(c) For resident physicians and surgeons who practice outside residency or fellowship:

All classes

\$1,397.00

(d) For Medical College of Wisconsin full time faculty:

Class 1	\$ 741.00	Class 5	\$3,815.00
Class 2	1,484.00	Class 6	4,579.00
Class 3	1,908.00	Class 7	5,343.00
Class 4	2,290.00	Class 9	8,014.00

(e) For Medical College of Wisconsin resident physicians and surgeons:

1. Class 1	\$ 904.00	Class 5	\$4,653.00
Class 2	1,809.00	Class 6	5,584.00
Class 3	2,328.00	Class 7	6,515.00
Class 4	2,793.00	Class 9	9,774.00

- 2. The assessment paid by medical college of Wisconsin shall be determined by multiplying the resident class fee by the number of resident physician exposures in that class as determined by audit by the primary insurance carrier.
- 3. Initial assessments, payable on issuance of the policy, shall be computed on the basis of the number of exposures per class during the prior participation period. Final assessments, payable at the end of the policy period, shall be the initial assessment adjusted for actual physician exposures during the participation period as determined by audit by the primary insurance carrier.
 - (f) For government employes—state, federal, municipal:

Class 1	\$1,357.00	Class 6	\$8,377.00
Class 2	2,713.00	Class 7	9,774.00
Class 3 Class 4	3,490.00 4.188.00	Class 8	678.00
Class 5	6.981.00	Class 9	14,659,00

(g) For retired or part time physicians and surgeons with an office practice only and no hospital admissions who practice less than 500 hours per year:

Cla Cla	ss 1 ss 8	Physicians Osteopathic pl	nysicians	\$1,085.00 543.00
(h) For m	ırse anesthetisi	ts		\$ 542.00
	odiatrists, nons odiatrists, surgi			\$ 459.00 \$2,578.00
		me podiatrists,) hours practice		office \$ 276.00
		graduate podia		\$1,547.00
(j) For h	ospitals—per o	ccupied bed	a selak a dire Makabasa	\$154.00
(k) For m	ursing homes—	per occupied be	d ·	\$ 29.00
			Register, Dece	ember, 1985, No. 360

Ins 17

- (7) COLLECTION OF FEES. In the event that the effective date for the rule establishing the fees for fiscal year 1985-1986 does not take effect prior to June 2, 1985, (a) for all health care providers permanently practicing or operating in the state on July 1, 1985, the commissioner shall
- 1. On July 1, 1985, or as soon as feasible thereafter, bill health care providers for the fees assessed for fiscal year 1984-1985 for the provider's particular class;
- 2. On January 1, 1986, or as soon as feasible thereafter, bill all health care providers except podiatrists the difference between the fee assessment for the provider's particular class for fiscal year 1985-1986 and the fee assessment for the provider's class for fiscal year 1984-1985;
- 3. With the January 1, 1986, billing notice, advise all health care providers except podiatrists of their right to pay the remaining fee assessment in one payment or to pay the remaining fee assessment in two equal payments, the first payment to be made in January, 1986, and the second in April, 1986;
- 4. On April 1, 1986, or as soon as feasible thereafter, bill all health care providers, except podiatrists, who chose the option to pay the remaining fee assessment in 2 equal payments one-half the difference between the fee assessment for the provider's particular class for fiscal year 1985-1986 and the fee assessment for the provider's class for fiscal year 1984-1985.
- 5. Include with the January 1, 1986, and the April 1, 1986, billing statements a fee assessment for the interest the fund could reasonably have expected to earn had the fee assessment for 1985-1986 been paid in total at the beginning of the fiscal year. The rate of interest shall be the average annualized rate earned by the fund for the preceding fiscal year as determined by the state investment board.
- (b) No refunds due to changes in classification shall be given to health care providers until after January 1, 1986. Refunds due to death, retirement, or change of residence shall be determined on a pro rata basis of the fee assessments for fiscal year 1985-1986.
- (c) Health care providers, except podiatrists, who begin practicing or operating at any time after July 1, 1985, and before December 31, 1985, shall be assessed and shall pay in one sum the pro rata fee subject to sub. (4) for fiscal year 1985-1986 from the date the provider begins practicing or operating through December 31, 1985. On January 1, 1986, or as soon as possible thereafter, the commissioner shall bill all health care providers except podiatrists who entered the fund after July 1, 1985, one-half of the fee assessment for fiscal year 1985-1986. With the January 1, 1986, billing notice, all health care providers shall be advised of their right to pay the remaining fee assessment in one payment or to pay the remaining fee assessment in 2 equal payments, the first payment to be made in January, 1986, and the second in April, 1986. Interest shall be assessed in accordance with par. (a) 5.
- (d) Health care providers who begin practicing or operating at any time after January 1, 1986, and before June 30, 1986, shall be assessed and shall pay in one sum the pro-rata fee subject to sub. (4) for fiscal year 1985-1986 from the date the provider begins practicing or operating through June 30, 1986.

Register, December, 1985, No. 360

(e) Podiatrists who begin operating or practicing at any time after July 1, 1985 and before June 30, 1986 shall be assessed and shall pay in one sum the pro rata fee subject to sub. (4) for fiscal year 1984-1985 for the podiatrist's classification.

History: Cr. Register, June, 1980, No. 294, eff. 7-1-80; am. (6), Register, June, 1981, No. 306, eff. 7-1-81; r. and recr. (6), Register, June, 1982, No. 318, eff. 7-1-82; am. (6) (h) and (i), Register, August, 1982, No. 320, eff. 9-1-82, am. (6), Register, June, 1983, No. 330, eff. 7-1-83; am. (6) (i), Register, June, 1984, No. 342, eff. 7-1-94; am. (6) (i), Register, June, 1984, No. 342, eff. 7-1-94; am. (6) (i), Register, June, 1984, No. 342, eff. 7-1-94; am. (6) (i), Register, June, 1984, No. 342, eff. 7-1-94; am. (6) (i), Register, Juny, 1984, No. 344, eff. 9-1-84; am. (3) (c) and (6) (intro.), (a) to (e) 1., (f) to (h), (j) and (k), r. (intro.), cr. (3) (c) 1. to 9, and (7), Register, July, 1985, No. 355, eff. 8-1-85; am. (7) (a) 2. and (e), r. (7) (a) 5., renum. (7) (a) 3. and 4. to be 4. and 5. and am., cr. (7) (a) 3., Register, December, 1985, No. 360, eff. 1-1-86.

Ins 17.29 Servicing agent. (1) Purpose. The purpose of this section is to implement and interpret the provisions of s. 655.27 (2), Stats., relating to contracting for patients compensation fund services.

- (2) Scope. This section applies to adminstration and staff services for the fund.
- (3) SELECTION. The selection of a servicing agent shall conform with s. 16.765, Stats. The commissioner, with the approval of the board, shall select a servicing agent through the competitive negotiation process to provide services for the fund based on criteria established by the board.
- (4) TERM SERVED AND SELECTION FOR SUCCEEDING PERIODS. The term served by the servicing agent shall be as established by the commissioner with the approval of the board but the contract shall include a provision for its cancellation if performance or delivery is not made in accordance with its terms and conditions.
- (5) Functions. (a) The servicing agent shall perform functions agreed to in the contract between the servicing agent and the office of the commissioner of insurance as approved by the board. The contract shall provide for an annual report to the commissioner and board of all expenses incurred and subcontracting arrangements.
- (b) Additional functions to be performed by the servicing agent may include but are not limited to:
 - 1. Hiring legal counsel.
 - Establishment and revision of case reserves.
 - 3. Contracting for annuity payments as part of structured settlements.
 - 4. Investigation and evaluation of claims.
- 5. Negotiation to settlement of all claims made against the fund except those responsibilities retained by the claim committee of the board.
 - 6. Filing of reports to the board.
- 7. Review of panel decisions and court verdicts and recommendations of appeals as needed.

History: Cr. Register, February, 1984, No. 338, eff. 3-1-84.