THE WISCONSIN PROTECTING THE PRACTICE OF MEDICINE ACT

A Proposed Legislative Recommendation to the Wisconsin Legislative Council Study Committee on the Use of Artificial Intelligence in Health Care

Submitted by Ramsey G. Larson, MD | Family Medicine | Fort HealthCare | Fort Atkinson, Wisconsin | September 9, 2026

Purpose: To draw a clear, enforceable legal line in Wisconsin — artificial intelligence may *assist* the practice of medicine, but it may not *replace* it. This Act ensures licensed Wisconsin physicians retain final authority over all clinical decisions and prohibits AI from functioning as an autonomous medical practitioner in any clinical, therapeutic, or prescriptive capacity.

CORE PROVISIONS

1 — AI May Not Be Licensed to Practice Medicine

No AI system may be licensed or registered as a physician, nurse, APRN, or physician assistant under Wisconsin law. No AI may use protected titles including MD, DO, RN, NP, or PA in any patient-facing context.

2 — Physicians Must Retain Final Clinical Authority

Any AI system used in diagnosis, treatment, or clinical management must have its output reviewed and authorized by a licensed Wisconsin physician before it is acted upon. Practitioners retain full clinical and legal responsibility for all care decisions.

3 — AI May Not Make Independent Therapeutic Decisions

No AI system may independently provide therapy, psychotherapy, or behavioral health treatment. AI may assist licensed clinicians with administrative tasks or supplementary functions only, under direct licensed supervision with explicit patient consent.

4 — AI May Not Be Sole Basis for Denying Patient Care

No health insurer may use AI as the sole basis for denying, delaying, or modifying a patient's care. A licensed physician with appropriate clinical expertise must review and authorize all such determinations.

5 — AI May Not Autonomously Prescribe Medications

No AI system may prescribe or authorize prescription medications without the direct involvement of a licensed Wisconsin prescriber. This provision expressly pre-empts H.R. 238 (Healthy Technology Act of 2025) to the extent permitted by law.

6 — Patient Disclosure + Vendor Accountability

Patients must be informed when AI is used in their diagnosis or treatment. Vendors are liable for patient harm caused by their AI tools and may not disclaim diagnostic responsibility. All clinical AI must be registered with the State of Wisconsin.

LEGISLATIVE MODELS — ALREADY ENACTED IN OTHER STATES

Delaware — HB 191
April 2026 — Bans AI from being licensed as a physician, nurse, or PA. Bars AI from using any protected professional title.

Maine — LD 2082
July 2026 — Bars AI from making independent therapeutic decisions or independently treating patients.

Texas — SB 1188 + TRAIGA
Sept. 2025 / Jan. 2026 — Physicians must review all AI recommendations. Written disclosure required for all clinical AI use.

California — SB 1120
Jan. 2025 — AI cannot be sole basis for coverage denial. Licensed physician must make all medical necessity determinations.

37	33	177
States with introduced or enacted AI legislation	Healthcare AI laws enacted by end of 2025	Bills pending across 31 states in 2026

"We can combine the heart of a physician with the tremendous knowledge of artificial intelligence — and that opens medicine to a wonderful place. But before AI acts autonomously as a physician, nurse practitioner, PA, or nurse, the legal and regulatory considerations are profound: Who is credentialed? Who is liable when AI errs? How is bias prevented? Who ensures AI advocates for the patient rather than the insurer? These are not hypothetical questions — they are immediate, serious, and largely unanswered. Wisconsin has a narrow window to ensure they are answered before the decisions are made without us."

— Ramsey G. Larson, MD | Family Medicine | Fort HealthCare | Fort Atkinson, Wisconsin