

SENATE BILL REPORT

SHB 1409

As Reported by Senate Committee On:
Health Care, March 28, 2013

Title: An act relating to the requirements of allopathic physician licensure.

Brief Description: Regarding the requirements of allopathic physician licensure.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Tharinger, Schmick, Cody, Clibborn, Ross and Jinkins; by request of Department of Health).

Brief History: Passed House: 3/05/13, 96-1.

Committee Activity: Health Care: 3/27/13, 3/28/13 [DP].

SENATE COMMITTEE ON HEALTH CARE

Majority Report: Do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Keiser, Ranking Member; Bailey, Cleveland, Ericksen, Frockt, Parlette and Schlicher.

Staff: Kathleen Buchli (786-7488)

Background: The Medical Quality Assurance Commission (Commission) establishes requirements for applicants for a license to practice medicine. Applicants who graduated from a medical school located in the United States or Canada must show that they: graduated from a Commission-approved school of medicine; completed two years of postgraduate medical training; are of good moral character; and are able to physically and mentally practice medicine safely.

Applicants for a license to practice medicine who graduated from a medical school located outside of the United States or Canada must have: completed a course of instruction equivalent to that required for other applicants; met all requirements applicable to graduates of United States or Canadian medical schools; passed the examination given by the Educational Commission for Foreign Medical School Graduates (ECFMSG); and demonstrated that they can understand and be understood in English.

An applicant from a foreign medical school who did not complete the required two years of postgraduate medical training requirement may alternatively provide proof of: being a

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permanent immigrant of exceptional ability in the sciences or holding a permanent immigration visa; certification as a Multiple Sclerosis specialist; and completion of at least 24 months of training in Multiple Sclerosis at a United States educational institution with a residency program in neurology or rehabilitation.

The Commission may issue a limited license to practice medicine under specific circumstances. The situations relate to individuals: licensed in another state or Canada who are accepted for employment by the Department of Social and Health Services, the Department of Corrections, or a local health jurisdiction; appointed as a resident physician in a program of postgraduate clinical training; or nominated by the dean of the University of Washington School of Medicine or the chief executive officer of a hospital to serve as a teaching-research member of the institution's instructional staff.

Summary of Bill: The standards for an applicant for a license to practice medicine who graduated from a medical school located in the United States or Canada are applicable also to graduates of foreign medical schools, except that they must also complete the certification process of the ECFMG. The requirement that a postgraduate medical training program last for two years is eliminated and the Commission is directed to define the requirements for such training in rule. All applicants for a license to practice medicine must provide proof of the ability to understand and be understood in English.

An alternative standard for receiving a license to practice medicine is established for applicants who establish exceptional education, training, and practice credentials, and that the applicant's practice in Washington would benefit the public welfare. The Commission must adopt rules to determine what qualifications may be considered exceptional.

Upon completion of 24 months of postgraduate medical training, individuals who hold a limited license as a resident physician may practice outside of the scope of the residency if the graduate medical education program approves and the individuals file that approval with the Commission. Individuals who hold a limited license for teaching-research are eligible for full licensure if they completed the Commission's examination requirement, demonstrated the ability to understand and be understood in English, held a position of associate professor or higher at a Washington medical school for at least three years, and practiced without any disciplinary action in the prior five years. If the applicant holding a limited license for teaching-research graduated from a medical school outside of the United States or Canada, the applicant must complete the certification process of the ECFMG.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: We need to add more providers to meet health care needs. This assures the state with quality of care and increased capacity. The bill provides additional pathways to licensure. It modernizes licensure statutes and will allow

more providers to practice. It makes provider qualifications uniform. This does not impact residency training. It does not force domestic graduates from residency slots and does not open the doors of the state to any medical school graduates; eligibility will be determined by the Commission. This will help to address the expected workforce shortage relating to physicians.

Persons Testifying: PRO: Representative Tharinger, prime sponsor; Linda Ruiz, Micah Matthews, Medical Quality Assurance Commission.