislative council staff under section 227.15 (1) of the
 4 statutes no later than the first day of the 8th month beginning after the effective date
 5 of this paragraph.

6 (b) Using the procedure under section 227.24 of the statutes, the genetic
 7 counselors affiliated credentialing board may promulgate rules required under
 8 section 448.973 of the statutes, as created by this act, for the period before the
 9 effective date of the rules submitted under paragraph (a), but not to exceed the period
 10 authorized under section 227.24 (1) (c) and (2) of the statutes. Notwithstanding
 11 section 227.24 (1) (a), (2) (b), and (3) of the statutes, the genetic counselors affiliated
 12 credentialing board is not required to provide evidence that promulgating a rule
 13 under this paragraph as an emergency rule is necessary for the preservation of the
 14 public peace, health, safety, or welfare and is not required to provide a finding of
 15 emergency for a rule promulgated under this paragraph.

16 **SECTION 15. Effective dates.** This act takes effect on the first day of the 13th
 17 month beginning after publication except as follows:

18 (1) The treatment of section 15.085 (1m) (b) of the statutes, as affected by this
 19 act, the treatment of section 15.406 (6) of the statutes, as created by this act, and the
 20 treatment of Section 14 of this act take effect on the day after publication.

21

(END)

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0760/P1dn

TKK: /:....

Wlj

Senator Darling

Please review the attached draft to ensure that it is consistent with your intent.

In addition to the notes embedded in the text of the draft, I have a number of questions:

1. Title protection. I have included a provision granting title protection to genetic counselors. See proposed s. 448.971 (2). This section prohibits a person from referring to him or herself as a genetic counselor, licensed genetic counselor or registered genetic counselor or affixing "G.C.," "L.G.C.," or "R.G.C." to ^{his or her} ~~their~~ name unless that person is licensed under ~~Subchapter~~ ^{Chapter} VIII of ch. 448. Are these appropriate titles and initials? Could they be confused with any other licensed or registered fields? Are there other more appropriate titles that should be used instead?

2. Compensation as an element of the practice of genetic counseling. Do you wish to include compensation as an element of the definition of the practice of genetic counseling? See, for example, s. 453.02 (6) governing the practice of veterinary medicine. When compensation is included as part of the definition, persons who provide gratuitous genetic counseling services do not fall under the purview of the affiliated credentialing board's regulatory authority.

3. Licensure of genetic counselor assistants. Did you wish to provide for the licensure of genetic counselor assistants? See, for example, the title protection and licensure provisions for physical therapist assistants at ss. 448.51 (1s) and 448.535. As drafted, this bill does not contemplate genetic counselor assistants.

3. Regarding "grandfathering," alternative certification requirements and waivers. In the absence of any "grandfathering" provision, some persons who have practiced in the profession before the statute goes into effect but who do not meet all of the licensing requirements may not be permitted to pursue their livelihood. A "grandfathering" provision offers a path by which the affiliated credentialing board can grant a license under certain circumstances; for example, if the person demonstrates that he or she has met certain requirements or has practiced for a certain period of time. It is possible to impose a deadline by which all applicants for a license will be required to meet the statutory requirements.

With these thoughts in mind, please consider whether the genetic counselor affiliated credentialing board should be empowered to:

- a. Grant temporary licenses? Under what conditions?
- b. Grant reciprocal licensure to persons who are licensed in other states but who do not meet one or more of the requirements in Wisconsin? For example:
 - (1) Should an out-of-state licensed practitioner be permitted to avoid taking an exam?
 - (2) Should an out-of-state licensed practitioner who graduated from a program not approved by the Board be permitted to obtain a license in Wisconsin?
- c. What about persons who have not graduated from an American Board of Genetic Counseling (ABGC)-accredited program? Persons who have not been certified by ABGC? Would these individuals need to provide some other evidence of their competency/skills?

4. Practice requirements. Did you wish to include any practice requirements? For example, the statutes governing podiatrists impose restrictions on fee splitting and establish guidelines for billing. See s. 448.67. The statutes governing physical therapists impose the former requirements, make the practice of physical therapy contingent on the physical therapist receiving a written referral, and establish conditions in which a physical therapist has a duty to refer the patient to an appropriate health care practitioner. See s. 448.56.

5. Coverage under Health Insurance Risk-Sharing Plans. Did you wish to include genetic counseling services under the Health Insurance Risk-Sharing Plan under ~~subchapter II~~ ^{subch. III of ch.} of ch. 149? As drafted, genetic counseling services are not included.

6. Penalties. The proposed penalties provision is adopted from ~~Chapter~~ ^{subch. III of ch.} 448, ~~Subchapter III~~, which regulates physical therapists. Please advise if you wish to increase, decrease or eliminate the penalty.

7. Rule making. The genetic counselors affiliated credentialing board is required to submit proposed rules to the Joint Legislative Counsel no later than the first day of the ^{beginning} 8th month after publication, and may prepare emergency rules to go into effect before the permanent rules have been finalized. Please let me know if you would like to modify these provisions.

8. Delayed effective date. With the exception of the requirements related to licensure, proposed ~~sections~~ ^{ch.} 448.971, 448.974, and 448.976, which go into effect on the first day of the ^{beginning} 13th month after publication, the bill goes into effect on the day after publication. The exceptions provide the affiliated credentialing board with time to promulgate rules, and give persons practicing in the field of genetic counseling time to comply with the affiliated credentialing board's rules. Please let me know if you would like to modify the effective dates.

9. Other statutes. Finally, please be aware that, in addition to regulating genetic counselors under a new subchapter of ~~Chapter~~ ^{ch.} 448, this bill does each of the following: 1) makes current law regarding the preservation, destruction, and confidentiality of patient health care records applicable to genetic counselors; 2) includes genetic counselors in the definition of "health care provider" for the requirements under

current law for powers of attorney for health care and for the prohibition under current law on discrimination related to acquired immunodeficiency syndrome; 3) requires a genetic counselor, like other professionals under current law, to make certain reports regarding abused or neglected children; and 4) provides to genetic counselors the same protection from discipline under current law that is available to other health care professionals who make certain reports regarding violations of laws applicable to pharmacists or controlled substances or of laws or clinical or ethical standards by health care facilities, health care providers, or employees of such facilities or providers.

Please contact me after you have had an opportunity to review the draft so that we can discuss the open questions raised in this drafter's note and make any additional changes to this draft. ✕

Tracy K. Kuczenski
Legislative Attorney
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E-mail: tracy.kuczenski@legis.wisconsin.gov

DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRB-0760/P1dn
TKK:wlj:jf

February 9, 2007

Senator Darling:

Please review the attached draft to ensure that it is consistent with your intent.

In addition to the notes embedded in the text of the draft, I have a number of questions:

1. Title protection. I have included a provision granting title protection to genetic counselors. See proposed s. 448.971 (2). This section prohibits a person from referring to himself or herself as a genetic counselor, licensed genetic counselor, or registered genetic counselor or affixing "G.C.," "L.G.C.," or "R.G.C." to his or her name unless that person is licensed under subch. VIII of ch. 448. Are these appropriate titles and initials? Could they be confused with any other licensed or registered fields? Are there other more appropriate titles that should be used instead?
2. Compensation as an element of the practice of genetic counseling. Do you wish to include compensation as an element of the definition of the practice of genetic counseling? See, for example, s. 453.02 (6) governing the practice of veterinary medicine. When compensation is included as part of the definition, persons who provide gratuitous genetic counseling services do not fall under the purview of the affiliated credentialing board's regulatory authority.
3. Licensure of genetic counselor assistants. Did you wish to provide for the licensure of genetic counselor assistants? See, for example, the title protection and licensure provisions for physical therapist assistants at ss. 448.51 (1s) and 448.535. As drafted, this bill does not contemplate genetic counselor assistants.
3. Regarding "grandfathering," alternative certification requirements and waivers. In the absence of any "grandfathering" provision, some persons who have practiced in the profession before the statute goes into effect but who do not meet all of the licensing requirements may not be permitted to pursue their livelihoods. A "grandfathering" provision offers a path by which the affiliated credentialing board can grant a license under certain circumstances; for example, if the person demonstrates that he or she has met certain requirements or has practiced for a certain period of time. It is possible to impose a deadline by which all applicants for a license will be required to meet the statutory requirements.

With these thoughts in mind, please consider whether the genetic counselor affiliated credentialing board should be empowered to:

- a. Grant temporary licenses? Under what conditions?
 - b. Grant reciprocal licensure to persons who are licensed in other states but who do not meet one or more of the requirements in Wisconsin? For example:
 - (1) Should an out-of-state licensed practitioner be permitted to avoid taking an exam?
 - (2) Should an out-of-state licensed practitioner who graduated from a program not approved by the board be permitted to obtain a license in Wisconsin?
 - c. What about persons who have not graduated from an American Board of Genetic Counseling (ABGC)-accredited program? Persons who have not been certified by ABGC? Would these individuals need to provide some other evidence of their competency/skills?
4. Practice requirements. Did you wish to include any practice requirements? For example, the statutes governing podiatrists impose restrictions on fee splitting and establish guidelines for billing. See s. 448.67. The statutes governing physical therapists impose the former requirements, make the practice of physical therapy contingent on the physical therapist receiving a written referral, and establish conditions in which a physical therapist has a duty to refer the patient to an appropriate health care practitioner. See s. 448.56.
5. Coverage under Health Insurance Risk-Sharing Plans. Did you wish to include genetic counseling services under the Health Insurance Risk-Sharing Plan under subch. II of ch. 149? As drafted, genetic counseling services are not included.
6. Penalties. The proposed penalties provision is adopted from subch. III of ch. 448, which regulates physical therapists. Please advise if you wish to increase, decrease, or eliminate the penalty.
7. Rule making. The genetic counselors affiliated credentialing board is required to submit proposed rules to the Joint Legislative Counsel no later than the first day of the eighth month beginning after publication, and may prepare emergency rules to go into effect before the permanent rules have been finalized. Please let me know if you would like to modify these provisions.
8. Delayed effective date. With the exception of the requirements related to licensure, proposed s. 448.971, 448.974, and 448.976, which go into effect on the first day of the thirteenth month beginning after publication, the bill goes into effect on the day after publication. The exceptions provide the affiliated credentialing board with time to promulgate rules, and give persons practicing in the field of genetic counseling time to comply with the affiliated credentialing board's rules. Please let me know if you would like to modify the effective dates.
9. Other statutes. Finally, please be aware that, in addition to regulating genetic counselors under a new subchapter of ch. 448, this bill does each of the following: 1) makes current law regarding the preservation, destruction, and confidentiality of patient health care records applicable to genetic counselors; 2) includes genetic counselors in the definition of "health care provider" for the requirements under

current law for powers of attorney for health care and for the prohibition under current law on discrimination related to acquired immunodeficiency syndrome; 3) requires a genetic counselor, like other professionals under current law, to make certain reports regarding abused or neglected children; and 4) provides to genetic counselors the same protection from discipline under current law that is available to other health care professionals who make certain reports regarding violations of laws applicable to pharmacists or controlled substances or of laws or clinical or ethical standards by health care facilities, health care providers, or employees of such facilities or providers.

Please contact me after you have had an opportunity to review the draft so that we can discuss the open questions raised in this drafter's note and make any additional changes to this draft.

Tracy K. Kuczenski
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