2015 ASSEMBLY BILL 253

June 4, 2015 – Introduced by Representatives VANDERMEER, PETRYK, KRUG, JACQUE, ALLEN, BALLWEG, BERNIER, BRANDTJEN, E. BROOKS, R. BROOKS, EDMING, GANNON, HEATON, HORLACHER, HUTTON, JAGLER, JARCHOW, KATZMA, KITCHENS, KNODL, KNUDSON, KREMER, KUGLITSCH, KULP, T. LARSON, MURPHY, MURSAU, MURTHA, NERISON, NOVAK, A. OTT, J. OTT, QUINN, RIPP, ROHrkaste, STEFFEN, SWEARINGEN, TAUCHEN, THIESFELDT, TITTL, TRANEL, VORPAGEL, WEATHERSTON, BARNES, BILLINGS, DANOU, DOYLE, GENRICH, GOYKE, KAHL, KOLSTE, RIEMER, SUBECK and WACS, cosponsored by Senators HARSdorf, COWLES, MOULTON, ERPEnBACH, CARPENTER, GUDEX, MARKLEIN, BEwLEY, HARRIS DODD, LASSA, OLSen, RINGHAND, ROTH, SHILLING, VINEHOUT and WANGGAARD. Referred to Committee on Health.

AN ACT to renumber and amend 440.03 (11m) (c); to amend 20.165 (1) (hg), 440.03 (13) (b) (intro.), 440.03 (13) (d), 440.05 (intro.), 440.08 (2) (c), 440.14 (2), 440.14 (3), 440.15, 448.01 (5), 448.05 (2) (a) (intro.), 448.05 (2) (b) (intro.), 448.07 (1) (a) and 448.07 (2); and to create 14.83, 440.03 (11m) (c) 2., 440.08 (2) (e), 448.015 (1dm), 448.04 (1) (ab), 448.05 (2) (f) and subchapter VIII of chapter 448 [precedes 448.980] of the statutes; relating to: ratification of the Interstate Medical Licensure Compact and making appropriations.

Analysis by the Legislative Reference Bureau

This bill ratifies and enters Wisconsin into the Interstate Medical Licensure Compact (compact), which provides for, as stated in the compact, “a streamlined process that allows physicians to become licensed in multiple states.” Provisions in the compact are to be administered by boards that regulate physicians in the states that are parties to the compact (member boards). Significant provisions of the compact include:

1. The creation of an Interstate Medical Licensure Compact Commission (commission), which includes two representatives of each member board. The commission has various powers and duties granted in the compact, including overseeing the administration of the compact, enforcing the compact, adopting bylaws, promulgating binding rules for the compact, employing an executive director and employees, and maintaining records.
2. A process whereby a physician who possesses a license to engage in the practice of medicine issued by a member board and who satisfies other criteria designates a state where the physician is already licensed as his or her state of principal license and applies to the member board in that state for licensure through the compact. After a verification and registration process that includes a background check, the physician may receive an “expedited license” in other states that are parties to the compact. If a physician’s license in his or her state of principal license is revoked or suspended, then all expedited licenses issued by other states are revoked or suspended as well until each is reinstated.

3. The ability for member boards to conduct joint investigations of physicians and the ability of member states to issue subpoenas that are enforceable in other states.

4. The creation of a coordinated information system including a database of all physicians who have applied for or received an expedited license. The compact requires, or in other cases allows, for member boards to submit public actions, complaints, or disciplinary information to the commission.

The compact provides that it becomes effective upon being enacted into law by seven states and that it may be amended upon enactment of an amendment by all member states. A state may withdraw from the compact by repealing the statute authorizing the compact, but the compact provides that a withdrawal does not take effect until one year after the effective date of that repeal.

The compact provides that laws of a member state that are not inconsistent with the compact may be enforced, but that all laws of a member state in conflict with the compact are superseded to the extent of the conflict.

In addition to enacting the compact, the bill provides all of the following:

1. Numerous limitations on the sharing of information under the compact about physicians, including limiting disclosures to physicians who have designated or applied to designate this state as their state of principal license or who hold or are applying to hold expedited licenses granted by the Wisconsin Medical Examining Board (MEB). The bill also includes limitations with respect to the enforceability of subpoenas under the compact and investigations of other states’ medical practice laws.

2. A requirement that the Wisconsin MEB report annually to the Joint Committee on Finance about investigations of physicians under the compact.

3. That payment of this state’s assessments under the commission is from licensure fees paid by physicians who have applied for licensure through the compact.

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:

Section 1. 14.83 of the statutes is created to read:
**14.83 Interstate medical licensure compact.** There is created an interstate medical licensure compact commission as specified in s. 448.980. The members of the commission representing this state under s. 448.980 (11) (d) shall be members of the medical examining board and shall be appointed by the chairperson of the medical examining board. The commission has the powers and duties granted and imposed under s. 448.980.

**SECTION 2.** 20.165 (1) (hg) of the statutes is amended to read:

20.165 (1) (hg) General program operations; medical examining board; interstate medical licensure compact; prescription drug monitoring program. Biennially, the amounts in the schedule for the licensing, rule-making, and regulatory functions of the medical examining board and the affiliated credentialing boards attached to the medical examining board, except for preparing, administering, and grading examinations; for any costs associated with the interstate medical licensure compact under s. 448.980, including payment of assessments under s. 448.980 (13) (a); and for the pharmacy examining board's operation of the prescription drug monitoring program under s. 450.19. Ninety percent of all moneys received for issuing and renewing credentials under ch. 448 shall be credited to this appropriation. All moneys received from the interstate medical licensure compact commission under s. 448.980 shall be credited to this appropriation.

**SECTION 3.** 440.03 (11m) (c) of the statutes is renumbered 440.03 (11m) (c) (intro.) and amended to read:

440.03 (11m) (c) (intro.) The department of safety and professional services may not disclose a social security number obtained under par. (a) to any person except for the following:
1. The coordinated licensure information system under s. 441.50 (7);

3. The department of children and families for purposes of administering s. 49.22; and,

4. For a social security number obtained under par. (a) 1., the department of revenue for the purpose of requesting certifications under s. 73.0301 and administering state taxes and the department of workforce development for the purpose of requesting certifications under s. 108.227.

**SECTION 4.** 440.03 (11m) (c) 2. of the statutes is created to read:

440.03 (11m) (c) 2. The coordinated licensure information system under s. 448.980 (8), if such disclosure is required under the interstate medical licensure compact under s. 448.980.

**SECTION 5.** 440.03 (13) (b) (intro.) of the statutes is amended to read:

440.03 (13) (b) (intro.) The department may investigate whether an applicant for or holder of any of the following credentials has been charged with or convicted of a crime only pursuant to rules promulgated by the department under this paragraph, including rules that establish the criteria that the department will use to determine whether an investigation under this paragraph is necessary, except as provided in par. (c) and s. 448.980 (5) (b) 3.;

**SECTION 6.** 440.03 (13) (d) of the statutes is amended to read:

440.03 (13) (d) The department shall charge an applicant any fees, costs, or other expenses incurred in conducting any investigation under this subsection or s. 440.26. The department shall charge an applicant seeking licensure through the interstate medical licensure compact under s. 448.980, directly or indirectly, for any expenses incurred in conducting any investigation under s. 448.980 (5) (b) 3.

**SECTION 7.** 440.05 (intro.) of the statutes is amended to read:
440.05 **Standard fees.** (intro.) The following standard fees apply to all initial credentials, except as provided in ss. 440.51, 444.03, 444.11, 446.02 (2) (c), 447.04 (2) (c) 2., 448.07 (2), 449.17 (1m) (d), and 449.18 (2) (d):

**SECTION 8.** 440.08 (2) (c) of the statutes is amended to read:

440.08 (2) (c) Except as provided in par. (e) and sub. (3), renewal applications shall include the applicable renewal fee as determined by the department under s. 440.03 (9) (a) or as specified in par. (b).

**SECTION 9.** 440.08 (2) (e) of the statutes is created to read:

440.08 (2) (e) A renewal of a compact license, as defined in s. 448.015 (1dm), shall be governed by s. 448.980 (7) and is subject to s. 448.07 (2).

**SECTION 10.** 440.14 (2) of the statutes is amended to read:

440.14 (2) If a form that the department or a credentialing board requires an individual to complete in order to apply for a credential or credential renewal or to obtain a product or service from the department or the credentialing board requires the individual to provide any of the individual’s personal identifiers, the form shall include a place for the individual to declare that the individual’s personal identifiers obtained by the department or the credentialing board from the information on the form may not be disclosed on any list that the department or the credentialing board furnishes to another person. **This subsection does not apply with respect to an application filed with the medical examining board pursuant to the interstate medical licensure compact under s. 448.980 (5).**

**SECTION 11.** 440.14 (3) of the statutes is amended to read:

440.14 (3) If the department or a credentialing board requires an individual to provide, by telephone or other electronic means, any of the individual’s personal identifiers in order to apply for a credential or credential renewal or to obtain a
product or service from the department or a credentialing board, the department or
the credentialing board shall ask the individual at the time that the individual
provides the information if the individual wants to declare that the individual’s
personal identifiers obtained by telephone or other electronic means may not be
disclosed on any list that the department or the credentialing board furnishes to
another person. This subsection does not apply with respect to an application filed
with the medical examining board pursuant to the interstate medical licensure
compact under s. 448.980 (5).

SECTION 12. 440.15 of the statutes is amended to read:

440.15 No fingerprinting. Except as provided under ss. 440.03 (13) (c) and
448.980 (5) (b) 3., the department or a credentialing board may not require that an
applicant for a credential or a credential holder be fingerprinted or submit
fingerprints in connection with the department’s or the credentialing board’s
credentialing.

SECTION 13. 448.01 (5) of the statutes is amended to read:

448.01 (5) “Physician” means an individual possessing the degree of doctor of
medicine or doctor of osteopathy or an equivalent degree as determined by the
medical examining board, and holding a license granted by the medical examining
board. This subsection does not apply in s. 448.980.

SECTION 14. 448.015 (1dm) of the statutes is created to read:

448.015 (1dm) “Compact license” means an expedited license granted by the
board pursuant to the interstate medical licensure compact under s. 448.980.

SECTION 15. 448.04 (1) (ab) of the statutes is created to read:

448.04 (1) (ab) Compact license. The board may grant a compact license
pursuant to the interstate medical licensure compact under s. 448.980.
SECTION 16. 448.05 (2) (a) (intro.) of the statutes, as affected by 2013 Wisconsin Act 240, is amended to read:

448.05 (2) (a) (intro.) Except as provided in pars. (b) to (e) (f), an applicant for any class of license to practice medicine and surgery must supply evidence satisfactory to the board of all of the following:

SECTION 17. 448.05 (2) (b) (intro.) of the statutes, as affected by 2013 Wisconsin Act 240, is amended to read:

448.05 (2) (b) (intro.) Except as provided in pars. (c) to (e) (f), an applicant for a license to practice medicine and surgery who is a graduate of a foreign medical college must supply evidence satisfactory to the board of all of the following:

SECTION 18. 448.05 (2) (f) of the statutes is created to read:

448.05 (2) (f) The board shall grant a compact license as provided under s. 448.980.

SECTION 19. 448.07 (1) (a) of the statutes is amended to read:

448.07 (1) (a) Every person licensed or certified under this subchapter shall register on or before November 1 of each odd-numbered year following issuance of the license or certificate with the board. Registration shall be completed in such manner as the board shall designate and upon forms the board shall provide, except that registration with respect to a compact license shall be governed by the renewal provisions in s. 448.980 (7). The secretary of the board, on or before October 1 of each odd-numbered year, shall mail or cause to be mailed to every person required to register a registration form. The board shall furnish to each person registered under this section a certificate of registration, and the person shall display the registration certificate conspicuously in the office at all times. No person may exercise the rights
or privileges conferred by any license or certificate granted by the board unless currently registered as required under this subsection.

**SECTION 20.** 448.07 (2) of the statutes is amended to read:

> 448.07 (2) FEES. The Except as otherwise provided in s. 448.980, the fees for examination and licenses granted under this subchapter are specified in s. 440.05, and the renewal fee for such licenses is determined by the department under s. 440.03 (9) (a). Compact licenses shall be subject to additional fees and assessments, as established by the department, the board, or the interstate medical licensure compact commission, to cover any costs incurred by the department or the board for this state’s participation in the interstate medical licensure compact under s. 448.980 and costs incurred by the interstate medical licensure compact commission for its administration of the renewal process for the interstate medical licensure compact under s. 448.980.

**SECTION 21.** Subchapter VIII of chapter 448 [precedes 448.980] of the statutes is created to read:

**CHAPTER 448**

**SUBCHAPTER VIII**

**INTERSTATE MEDICAL LICENSURE COMPACT**

**448.980 Interstate medical licensure compact.** The following compact is hereby ratified and entered into:

**(1) SECTION 1 – PURPOSE.** In order to strengthen access to health care, and in recognition of the advances in the delivery of health care, the member states of the interstate medical licensure compact have allied in common purpose to develop a comprehensive process that complements the existing licensing and regulatory
authority of state medical boards, provides a streamlined process that allows physicians to become licensed in multiple states, thereby enhancing the portability of a medical license and ensuring the safety of patients. The compact creates another pathway for licensure and does not otherwise change a state’s existing medical practice act. The compact also adopts the prevailing standard for licensure and affirms that the practice of medicine occurs where the patient is located at the time of the physician–patient encounter, and therefore, requires the physician to be under the jurisdiction of the state medical board where the patient is located. State medical boards that participate in the compact retain the jurisdiction to impose an adverse action against a license to practice medicine in that state issued to a physician through the procedures in the compact.

(2) **SECTION 2 — DEFINITIONS.** In this compact:

(a) “Bylaws” means those bylaws established by the interstate commission pursuant to sub. (11) for its governance, or for directing and controlling its actions and conduct.

(b) “Commissioner” means the voting representative appointed by each member board pursuant to sub. (11).

(c) “Conviction” means a finding by a court that an individual is guilty of a criminal offense through adjudication, or entry of a plea of guilt or no contest to the charge by the offender. Evidence of an entry of a conviction of a criminal offense by the court shall be considered final for purposes of disciplinary action by a member board.

(d) “Expedited license” means a full and unrestricted medical license granted by a member state to an eligible physician through the process set forth in the compact.
(e) “Interstate commission” means the interstate commission created pursuant to sub. (11).

(f) “License” means authorization by a state for a physician to engage in the practice of medicine, which would be unlawful without the authorization.

(g) “Medical practice act” means laws and regulations governing the practice of allopathic and osteopathic medicine within a member state.

(h) “Member board” means a state agency in a member state that acts in the sovereign interests of the state by protecting the public through licensure, regulation, and education of physicians as directed by the state government.

(i) “Member state” means a state that has enacted the compact.

(j) “Practice of medicine” means the clinical prevention, diagnosis, or treatment of human disease, injury, or condition requiring a physician to obtain and maintain a license in compliance with the medical practice act of a member state.

(k) “Physician” means any person who:

1. Is a graduate of a medical school accredited by the Liaison Committee on Medical Education, the Commission on Osteopathic College Accreditation, or a medical school listed in the International Medical Education Directory or its equivalent;

2. Passed each component of the United States Medical Licensing Examination (USMLE) or the Comprehensive Osteopathic Medical Licensing Examination (COMLEX–USA) within 3 attempts, or any of its predecessor examinations accepted by a state medical board as an equivalent examination for licensure purposes;

3. Successfully completed graduate medical education approved by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association;
4. Holds specialty certification or a time–unlimited specialty certificate recognized by the American Board of Medical Specialties or the American Osteopathic Association’s Bureau of Osteopathic Specialists;

5. Possesses a full and unrestricted license to engage in the practice of medicine issued by a member board;

6. Has never been convicted, received adjudication, deferred adjudication, community supervision, or deferred disposition for any offense by a court of appropriate jurisdiction;

7. Has never held a license authorizing the practice of medicine subjected to discipline by a licensing agency in any state, federal, or foreign jurisdiction, excluding any action related to non-payment of fees related to a license;

8. Has never had a controlled substance license or permit suspended or revoked by a state or the United States Drug Enforcement Administration; and

9. Is not under active investigation by a licensing agency or law enforcement authority in any state, federal, or foreign jurisdiction.

(L) “Offense” means a felony, gross misdemeanor, or crime of moral turpitude.

(m) “Rule” means a written statement by the interstate commission promulgated pursuant to sub. (12) that is of general applicability, implements, interprets, or prescribes a policy or provision of the compact, or an organizational, procedural, or practice requirement of the interstate commission, and has the force and effect of statutory law in a member state, and includes the amendment, repeal, or suspension of an existing rule.

(n) “State” means any state, commonwealth, district, or territory of the United States.
(o) “State of principal license” means a member state where a physician holds a license to practice medicine and which has been designated as such by the physician for purposes of registration and participation in the compact.

(3) SECTION 3 — ELIGIBILITY. (a) A physician must meet the eligibility requirements as defined in sub. (2) (k) to receive an expedited license under the terms and provisions of the compact.

(b) A physician who does not meet the requirements of sub. (2) (k) may obtain a license to practice medicine in a member state if the individual complies with all laws and requirements, other than the compact, relating to the issuance of a license to practice medicine in that state.

(4) SECTION 4 — DESIGNATION OF STATE OF PRINCIPAL LICENSE. (a) A physician shall designate a member state as the state of principal license for purposes of registration for expedited licensure through the compact if the physician possesses a full and unrestricted license to practice medicine in that state, and the state is:

1. The state of primary residence for the physician; or
2. The state where at least 25% of the practice of medicine occurs, or
3. The location of the physician’s employer; or
4. If no state qualifies under subd. 1., 2., or 3., the state designated as state of residence for purpose of federal income tax.

(b) A physician may redesignate a member state as state of principal license at any time, as long as the state meets the requirements in par. (a).

(c) The interstate commission is authorized to develop rules to facilitate redesignation of another member state as the state of principal license.

(5) SECTION 5 — APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE. (a) A physician seeking licensure through the compact shall file an application for an
expedited license with the member board of the state selected by the physician as the state of principal license.

(b) 1. Upon receipt of an application for an expedited license, the member board within the state selected as the state of principal license shall evaluate whether the physician is eligible for expedited licensure and issue a letter of qualification, verifying or denying the physician's eligibility, to the interstate commission.

   2. Static qualifications, which include verification of medical education, graduate medical education, results of any medical or licensing examination, and other qualifications as determined by the interstate commission through rule, shall not be subject to additional primary source verification where already primary source verified by the state of principal license.

   3. The member board within the state selected as the state of principal license shall, in the course of verifying eligibility, perform a criminal background check of an applicant, including the use of the results of fingerprint or other biometric data checks compliant with the requirements of the federal bureau of investigation, with the exception of federal employees who have suitability determination in accordance with 5 CFR 731.202.

   4. Appeal on the determination of eligibility shall be made to the member state where the application was filed and shall be subject to the law of that state.

(c) Upon verification in par. (b), physicians eligible for an expedited license shall complete the registration process established by the interstate commission to receive a license in a member state selected pursuant to par. (a), including the payment of any applicable fees.

(d) After receiving verification of eligibility under par. (b) and any fees under par. (c), a member board shall issue an expedited license to the physician. This
license shall authorize the physician to practice medicine in the issuing state consistent with the medical practice act and all applicable laws and regulations of the issuing member board and member state.

(e) An expedited license shall be valid for a period consistent with the licensure period in the member state and in the same manner as required for other physicians holding a full and unrestricted license within the member state.

(f) An expedited license obtained though the compact shall be terminated if a physician fails to maintain a license in the state of principal licensure for a non-disciplinary reason, without redesignation of a new state of principal licensure.

(g) The interstate commission is authorized to develop rules regarding the application process, including payment of any applicable fees, and the issuance of an expedited license.

(6) Section 6 — Fees for Expedited Licensure. (a) A member state issuing an expedited license authorizing the practice of medicine in that state may impose a fee for a license issued or renewed through the compact.

(b) The interstate commission is authorized to develop rules regarding fees for expedited licenses.

(7) Section 7 — Renewal and Continued Participation. (a) A physician seeking to renew an expedited license granted in a member state shall complete a renewal process with the interstate commission if the physician:

1. Maintains a full and unrestricted license in a state of principal license;

2. Has not been convicted, received adjudication, deferred adjudication, community supervision, or deferred disposition for any offense by a court of appropriate jurisdiction;
3. Has not had a license authorizing the practice of medicine subject to discipline by a licensing agency in any state, federal, or foreign jurisdiction, excluding any action related to non-payment of fees related to a license; and

4. Has not had a controlled substance license or permit suspended or revoked by a state or the United States Drug Enforcement Administration.

(b) Physicians shall comply with all continuing professional development or continuing medical education requirements for renewal of a license issued by a member state.

(c) The interstate commission shall collect any renewal fees charged for the renewal of a license and distribute the fees to the applicable member board.

(d) Upon receipt of any renewal fees collected in par. (c), a member board shall renew the physician’s license.

(e) Physician information collected by the interstate commission during the renewal process will be distributed to all member boards.

(f) The interstate commission is authorized to develop rules to address renewal of licenses obtained through the compact.

(8) Section 8 — Coordinated Information System. (a) The interstate commission shall establish a database of all physicians licensed, or who have applied for licensure, under sub. (5).

(b) Notwithstanding any other provision of law, member boards shall report to the interstate commission any public action or complaints against a licensed physician who has applied or received an expedited license through the compact.

(c) Member boards shall report disciplinary or investigatory information determined as necessary and proper by rule of the interstate commission.
(d) Member boards may report any non-public complaint, disciplinary, or investigatory information not required by par. (c) to the interstate commission.

(e) Member boards shall share complaint or disciplinary information about a physician upon request of another member board.

(f) All information provided to the interstate commission or distributed by member boards shall be confidential, filed under seal, and used only for investigatory or disciplinary matters.

(g) The interstate commission is authorized to develop rules for mandated or discretionary sharing of information by member boards.

(9) SECTION 9 — JOINT INVESTIGATIONS. (a) Licensure and disciplinary records of physicians are deemed investigative.

(b) In addition to the authority granted to a member board by its respective medical practice act or other applicable state law, a member board may participate with other member boards in joint investigations of physicians licensed by the member boards.

(c) A subpoena issued by a member state shall be enforceable in other member states.

(d) Member boards may share any investigative, litigation, or compliance materials in furtherance of any joint or individual investigation initiated under the compact.

(e) Any member state may investigate actual or alleged violations of the statutes authorizing the practice of medicine in any other member state in which a physician holds a license to practice medicine.

(10) SECTION 10 — DISCIPLINARY ACTIONS. (a) Any disciplinary action taken by any member board against a physician licensed through the compact shall be deemed
unprofessional conduct which may be subject to discipline by other member boards, in addition to any violation of the medical practice act or regulations in that state.

(b) If a license granted to a physician by the member board in the state of principal license is revoked, surrendered or relinquished in lieu of discipline, or suspended, then all licenses issued to the physician by member boards shall automatically be placed, without further action necessary by any member board, on the same status. If the member board in the state of principal license subsequently reinstates the physician’s license, a license issued to the physician by any other member board shall remain encumbered until that respective member board takes action to reinstate the license in a manner consistent with the medical practice act of that state.

(c) If disciplinary action is taken against a physician by a member board not in the state of principal license, any other member board may deem the action conclusive as to matter of law and fact decided, and:

1. Impose the same or lesser sanctions against the physician so long as such sanctions are consistent with the medical practice act of that state; or

2. Pursue separate disciplinary action against the physician under its respective medical practice act, regardless of the action taken in other member states.

(d) If a license granted to a physician by a member board is revoked, surrendered or relinquished in lieu of discipline, or suspended, then any license issued to the physician by any other member board shall be suspended, automatically and immediately without further action necessary by the other member board, for 90 days upon entry of the order by the disciplining board, to permit the member board to investigate the basis for the action under the medical practice
act of that state. A member board may terminate the automatic suspension of the
license it issued prior to the completion of the 90 day suspension period in a manner
consistent with the medical practice act of that state.

(11) SECTION 11 — INTERSTATE MEDICAL LICENSURE COMPACT COMMISSION. (a) The
member states hereby create the “Interstate Medical Licensure Compact
Commission.”

(b) The purpose of the interstate commission is the administration of the
interstate medical licensure compact, which is a discretionary state function.

(c) The interstate commission shall be a body corporate and joint agency of the
member states and shall have all the responsibilities, powers, and duties set forth
in the compact, and such additional powers as may be conferred upon it by a
subsequent concurrent action of the respective legislatures of the member states in
accordance with the terms of the compact.

(d) The interstate commission shall consist of 2 voting representatives
appointed by each member state who shall serve as commissioners. In states where
allopathic and osteopathic physicians are regulated by separate member boards, or
if the licensing and disciplinary authority is split between multiple member boards
within a member state, the member state shall appoint one representative from each
member board. A Commissioner shall be:

1. An allopathic or osteopathic physician appointed to a member board;
2. An executive director, executive secretary, or similar executive of a member
board; or
3. A member of the public appointed to a member board.

(e) The interstate commission shall meet at least once each calendar year. A
portion of this meeting shall be a business meeting to address such matters as may
properly come before the commission, including the election of officers. The
chairperson may call additional meetings and shall call for a meeting upon the
request of a majority of the member states.

(f) The bylaws may provide for meetings of the interstate commission to be
carried out by telecommunication or electronic communication.

(g) Each commissioner participating at a meeting of the interstate commission
is entitled to one vote. A majority of commissioners shall constitute a quorum for the
transaction of business, unless a larger quorum is required by the bylaws of the
interstate commission. A commissioner shall not delegate a vote to another
commissioner. In the absence of its commissioner, a member state may delegate
voting authority for a specified meeting to another person from that state who shall
meet the requirements of par. (d).

(h) The interstate commission shall provide public notice of all meetings and
all meetings shall be open to the public. The interstate commission may close a
meeting, in full or in portion, where it determines by a two-thirds vote of the
commissioners present that an open meeting would be likely to:

1. Relate solely to the internal personnel practices and procedures of the
   interstate commission;
2. Discuss matters specifically exempted from disclosure by federal statute;
3. Discuss trade secrets, commercial, or financial information that is privileged
   or confidential;
4. Involve accusing a person of a crime, or formally censuring a person;
5. Discuss information of a personal nature where disclosure would constitute
   a clearly unwarranted invasion of personal privacy;
6. Discuss investigative records compiled for law enforcement purposes; or
7. Specifically relate to the participation in a civil action or other legal proceeding.

(i) The interstate commission shall keep minutes which shall fully describe all matters discussed in a meeting and shall provide a full and accurate summary of actions taken, including record of any roll call votes.

(j) The interstate commission shall make its information and official records, to the extent not otherwise designated in the compact or by its rules, available to the public for inspection.

(k) The interstate commission shall establish an executive committee, which shall include officers, members, and others as determined by the bylaws. The executive committee shall have the power to act on behalf of the interstate commission, with the exception of rule making, during periods when the interstate commission is not in session. When acting on behalf of the interstate commission, the executive committee shall oversee the administration of the compact including enforcement and compliance with the provisions of the compact, its bylaws and rules, and other such duties as necessary.

(L) The Interstate commission may establish other committees for governance and administration of the compact.

(12) Section 12 — Powers and Duties of the Interstate Commission. The interstate commission shall have the duty and power to:

(a) Oversee and maintain the administration of the compact;

(b) Promulgate rules which shall be binding to the extent and in the manner provided for in the compact;
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(c) Issue, upon the request of a member state or member board, advisory opinions concerning the meaning or interpretation of the compact, its bylaws, rules, and actions;

(d) Enforce compliance with compact provisions, the rules promulgated by the interstate commission, and the bylaws, using all necessary and proper means, including but not limited to the use of judicial process;

(e) Establish and appoint committees including, but not limited to, an executive committee as required by sub. (11), which shall have the power to act on behalf of the interstate commission in carrying out its powers and duties;

(f) Pay, or provide for the payment of the expenses related to the establishment, organization, and ongoing activities of the interstate commission;

(g) Establish and maintain one or more offices;

(h) Borrow, accept, hire, or contract for services of personnel;

(i) Purchase and maintain insurance and bonds;

(j) Employ an executive director who shall have such powers to employ, select or appoint employees, agents, or consultants, and to determine their qualifications, define their duties, and fix their compensation;

(k) Establish personnel policies and programs relating to conflicts of interest, rates of compensation, and qualifications of personnel;

(L) Accept donations and grants of money, equipment, supplies, materials and services, and to receive, utilize, and dispose of it in a manner consistent with the conflict of interest policies established by the interstate commission;

(m) Lease, purchase, accept contributions or donations of, or otherwise to own, hold, improve or use, any property, real, personal, or mixed;
(n) Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of any property, real, personal, or mixed;

(o) Establish a budget and make expenditures;

(p) Adopt a seal and bylaws governing the management and operation of the interstate commission;

(q) Report annually to the legislatures and governors of the member states concerning the activities of the interstate commission during the preceding year. Such reports shall also include reports of financial audits and any recommendations that may have been adopted by the interstate commission;

(r) Coordinate education, training, and public awareness regarding the compact, its implementation, and its operation;

(s) Maintain records in accordance with the bylaws;

(t) Seek and obtain trademarks, copyrights, and patents; and

(u) Perform such functions as may be necessary or appropriate to achieve the purposes of the compact.

(13) Section 13 — Finance powers. (a) The interstate commission may levy on and collect an annual assessment from each member state to cover the cost of the operations and activities of the interstate commission and its staff. The total assessment must be sufficient to cover the annual budget approved each year for which revenue is not provided by other sources. The aggregate annual assessment amount shall be allocated upon a formula to be determined by the interstate commission, which shall promulgate a rule binding upon all member states.

(b) The interstate commission shall not incur obligations of any kind prior to securing the funds adequate to meet the same.
(c) The interstate commission shall not pledge the credit of any of the member states, except by, and with the authority of, the member state.

(d) The interstate commission shall be subject to a yearly financial audit conducted by a certified or licensed public accountant and the report of the audit shall be included in the annual report of the interstate commission.

(14) **SECTION 14 — ORGANIZATION AND OPERATION OF THE INTERSTATE COMMISSION.**

(a) The interstate commission shall, by a majority of commissioners present and voting, adopt bylaws to govern its conduct as may be necessary or appropriate to carry out the purposes of the compact within 12 months of the first interstate commission meeting.

(b) The interstate commission shall elect or appoint annually from among its commissioners a chairperson, a vice-chairperson, and a treasurer, each of whom shall have such authority and duties as may be specified in the bylaws. The chairperson, or in the chairperson’s absence or disability, the vice-chairperson, shall preside at all meetings of the interstate commission.

(c) Officers selected in par. (b) shall serve without remuneration from the interstate commission.

(d) 1. The officers and employees of the interstate commission shall be immune from suit and liability, either personally or in their official capacity, for a claim for damage to or loss of property or personal injury or other civil liability caused or arising out of, or relating to, an actual or alleged act, error, or omission that occurred, or that such person had a reasonable basis for believing occurred, within the scope of interstate commission employment, duties, or responsibilities; provided that such person shall not be protected from suit or liability for damage, loss, injury, or liability caused by the intentional or willful and wanton misconduct of such person.
2. The liability of the executive director and employees of the interstate commission or representatives of the interstate commission, acting within the scope of such person’s employment or duties for acts, errors, or omissions occurring within such person’s state, may not exceed the limits of liability set forth under the constitution and laws of that state for state officials, employees, and agents. The interstate commission is considered to be an instrumentality of the states for the purposes of any such action. Nothing in this paragraph shall be construed to protect such person from suit or liability for damage, loss, injury, or liability caused by the intentional or willful and wanton misconduct of such person.

3. The interstate commission shall defend the executive director, its employees, and subject to the approval of the attorney general or other appropriate legal counsel of the member state represented by an interstate commission representative, shall defend such interstate commission representative in any civil action seeking to impose liability arising out of an actual or alleged act, error or omission that occurred within the scope of interstate commission employment, duties or responsibilities, or that the defendant had a reasonable basis for believing occurred within the scope of interstate commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from intentional or willful and wanton misconduct on the part of such person.

4. To the extent not covered by the state involved, member state, or the interstate commission, the representatives or employees of the interstate commission shall be held harmless in the amount of a settlement or judgment, including attorney fees and costs, obtained against such persons arising out of an actual or alleged act, error, or omission that occurred within the scope of interstate commission employment, duties, or responsibilities, or that such persons had a
reasonable basis for believing occurred within the scope of interstate commission employment, duties, or responsibilities, provided that the actual or alleged act, error, or omission did not result from intentional or willful and wanton misconduct on the part of such persons.

(15) Section 15 - Rule-making functions of the interstate commission. (a) The interstate commission shall promulgate reasonable rules in order to effectively and efficiently achieve the purposes of the compact. Notwithstanding the foregoing, in the event the interstate commission exercises its rule-making authority in a manner that is beyond the scope of the purposes of the compact, or the powers granted hereunder, then such an action by the interstate commission shall be invalid and have no force or effect.

(b) Rules deemed appropriate for the operations of the interstate commission shall be made pursuant to a rule-making process that substantially conforms to the “Model State Administrative Procedure Act” of 2010, and subsequent amendments thereto.

(c) Not later than 30 days after a rule is promulgated, any person may file a petition for judicial review of the rule in the United States District Court for the District of Columbia or the federal district where the interstate commission has its principal offices, provided that the filing of such a petition shall not stay or otherwise prevent the rule from becoming effective unless the court finds that the petitioner has a substantial likelihood of success. The court shall give deference to the actions of the interstate commission consistent with applicable law and shall not find the rule to be unlawful if the rule represents a reasonable exercise of the authority granted to the interstate commission.
(16) SECTION 16 — OVERSIGHT OF INTERSTATE COMPACT. (a) The executive, 
legislative, and judicial branches of state government in each member state shall 
enforce the compact and shall take all actions necessary and appropriate to 
effectuate the compact’s purposes and intent. The provisions of the compact and the 
rules promulgated hereunder shall have standing as statutory law but shall not 
override existing state authority to regulate the practice of medicine.

(b) All courts shall take judicial notice of the compact and the rules in any 
judicial or administrative proceeding in a member state pertaining to the subject 
matter of the compact which may affect the powers, responsibilities or actions of the 
interstate commission.

(c) The interstate commission shall be entitled to receive all service of process 
in any such proceeding, and shall have standing to intervene in the proceeding for 
all purposes. Failure to provide service of process to the interstate commission shall 
render a judgment or order void as to the interstate commission, the compact, or 
promulgated rules.

(17) SECTION 17 — ENFORCEMENT OF INTERSTATE COMPACT. (a) The interstate 
commission, in the reasonable exercise of its discretion, shall enforce the provisions 
and rules of the compact.

(b) The interstate commission may, by majority vote of the commissioners, 
initiate legal action in the United States District Court for the District of Columbia, 
or, at the discretion of the interstate commission, in the federal district where the 
interstate commission has its principal offices, to enforce compliance with the 
provisions of the compact, and its promulgated rules and bylaws, against a member 
state in default. The relief sought may include both injunctive relief and damages.
In the event judicial enforcement is necessary, the prevailing party shall be awarded all costs of such litigation including reasonable attorney fees.

(c) The remedies herein shall not be the exclusive remedies of the interstate commission. The interstate commission may avail itself of any other remedies available under state law or the regulation of a profession.

(18) SECTION 18 — DEFAULT PROCEDURES. (a) The grounds for default include, but are not limited to, failure of a member state to perform such obligations or responsibilities imposed upon it by the compact, or the rules and bylaws of the interstate commission promulgated under the compact.

(b) If the interstate commission determines that a member state has defaulted in the performance of its obligations or responsibilities under the compact, or the bylaws or promulgated rules, the interstate commission shall:

1. Provide written notice to the defaulting state and other member states, of the nature of the default, the means of curing the default, and any action taken by the interstate commission. The interstate commission shall specify the conditions by which the defaulting state must cure its default; and

2. Provide remedial training and specific technical assistance regarding the default.

(c) If the defaulting state fails to cure the default, the defaulting state shall be terminated from the compact upon an affirmative vote of a majority of the commissioners and all rights, privileges, and benefits conferred by the compact shall terminate on the effective date of termination. A cure of the default does not relieve the offending state of obligations or liabilities incurred during the period of the default.
(d) Termination of membership in the compact shall be imposed only after all other means of securing compliance have been exhausted. Notice of intent to terminate shall be given by the interstate commission to the governor, the majority and minority leaders of the defaulting state’s legislature, and each of the member states.

(e) The interstate commission shall establish rules and procedures to address licenses and physicians that are materially impacted by the termination of a member state, or the withdrawal of a member state.

(f) The member state which has been terminated is responsible for all dues, obligations, and liabilities incurred through the effective date of termination including obligations, the performance of which extends beyond the effective date of termination.

(g) The interstate commission shall not bear any costs relating to any state that has been found to be in default or which has been terminated from the compact, unless otherwise mutually agreed upon in writing between the interstate commission and the defaulting state.

(h) The defaulting state may appeal the action of the interstate commission by petitioning the United States District Court for the District of Columbia or the federal district where the interstate commission has its principal offices. The prevailing party shall be awarded all costs of such litigation including reasonable attorney fees.

(19) SECTION 19 — DISPUTE RESOLUTION. (a) The interstate commission shall attempt, upon the request of a member state, to resolve disputes which are subject to the compact and which may arise among member states or member boards.
(b) The interstate commission shall promulgate rules providing for both mediation and binding dispute resolution as appropriate.

(20) SECTION 20 — MEMBER STATES, EFFECTIVE DATE AND AMENDMENT. (a) Any state is eligible to become a member state of the compact.

(b) The compact shall become effective and binding upon legislative enactment of the compact into law by no less than 7 states. Thereafter, it shall become effective and binding on a state upon enactment of the compact into law by that state.

(c) The governors of non-member states, or their designees, shall be invited to participate in the activities of the interstate commission on a non-voting basis prior to adoption of the compact by all states.

(d) The interstate commission may propose amendments to the compact for enactment by the member states. No amendment shall become effective and binding upon the interstate commission and the member states unless and until it is enacted into law by unanimous consent of the member states.

(21) SECTION 21 — WITHDRAWAL. (a) Once effective, the compact shall continue in force and remain binding upon each and every member state; provided that a member state may withdraw from the compact by specifically repealing the statute which enacted the compact into law.

(b) Withdrawal from the compact shall be by the enactment of a statute repealing the same, but shall not take effect until one year after the effective date of such statute and until written notice of the withdrawal has been given by the withdrawing state to the governor of each other member state.

(c) The withdrawing state shall immediately notify the chairperson of the interstate commission in writing upon the introduction of legislation repealing the compact in the withdrawing state.
(d) The interstate commission shall notify the other member states of the withdrawing state’s intent to withdraw within 60 days of its receipt of notice provided under par. (c).

(e) The withdrawing state is responsible for all dues, obligations and liabilities incurred through the effective date of withdrawal, including obligations, the performance of which extend beyond the effective date of withdrawal.

(f) Reinstatement following withdrawal of a member state shall occur upon the withdrawing state reenacting the compact or upon such later date as determined by the interstate commission.

(g) The interstate commission is authorized to develop rules to address the impact of the withdrawal of a member state on licenses granted in other member states to physicians who designated the withdrawing member state as the state of principal license.

(22) SECTION 22 — DISSOLUTION. (a) The compact shall dissolve effective upon the date of the withdrawal or default of the member state which reduces the membership in the compact to one member state.

(b) Upon the dissolution of the compact, the compact becomes null and void and shall be of no further force or effect, and the business and affairs of the interstate commission shall be concluded and surplus funds shall be distributed in accordance with the bylaws.

(23) SECTION 23 — SEVERABILITY AND CONSTRUCTION. (a) The provisions of the compact shall be severable, and if any phrase, clause, sentence, or provision is deemed unenforceable, the remaining provisions of the compact shall be enforceable.

(b) The provisions of the compact shall be liberally construed to effectuate its purposes.
(c) Nothing in the compact shall be construed to prohibit the applicability of other interstate compacts to which the states are members.

(24) SECTION 24 — BINDING EFFECT OF COMPACT AND OTHER LAWS. (a) Nothing herein prevents the enforcement of any other law of a member state that is not inconsistent with the compact.

(b) All laws in a member state in conflict with the compact are superseded to the extent of the conflict.

(c) All lawful actions of the interstate commission, including all rules and bylaws promulgated by the commission, are binding upon the member states.

(d) All agreements between the interstate commission and the member states are binding in accordance with their terms.

(e) In the event any provision of the compact exceeds the constitutional limits imposed on the legislature of any member state, such provision shall be ineffective to the extent of the conflict with the constitutional provision in question in that member state.

448.981 Implementation of the interstate medical licensure compact.

(1) In this section:

(a) “Board” means the medical examining board.

(b) “Compact” means the interstate medical licensure compact entered into under s. 448.980.

(c) “Expedited license” has the meaning given in s. 448.980 (2) (d).

(d) “Interstate commission” has the meaning given in s. 448.980 (2) (e).

(e) “Member board” has the meaning given in s. 448.980 (2) (h).

(f) “Member state” has the meaning given in s. 448.980 (2) (i).

(g) “State of principal license” has the meaning given in s. 448.980 (2) (o).
(2) Notwithstanding s. 448.980 and any rules promulgated by the interstate commission under s. 448.980, the board may only disclose information about an individual pursuant to the compact if the information meets all of the following criteria:

(a) Any of the following applies:

1. The individual has a current expedited license granted by the board pursuant to the compact.

2. The individual has a current expedited license granted by another member state or is applying to receive an expedited license in another member state, and Wisconsin is currently designated as his or her state of principal license.

3. The individual is requesting to designate Wisconsin as his or her state of principal license pursuant to the compact.

4. The individual is applying to receive an expedited license to practice in Wisconsin pursuant to the compact.

(b) The information is provided only to a member board with responsibility for authorizing the practice of medicine in the member state or to the interstate commission.

(c) If the information pertains to an investigation or discipline, all identifying information of individuals or entities other than the individual being investigated or disciplined is removed.

(d) The information is not confidential under the laws of this state.

(3) A subpoena issued pursuant to s. 448.980 (9) (c) shall only be enforceable in this state or against a citizen of this state if all of the following apply:

(a) The subpoena is issued by a member board with responsibility for authorizing the practice of medicine in the member state.
(b) The individual being subpoenaed is one of the following:

1. A physician with a current expedited license granted by the board pursuant to the compact.

2. A physician with a current expedited license granted by another member state, and Wisconsin is currently designated as the physician's state of principal license.

(4) In applying s. 448.980 (9) (e), the board may only undertake such investigation of violations of another state's statute authorizing the practice of medicine if one of the following applies:

1. The physician being investigated has a current expedited license that was granted by the board and a current expedited license that was granted by the other state pursuant to the compact.

2. The physician being investigated has a current expedited license that was granted by the board pursuant to the compact and the other state is the physician's currently designated state of principal license.

3. The physician being investigated has a current expedited license that was granted by the other state pursuant to the compact and Wisconsin is the physician's currently designated state of principal license.

(5) The board shall, by January 1 of each year, report to the members of the joint committee on finance the number of individuals investigated by the board solely pursuant to s. 448.980 (9) (e) and the expenses incurred by the board undertaking investigations pursued solely pursuant to s. 448.980 (9) (e).

(6) The payment of assessments for the interstate medical licensure compact under s. 448.980 (13) (a) shall be made from the appropriation account under s. 20.165 (1) (hg) using the licensure fees paid by physicians licensed under the
compact. No fees from physicians that have not applied for licensure through the
compact shall be used to pay Wisconsin’s annual assessment pursuant to s. 448.980
(13) (a) without the approval of the joint committee on finance.

(END)