

## ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

<b>1. Type of Estimate and Analysis</b> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	<b>2. Date</b> December 7, 2022
<b>3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable)</b> AT 1 and 4	
<b>4. Subject</b> References to Consulting Physician	
<b>5. Fund Sources Affected</b> <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	<b>6. Chapter 20, Stats. Appropriations Affected</b>
<b>7. Fiscal Effect of Implementing the Rule</b> <input checked="" type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
<b>8. The Rule Will Impact the Following (Check All That Apply)</b> <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses <b>(if checked, complete Attachment A)</b>	
<b>9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1).</b> \$0	
<b>10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>11. Policy Problem Addressed by the Rule</b> The objective of the proposed rule is to implement the statutory changes from 2021 Wisconsin Act 71.	
<b>12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments.</b> The proposed rules were posted on the Department's website for a period of 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.	
<b>13. Identify the Local Governmental Units that Participated in the Development of this EIA.</b> None.	
<b>14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)</b> None.	
<b>15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule</b> The benefits of implementing this rule is consistency between the Wisconsin statutes and administrative rules.	
<b>16. Long Range Implications of Implementing the Rule</b> The long range implications of implementing this rule are that Athletic Trainers will no longer be required to consult with a physician when providing services..	
<b>17. Compare With Approaches Being Used by Federal Government</b> None.	
<b>18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)</b> Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of Athletic Trainers in Illinois, with input from the Illinois Board of Athletic Trainers. The Illinois Board is also responsible for the promulgation of rules to implement certain sections of the Illinois Athletic Trainers Practice Act. This	

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Act includes requirements for consultation and referral to a team or consulting physician (225 Illinois Compiled Statutes Chapter 5 Section 3 Subsection 4). The Illinois Administrative Code does not include rules address consultation with a licensed physician as it relates to the scope of practice of athletic training (Illinois Administrative Code Title 68 Section 1160).

Iowa: The Iowa Public Health Department is responsible for the licensure and regulation of Athletic Trainers in Iowa, with input from the Iowa Board of Athletic Trainers. Chapter 152D of the Iowa Code outlines the statutes for the regulation of the practice of athletic training in Iowa. These statutes include general requirements for licensure and duties of the Iowa Board (Iowa Code Title IV Chapter 152D). The Iowa Administrative Code includes rules that establish that each licensee must ensure that documentation of physician direction is obtained and maintained, including an athletic training service plan, referrals, initial evaluations and assessments, and dates of subsequent follow-up care (645 Iowa Administrative Code Chapter 351).

Michigan: The Michigan Athletic Trainer Board is responsible for the licensure and regulation of Athletic Trainers in Michigan. Act 368 Article 15 of the Michigan Compiled Laws includes the regulations for Athletic Trainers in Michigan, among several other occupations (Michigan Compiled Laws Act 368 Article 15 Chapter 333 Part 179). The Michigan Department of Licensing and Regulatory Affairs, in conjunction with the Michigan Board, promulgates administrative rules that include requirements for licensure, education, and examination, among other topics. Neither the statutes or the administrative rules include requirements for consultation with or referral to a licensed physician as it relates to the scope of practice of athletic training (Michigan Administrative Code R 338.1301-R 338.1378).

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of Athletic Trainers in Minnesota. The Minnesota Athletic Trainers Act includes statutory requirements for limitations on practice, licensure, and continuing education, among other topics. According to section 148.7807 of these requirements, an Athletic Trainer must refer a patient to a person licensed to practice medicine in Minnesota if they determine that a medical condition is beyond their scope of practice (Minnesota Statutes Section 148.7801 to 148.78015). Part 5600 of the Minnesota Administrative Code includes rules establish by the Minnesota Board, but does not mention requirements for consultation with or referral to a licensed physician as it relates to the scope of practice of athletic training (Minnesota Administrative Rules Chapters 5600 to 5620).

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19. Contact Name	20. Contact Phone Number
Nilajah Hardin, Administrative Rules Coordinator	608-267-7139

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**ATTACHMENT A**

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1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

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2. Summary of the data sources used to measure the Rule's impact on Small Businesses

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3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
- Less Stringent Schedules or Deadlines for Compliance or Reporting
- Consolidation or Simplification of Reporting Requirements
- Establishment of performance standards in lieu of Design or Operational Standards
- Exemption of Small Businesses from some or all requirements
- Other, describe:

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4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

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5. Describe the Rule's Enforcement Provisions

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6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes     No
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