
Wisconsin Legislative Council

AMENDMENT MEMO



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2019 Assembly Bill 546

Assembly Amendment 2

2019 ASSEMBLY BILL 546

2019 Assembly Bill 546 allows complementary and alternative health care practitioners to practice without obtaining an occupational credential as a health care professional. Specifically, under the bill, a complementary and alternative health care practitioner may engage in a health care practice or method of healing therapy or modality that would otherwise fall within the scope of practice for any of the following occupations: medicine or surgery; professional nursing; physician assistants; perfusion; respiratory care; physical therapy; dietetics; occupational therapy; optometry; pharmacy; cosmetology; psychology; marriage and family therapy; professional counseling; social work; selling fit hearing aids; speech-language pathology; massage or bodywork therapy; midwifery; and emergency medical services (including ambulance service providers, emergency medical services practitioners, and emergency medical responders).

The bill defines the scope of practice for complementary and alternative health care practitioners by identifying a list of prohibited acts. Practitioners may not do any of the following: perform surgery; set fractures; puncture the skin, except by pricking a finger for purposes of blood screening; prescribe or administer prescription drugs or devices; perform chiropractic adjustments or manipulate the joints or spine; or make a medical diagnosis. A practitioner also may not recommend that a client discontinue prescribed treatment and may not hold out, state, or imply to a person that he or she is a licensed health care professional. The bill also lists a number of prohibited acts, which constitute misconduct, such as sexual misconduct, false advertisement, improper release of a client's records or information, and improper acts relating to referrals.

Any person may act as a complementary and alternative health care practitioner, except for a person who: (1) is or was a credentialed health care professional and had his or her credential revoked or suspended, unless the credential was subsequently reinstated; (2) was convicted of a felony, the circumstances of which relate to providing health care; and (3) is found to be incompetent for guardianship purposes under s. 54.01 (16), Stats.

The bill requires complementary and alternative health care practitioners to make a number of disclosures to clients. For example, a practitioner must disclose that he or she is not practicing under a credential; must provide a list of any degree, training, experience, or other qualification he or she holds; and must disclose certain information regarding billing practices. The client must sign a written acknowledgment that he or she has been provided with this information, and the practitioner is required to maintain each signed acknowledgment for two years.

If a practitioner violates any of these standards, the Department of Safety and Professional Services (DSPS) may request in writing that the practitioner correct the violation. For a violation of any standard other than the disclosure requirements, DSPS may issue a cease and desist order that prohibits the practitioner from engaging in any conduct that violates chs. 440 to 480, Stats.

ASSEMBLY AMENDMENT 2

Assembly Amendment 2 makes three changes to the bill. First, it specifies that complementary and alternative health care includes all of the following: acupuncture; aromatherapy; ayurveda; body work; cranial sacral therapy; culturally traditional healing practices; detoxification practices and therapies; folk practices; healing practices utilizing food, food supplements, nutrients, and the physical forces of heat, cold, water, touch, and light; healing touch; herbology or herbalism; homeopathy; kinesiology; massage and massage therapy; meditation; mind-body healing practices; polarity therapy; reflexology; rolfing; and traditional naturopathy.

Second, the amendment retains the language in the bill that prohibits a complementary and alternative health care practitioner from making a medical diagnosis but adds language to specify that a practitioner may make a “general assessment regarding normal structure or function in humans.”

Finally, the amendment states that, in addition to the disclosures required under the bill, a practitioner must also disclose the source and duration of any degree, training, experience, or other qualification that he or she has or holds regarding the complementary and alternative health care services to be provided.

BILL HISTORY

Representative Felzkowski introduced 2019 Assembly Bill 546 on October 14, 2019, and offered Assembly Amendment 2 on February 11, 2020. On February 13, 2020, the Assembly Committee on Health recommended adoption of the amendment and passage of the bill, as amended, each on a vote of Ayes, 9; Noes, 6.

AB:ksm