STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION DOA-2049 (R09/2016) DIVISION OF EXECUTIVE BUDGET AND FINANCE 101 EAST WILSON STREET, 10TH FLOOR P.O. BOX 7864 MADISON, WI 53707-7864 FAX: (608) 267-0372

ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

Type of Estimate and Analysis Original ☐ Updated ☐ Corrected	2. Date	
	10/05/22	
 Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Med 13 		
4. Subject Continuing Medical Education for Physicians		
5. Fund Sources Affected ☐ GPR ☐ FED ☐ PRO ☐ PRS ☐ SEG ☐ SEG-S	6. Chapter 20, Stats. Appropriations Affected s. 20.165 (1) (hg)	
7. Fiscal Effect of Implementing the Rule ☐ No Fiscal Effect ☐ Increase Existing Revenues ☐ Indeterminate ☐ Decrease Existing Revenues	 ☑ Increase Costs ☑ Could Absorb Within Agency's Budget 	
8. The Rule Will Impact the Following (Check All That Apply) ☐ State's Economy ☐ Specific Businesses/Sectors		
· · · · · · · · · · · · · · · · · · ·	c Utility Rate Payers	
	Businesses (if checked, complete Attachment A)	
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0		
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)?		
☐ Yes ☐ No		
11. Policy Problem Addressed by the Rule		
The Medical Examining Board will update ch. Med 13 to extend the requirement that 2 of the 30 required continuing		
medical education (CME) hours per biennium shall be in a course or program related to opioid prescribing into the		
biennium ending November 2023, and to modify the requirement to include courses or programs concerning controlled		
substances generally. Additionally, the Board will re-evaluate and modify or remove the requirement that educational		
programs related to opioid prescribing or controlled substances be pre-approved by the Board.		
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.		
The rule was posted for 14 days on the Department of Safety and Professional Services' website to solicit comments on		
the potential economic impact. No comments were received.		
13. Identify the Local Governmental Units that Participated in the Development of this EIA. None.		
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)		
The rule will not have an economic or fiscal impact on specific businesses, business sectors, public utility rate payers,		
local governmental units or the state's economy as a whole. The Department estimates a total of \$470 one-time administrative costs, which may be absorbed in the agency budget.		
15. Benefits of Implementing the Rule and Alternative(s) to Implementation		
The benefits of implementing this rule are that Physicians will continue maintain their knowledge and training on		
_ prescribing opioids and other controlled substances.		
16. Long Range Implications of Implementing the Rule		
The long range implications of implementing this rule are improved practice for Physicians in Wisconsin and better overall patient		

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None.

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota) Illinois: Rules of the Illinois Department of Financial and Professional Regulation establish continuing medical education requirements for physicians licensed in Illinois [68 Ill. Adm. Code 1285.110]. The rules do not require continuing education related to prescribing opioids or other controlled substances.

Iowa: Rules of the Iowa Board of Medicine establish continuing education requirements for physicians licensed in Iowa [653 IAC 11]. The rules require a licensee who has prescribed opioids to a patient during the previous license period to complete at least 2 hours of category 1 credit regarding the United States Centers for Disease Control and Prevention (CDC) guideline for prescribing opioids for chronic pain, including recommendations on limitations on dosages and the length of prescriptions, risk factors for abuse, and nonopioid and nonpharmacologic therapy options, every 5 years [653 IAC 11.4(1) d. (1)].

Michigan: Rules of the Michigan Department of Licensing and Regulatory Affairs establish continuing medical education requirements for physicians licensed in Michigan [Mich Admin Code, R 338.2441 to R 338.2443]. The rules require a minimum of 3 hours of continuing education to be earned in pain and symptom management, including any of the following areas:

- Public health burden of pain.
- Ethics and health policy related to pain.
- Michigan pain and controlled substance laws.
- Pain definitions.
- Basic sciences related to pain including pharmacology.
- Clinical sciences related to pain.
- Specific pain conditions.
- Clinical physician communication related to pain.
- Management of pain, including evaluation and treatment and nonpharmacological and pharmacological management.
- Ensuring quality pain care and controlled substances prescribing.
- Michigan programs and resources relevant to pain.

Minnesota: Rules of the Minnesota Board of Medical Practice establish continuing education requirements for physicians licensed in Minnesota [Minnesota Rules, chapter 5605]. The rules do not require continuing education related to prescribing opioids or other controlled substances.

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

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ATTACHMENT A

 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)
2. Summary of the data sources used to measure the Rule's impact on Small Businesses
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:
4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses
5. Describe the Rule's Enforcement Provisions
6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form) ☐ Yes ☐ No