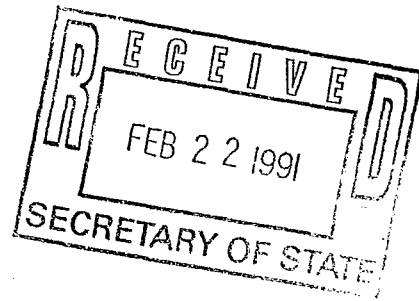


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STATE OF WISCONSIN )  
OFFICE OF THE COMMISSIONER OF INSURANCE)

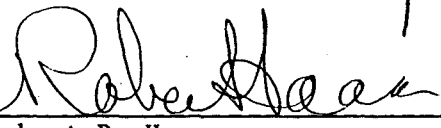
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I, Robert D. Haase, Commissioner of Insurance and custodian of the official records of this Office, certify that the attached rule-making order affecting s. Ins 17.28, Wis. Adm. Code, relating to refunds to health care providers who are not eligible to participate in the Patients Compensation Fund, was issued by this Office on Feb. 22, 1991.

I further certify that I have compared this copy with the original on file in this Office and that it is a true copy of the whole of the original.

Dated at Madison, Wisconsin, this 22d day of February 1991.

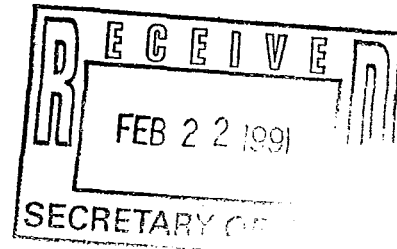
  
Robert D. Haase  
Commissioner of Insurance

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ORDER OF THE OFFICE OF THE COMMISSIONER OF INSURANCE

AMENDING AND CREATING A RULE

To amend Ins 17.28 (4) (g); and to create Ins 17.28 (4) (cs) and (f) (title), relating to refunds to health care providers who are not eligible to participate in the patients compensation fund.

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ANALYSIS PREPARED BY THE OFFICE OF THE COMMISSIONER OF INSURANCE

Statutory authority: ss. 601.41 (3) and 655.004, Stats.

Statutes Interpreted: ss. 655.003 and 655.27 (3), Stats.

This rule codifies a current practice of the patients compensation fund (fund). The fund issues a full refund to any health care provider who is not eligible to participate in the fund because the provider is a public employe or does not practice in Wisconsin, but nevertheless has paid the fund fee. The current rule would limit the amount of any retroactive refund to a one and one-half month period preceding the date the fund receives notice that the fee was paid in error. This addition to the fund fee rule is promulgated at the recommendation of the legislative audit bureau.

This rule also requires the fund to issue a refund to any provider that is ineligible for fund coverage because the provider did not have primary

coverage during a period when it was required, or that failed to keep the provider's coverage in effect by means of an extended reporting endorsement.

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SECTION 1. Ins 17.28 (4) (cs) and (f) (title) are created to read:

Ins 17.28 (4) (cs) 1. Ineligibility for fund coverage; refund. If a provider who has paid all or part of the annual fee is or becomes ineligible to participate in the fund because he or she is a federal, state, county or municipal employe, or does not practice in this state, the fund shall issue a full refund of any amount the provider paid for fund coverage for which he or she was not eligible.

2. If a provider that has paid all or part of the annual fee is ineligible for fund coverage because the provider is not in compliance with sub. (3e), the fund shall issue a full refund of the amount paid for the period of noncompliance, beginning with the date the noncompliance began.

(f) (title) Refund of interest.

SECTION 2. Ins 17.28 (4) (g) is amended to read:

Ins 17.28 (4) (g) (title) Refund for administrative error. In addition to any refund authorized under par. (c), (cm), (cs), (e) or (f), the fund may issue a refund to correct an administrative error in the current or any previous fiscal year.


SECTION 3. EFFECTIVE DATE. This rule will take effect on the first day of the first month after publication, as provided in s. 227.22 (2) (intro.), Stats.

Dated at Madison, Wisconsin, this 22d day of February 1991.

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Robert D. Haase  
Commissioner of Insurance