

Expanding Access, Protecting Patients: The Interstate Medical Licensure Compact



A new, *expedited pathway*
to medical licensure

The Interstate Medical Licensure Compact offers a new, expedited pathway to licensure for qualified physicians who wish to practice in multiple states, increasing access to health care for patients in underserved or rural areas and allowing them to more easily connect with medical experts through the use of telemedicine technologies. Put simply, the Compact makes it easier for physicians to obtain licenses to practice in multiple states. At the same time, the Compact strengthens public protection by enhancing the ability of states to share investigative and disciplinary information. The Compact is being implemented by states across the nation, with others expected to adopt it soon.

How will the Compact work?

States participating in the Compact will formally agree to adopt common rules and procedures that will streamline medical licensure, thus substantially reducing the time it takes for physicians to obtain multiple state licenses. A Compact Commission will provide oversight and the administration of the Compact, creating and enforcing rules governing its processes. The Interstate Medical Licensure Compact will not supersede a state's autonomy and control over the practice of medicine, nor will it change a state's *Medical Practice Act*. Participating states will retain the authority to issue licenses, investigate complaints, and discipline physicians practicing in their state. The practice of medicine will continue to occur in the state where the patient is located.

What is driving the need for the Compact?

Among the issues driving the need for the Compact are physician shortages, the influx of millions of new patients into the health care system as a result of the *Affordable Care Act*, and the

growing need to increase access to health care for individuals in underserved or rural communities through the use of telemedicine. Proponents of telemedicine have often cited the time-consuming state-by-state licensure process required for multiple-license holders as a key barrier to telemedicine's growth — the Compact will help overcome this hurdle.

Who will be eligible to seek licensure through the Compact process?

To be eligible for entry into the Compact process, physicians will have to possess a full and unrestricted license in a Compact member state, be certified (or "grandfathered") in a medical specialty, have no history of being disciplined, penalized or punished by a court, a medical licensing agency or the Drug Enforcement Administration, and meet several other robust requirements. It is estimated that nearly 80% of the physician population licensed in the United States could be eligible for expedited licensure via the Compact.

How will a physician apply for expedited licensure through the Compact?

An eligible physician will designate a member state as the State of Principal Licensure and select the other member states in which a medical license is desired. Upon receipt of this verification in the additional Compact states, the physician will be granted a separate, full and unrestricted license to practice in each of those states.

Can a physician that is ineligible for, or does not want to participate in, the Compact still obtain multiple state licenses?

Yes. The Compact is voluntary for both states and physicians. Physicians who cannot or do not want to participate in the expedited licensure process facilitated by the Compact will still be able to seek additional licenses in those states where they desire to practice by applying through that state's traditional and existing licensure processes.

The Interstate Medical Licensure Compact **Legislative Overview** (As of May 2016)

Enacted

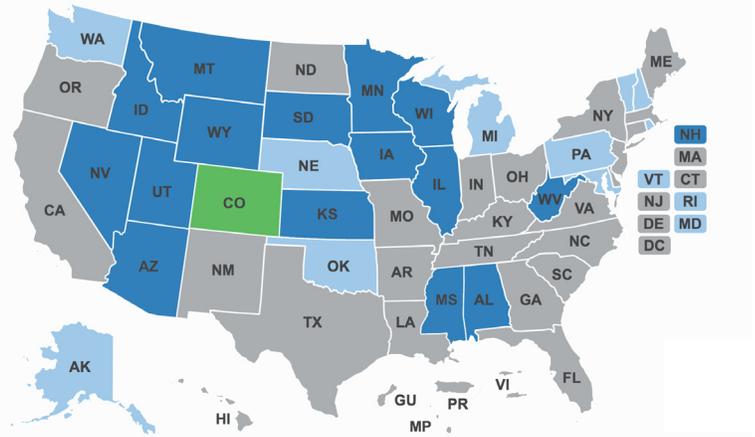
Alabama
Arizona
Idaho
Illinois
Iowa
Kansas
Minnesota
Mississippi
Montana
Nevada
New Hampshire
South Dakota
Utah
West Virginia
Wisconsin
Wyoming

Introduced

Alaska
Maryland
Michigan
Nebraska
Oklahoma
Pennsylvania
Rhode Island
Vermont
Washington

Awaiting Governor Signature

Colorado



How can a state become a member of the Interstate Medical Licensure Compact?

In order for a state to join the Interstate Medical Licensure Compact, state legislatures must enact the Compact into state law. In September 2014, state medical and osteopathic medical board representatives, along with other stakeholders, completed the crafting of model legislation for the use of states interested in participating in the Compact. Since 2015, half of the states in the nation have either introduced or enacted the model legislation in their legislative chambers and more than 30 state medical and osteopathic boards have publicly expressed support for the Compact.

How many states have adopted the Compact?

As of May 2016, sixteen states have enacted the Compact legislation. By surpassing the minimum threshold of seven state enactments, the Compact is now officially established. This year, the Commission will determine the processes, rules and technical infrastructure necessary to facilitate the expedited licensing option available to qualified physicians in Compact member states. Additional Compact legislative introductions and enactments are expected in the future.

A practical and much needed solution

The Interstate Medical Licensure Compact represents a nationwide solution built upon, and reinforcing, a system of state-based regulation proven to extend health care to the underserved, protect patients and help facilitate telemedicine in the United States. To learn more, please visit www.licenseportability.org.

Support is Growing

A growing list of organizations have publicly expressed support for the Interstate Medical Licensure Compact. Among them are:

AARP
Accreditation Council for Continuing Medical Education
American Academy of Dermatology
American Academy of Neurology
American Academy of Pediatrics
American College of Physicians
American Medical Association
American Osteopathic Association
American Well
Ascension Health
Avera Health
Children's Hospital of Pittsburgh of UPMC
Council of Medical Specialty Societies
Educational Commission for Foreign Medical Graduates
Guinn Center for Policy Priorities
Gundersen Health System
Helmsley Charitable Trust Foundation
InSight Telepsychiatry
LocumTenens.com
Mayo Clinic
National Association Medical Staff Services
National Board Of Medical Examiners
National Stroke Association
Society of Hospital Medicine
State Hospital Associations
State Medical Associations
vRad

“If the Interstate Medical Licensure Compact were to move forward, it would herald a major reform in medical licensing.”

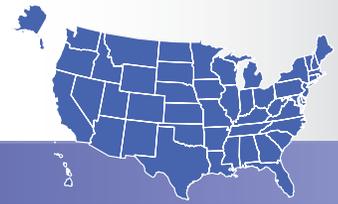
— Robert Steinbrook, MD, Yale School of Medicine



For more information on The Interstate Medical Licensure Compact go to licenseportability.org

Don't be misguided!

MYTHS vs. FACTS about the Interstate Medical Licensure Compact



A new, expedited pathway to medical licensure

The Interstate Medical Licensure Compact offers a new, alternative expedited pathway to licensure for qualified physicians who wish to practice in multiple states, increasing access to health care for patients in underserved or rural areas and facilitating the growth of telemedicine.

State legislatures that have enacted the Compact so far have approved it largely with overwhelming, bipartisan majorities. That is because the Compact offers a sensible and safe approach to expedited licensing that can improve access to health care, while maintaining state regulatory authority for the protection of the public.

Despite this innovative and proactive solution, as the Compact continues to be introduced in state legislatures, some critics are stepping forward to oppose it — resorting to falsehoods and distortions in order to keep the Compact from moving forward.

Here are the myths — and THE FACTS. Don't let stakeholders in YOUR state be misled by the distortions they may hear as the Compact is considered for enactment.

MYTH 1: The Compact overrides your state's medical practice laws.

FALSE. The Compact does not change your existing Medical Practice Act. In fact, it explicitly states that physicians must adhere to your state's existing rules and regulations currently in place for treatment of patients in your state.

MYTH 2: The Compact will take away the disciplinary authority of your state's medical board.

FALSE. Physicians participating in the Compact who treat patients in any Compact state will be accountable to, and under the jurisdiction of that state's medical board, just as they are today without the Compact.

MYTH 3: The Compact redefines "physician" to require your state's physicians to participate in MOC.

FALSE. The Compact makes absolutely no reference to Maintenance of Certification (MOC). The Compact does not require physicians in your state to participate in MOC at any stage. Specialty certification is only an eligibility factor at the initial entry point of participation in the Compact process. Not a single state in the United States requires MOC for licensure, nor does the Compact.

MYTH 4: Physicians in your state who participate in the Compact would apply for a medical license from a private organization — not from the state's medical board.

FALSE. Physicians who want to participate in the Compact in your state will be approved for a license by a state medical board and will receive their license from a state medical board — not from the Interstate Medical Licensure Compact Commission, which is simply an administrative body.

MYTH 5: "Carpetbagger" physicians could come to your state under the Compact, to perform medical procedures currently forbidden by state law.

FALSE. Physicians who receive an expedited license under the Compact will have to adhere to exactly the same rules and regulations as every other physician in your state — including refraining from outlawed medical procedures. And they will be subject to the full oversight and disciplinary authority of your medical board.

Don't be swayed by those who resort to distortions in order to stop this common sense approach to medical licensing!

For more information, visit www.licenseportability.org.