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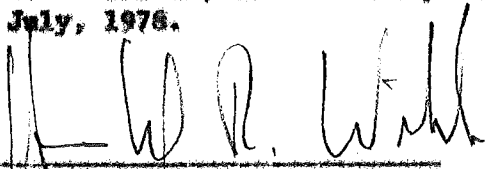
STATE OF WISCONSIN)
) ss
OFFICE OF THE COMMISSIONER OF INSURANCE)

TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

I, Harold R. Wilde, Commissioner of Insurance and custodian of the official records of said office, do hereby certify that the annexed order adopting a rule regarding payment of compensation fund fees was issued by this office on July 19, 1978.

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

IN TESTIMONY WHEREOF, I have hereto subscribed my name in the City of Madison, State of Wisconsin, this 19th day of July, 1978.



Harold R. Wilde
Commissioner of Insurance

STATE OF WISCONSIN
DEPARTMENT OF STATE
RECEIVED AND FILED

JUL 20 1978

DOUGLAS LAFOLLETTE
SECRETARY OF STATE

JUL 20 1978

ORDER OF THE OFFICE OF THE COMMISSIONER OF INSURANCE

Adopting Rules

DOUGLAS LAFOLLETTE
SECRETARY OF STATE

Pursuant to authority vested in the Commissioner of Insurance by section 601.41 (3), Wis. Stats., the Commissioner of Insurance hereby adopts a rule section Ins 17.01, Wisconsin Administrative Code as follows:

Ins 17.01 Payment of Compensation Fund Fees (ss. 655.21 and 655.27, Stats.).

(1) PURPOSE. This rule implements the provisions of ch. 655, Stats., relating to the payment of fees to the Patients Compensation Fund.

(2) SCOPE. This rule applies to each health care provider as defined in s. 655.001, Stats., except hospitals, nursing homes or other facilities subject to regulation by the department of health and social services.

(3) DEFINITIONS. For the purpose of this rule the definition of terms used shall be those definitions set forth in s. 655.001, Stats.

(4) Payment of fees to finance Patients Compensation Panels.

(a) Once in each fiscal year each physician operating in this state shall pay, in accordance with a billing schedule adopted by the commissioner, the annual fee established by s. 655.21 (1) (a), Stats.

(b) Such fee is due and payable upon receipt of the billing by the physician.

(c) Any physician who has not paid the fee within 30 days from the date the billing is received shall be deemed to be in noncompliance with s. 655.21 (1) (a), Stats.

(d) The commissioner shall notify the department of regulation and licensing of each physician who has not paid the fee and who is, therefore, in noncompliance with s. 655.21 (1) (a), Stats.

(e) The commissioner may upon a showing of sufficient cause extend the period for a payment for an additional period of time to be determined by the commissioner.

(5) Payment of Operating Fees to Patients Compensation Fund.

(a) Once in each fiscal year each health care provider, except hospitals, nursing homes or other facilities subject to regulation by the department of health and social services, shall pay in accordance with a billing schedule adopted by the commissioner the annual fee determined in accordance with s. 655.27 (3) (c), Stats.

(b) Such fees are due and payable upon receipt of the billing by the health care provider.

(c) Any health care provider who has not paid the fee within thirty days from the date the billing is received shall be deemed to be in noncompliance with s. 655.23 (1), Stats., and subject to the penalty provisions of s. 655.23 (6) and (7), Stats.

(d) The commissioner shall notify the department of regulation and licensing of each health care provider who has not paid the fee and who is, therefore, in noncompliance with s. 655.23 (1), Stats.

(e) The commissioner may upon a showing of sufficient cause extend the period for payment of fees for an additional period of time to be determined by the Commissioner.

Dated at Madison, Wisconsin this 19th day of July, 1978.



Harold R. Wilde
Commissioner of Insurance