### 2011 HOUSE EDUCATION

HB 1222

## 2011 HOUSE STANDING COMMITTEE MINUTES

**House Education Committee** 

Pioneer Room, State Capitol

HB 1222 01/17/11 12937

Conference Committee

Committee Clerk Signature

**MINUTES:** 

Chairman RaeAnn Kelsch: We will open the hearing on HB 1222.

Bruce Levi – Director, ND Medical Association: Support. Testimony. Attachment 1.

Chairman RaeAnn Kelsch: Questions?



**Rep. Phillip Mueller:** Can you give us any sense of if this would result in more doctors staying in ND and do you know how many that would be?

**Bruce Levi – Director, ND Medical Association:** It's kind of on an ad hoc basis. The issue came from a resident and took the issue to the ND Medical Associating in the form of a resolution. In terms of the numbers of residents that we have, it would probably affect a handful of them.

**Chairman RaeAnn Kelsch:** We know there is a shortage of residencies in the state. We don't seem to have enough, or potentially we don' have some of the residencies that future physicians are interested in. Does this take up potential residence spots that could be used for ND kids or this not an issue?

**Bruce Levi** – **Director, ND Medical Association:** I don't think that's an issue at all. This bill applies to all international medical graduates regardless of their residency. This isn't just a family medicine specific bill.

**Chairman RaeAnn Kelsch:** We do have ND students that do go to an international college to receive their medical degree as well, correct?

Bruce Levi – Director, ND Medical Association: Correct.

**Rep. Karen Rohr:** If a student is not a resident of the United States are they subject to some kind of background check?

**Bruce Levi – Director, ND Medical Association:** I know we have mandated criminal background checks on all licensures.

House Education Committee HB 1222 01/17/11 Page 2



John Olson - Board of Medical Examiners: Support: Testimony. Attachment 2.

#### Chairman RaeAnn Kelsch: Questions?

Dr. Gaylord Kavlie: This issue came to us from residents. The problem is that family practice residents specifically, want to take the American Board of Family Practice exam in July. It is the best time, from my personal experience, to take the board exam. The problem is that the application has to be complete by June 24th, and residency isn't complete until June 30<sup>th</sup> In ND our board of medical examiners gives a license to international medical graduates after their third year and they have a restricted license after their second year meaning if they leave their residency to go and practice medicine, they lose their license. What the residents can do is to wait or apply to a state that allows them to get a license after two years of their residency. It is an impediment to them staying in the state since they can go elsewhere to attain that license. It was talked about that we authorize a license at the end of their third on July 1st, but only way is to change the law. I recommended doing a 2 year as 25 other states do. Some thought 2.5 years would be adequate so that is the resolution that passed. The concern is if they will leave after 2.5 years if they get a license. No one has expressed concern that if we give them a license that they will go and practice because they are committed to their education. I don't see a lot of opposition to changing this. It makes sense to me to change our law to make it better for specifically the family practice residents who must have an unrestricted license in order to apply for the board exam. I think we would retain more of them in ND if we did this.

**Chairman RaeAnn Kelsch:** Questions? Support? Opposition? We will close the hearing on HB 1222.

DO PASS

## 14 YEAS 0 NAYS 1 ABSENT CARRIER: Rep. Mike Schatz

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If the vote is on an amendment, briefly indicate intent:

#### **REPORT OF STANDING COMMITTEE**

HB 1222: Education Committee (Rep. R. Kelsch, Chairman) recommends DO PASS (14 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). HB 1222 was placed on the Eleventh order on the calendar.

## 2011 SENATE EDUCATION

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HB 1222

## 2011 SENATE STANDING COMMITTEE MINUTES

Senate Education Committee

Missouri River Room, State Capitol

HB 1222 March 16, 2011 15501

Conference Committee

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Committee Clerk Signature

**Explanation or reason for introduction of bill/resolution:** Relating to graduates of international medical schools.

Minutes:

See "attached testimony."

Chairman Freborg opened the hearing on HB 1222; no fiscal note attached.

Courtney Koebele, Director of Advocacy, North Dakota Medical Association introduced the bill. (#1 Testimony)

**Senator Flakoll:** How does the proposed language in this bill compare to MN and SD? **Courtney Koebele:** Not sure about that; can check and get back to you.

**Senator Gary Lee:** This has really nothing to do with their medical school, does it? Just has to do with how soon they can take their examination—or does it really have to do with the length of time they spend in residency? **Courtney Koebele:** It doesn't change their training at all; just allows them to apply for an unrestricted license so they can take the exam. Doesn't change their training one bit.

**Senator Flakoll:** So this could be a North Dakota student who graduated from an international institution or an international student who graduated from an international institution that is covered by this bill? **Courtney Koebele:** Yes **Senator Flakoll:** So those entities are treated similarly under this, whether originally a North Dakota resident or a resident another country? **Courtney Koebele:** She's not sure; going to have Dr. Kavlie address that if you don't mind.

**Dr. Gaylord Kavlie, Surgeon, MidDakota Clinic & Office of North Dakota Medical Association** where the issue was first discussed. Also on the Board of Medical Examiners where the issue has been discussed. He was working on a Master's Degree in Business Administration so have researched this extensively and wrote a paper that we can get a copy of if the committee wishes. The issue came to the medical association from the family practice residents in Minot; Dr. Krone, President of the medical association is very involved with her residents (family practice) and getting them involved at the state level. They appreciate the fact that she brings issues to the state level from the residents. The frustration of theirs' was that they couldn't take the boards in the summer after they finished their residency training. They finish after three years and eligible for the boards after they



finish their residency training and the first exam is called the summer exam in July. The rules of the American Board of Family Medicine are that in order to complete their application, they must have an unrestricted license by June 24<sup>th</sup> in order to apply. They don't finish their residency until July 30<sup>th</sup>. After those three years, by law they can get their license but it is too late for the summer exam. The question is how can this be changed so they don't have to wait until the winter. The way to change this would be to give them an unrestricted license sooner.

The question was what about other states? Twenty-five states require only two years of residency for an unrestricted license so an international medical graduate or a US medical graduate after two years can get a license in most states. In North Dakota, as in most states, if you graduate from a North Dakota institution can get an unrestricted license after one year of residency. In most states US and Canadian graduates can get a license; not a problem for US medical graduates—just international medical graduates and honestly the best and brightest from a lot of places around the world who come to our family practice residency programs. They want to take the exam early and because our law won't allow them to get a license, their solution has been to go somewhere else and get a license—one of those 25 other states where they can get a license after 2 years. Indiana seems to be the place that they can go; talked to an anesthesiologist at work this morning and he is an international graduate and got his license in Indiana—cheap and easy to get.

It does not change their education at all; the thing it may change is an out-migration of those best and brightest of international medical graduates who come here for residency and because they have gone to the trouble of getting a license someplace else, may choose to go there to practice. He researched this in a lot of places and the only people who have a policy about this is the Federation of State Medical Boards. Their policy says that they recommend three years of post graduate training for all; contradictory to his recommendation—they recommend three years for ALL, not just international students. They have no evidence to support it; had a personal discussion with the Executive Director of the FSMB when he was in North Dakota and he admitted there is no evidence to support that recommendation. They have some other recommendations in that same policy statement and evidence to support them, and North Dakota Board of Medical Examiners follow all of them. They have a policy where they recommend three years without any evidence to support it. In North Dakota you can get a license to practice medicine after only one year if you are a North Dakota or Canadian graduate.

**Senator Gary Lee:** What is the length of their residency? **Dr. Kavlie:** For family practice it is three years. **Senator Gary Lee:** So this would allow them to take their exam while still in their residency? **Dr. Kavlie:** No, they have to finish the residency before they can take the exam; finish that three year period and then take it in July or December. They prefer to take it in July, the information is fresh in their minds, they are not deep into their practices and lives and forgetting. Pass rate is better in July; have to finish the residency before they can take the exam.



Senator Gary Lee: Seems to him then that this would shorten the residency requirement—or are we just backing up the date from when they start? Dr. Kavlie: It isn't changing the residency requirement at all, in order to take the family practice exam they have to have a license to practice medicine which the board of medical examiners gives

them. They have to have finished their residency program. We are just moving when they can get that license back six months; they can already go to 25 other states and get that license after two years. Most come out of residency programs and are required for hospital privileges to be board certified. Can't do one or two years of a residency and not be certified and have privileges. But you can go down the street and hang up a shingle. These are the family practice residents who are in their training, are planning to finish their training and we just move up the date when they can get that unrestricted license. Then they finish their residency and have applied for and take the boards in the summer.

**Senator Flakoll:** How many people per year—five, ten, fifteen, what? **Dr. Kavlie:** In the family practice residency programs there are six in Bismarck and (he thinks) six in Minot. Those are the UND programs; Grand Forks has a family practice residency and believes it is four in theirs. The concern came specifically from the family practice residents; there are resident in surgery and internal medicine, and if we have international medical graduates in those programs it would affect them the same. It may not have the same concern for those; hasn't investigated that.

**Senator Flakoll:** Sited that there were 25 states that require only two years; what does MN and SD do? **Dr. Kavlie:** He knows where the website is to pull it up and find out, but not 100% sure.

**Senator Flakoll:** Transference—essentially are reducing from 36 months to 30 months post-graduate training in a program, but you are saying that because other states do this we are not necessarily diminishing it. But we are in North Dakota, correct? In the bill lines 20-21, such applicant has not . . . so they would be getting fewer months of training. **Dr. Kavlie:** Separate the training from the licensure; you do not have to be board certified to have a license in North Dakota. You just have to spend three years in a residency program. A surgery residency is five years; after three years of that you can get a license to practice. A family practice residency is three years; have to complete to get that. Doesn't change at all what their requirements are going to be for their residency training/completion for board certification. But there are 25 states that have only a requirement for two years of post-graduate training before being licensed. SO they can be licensed, they can go hang up a shingle someplace, but they are not going to be board certifiable. Doesn't change; extremely rare for somebody not to finish a residency and become board certified.

**Senator Luick:** Right now you said there are 25 states that are two year level? You are looking at dropping this from 36 months to 30 months, correct? (Yes) Why not drop it down to two years? **Dr. Kavlie:** The reason was; his recommendation after studying this and the North Dakota Medical Association supported the change to two years. The Board of Medical Examiners was not will to; not a majority who was willing to support changing it from three to two. The compromise was two and a half years. Just in case some would think of sneaking out of their residency to go hang up a shingle and practice after they got their license at two year; less likely after 2.5 years. It also takes care of that date frustration for them to be able to take the exam early.



**Senator Gary Lee:** Thinks he understands; as an international graduate, in order to get a license as a medical doctor in North Dakota it takes three years. Just to be licensed as a

medical doctor that really has nothing to do with the residency that they are going to be in. (correct) So this is just changing that requirement to be here 30 months; still will continue in the residency for 36 months. **Dr. Kavlie:** Absolutely; certainly their expectation. You don't have to be in the state for three years; you have to be in a residency program for three years. Guys in Nevada doing surgery residency programs who graduated from a Caribbean medical school or come from India—they can get a North Dakota license also. Doesn't have to be a North Dakota residency, but they have to have done three years someplace.

**Senator Gary Lee:** So they would be licensed then as a general practice physician at that point they applied at 30 months. **Dr. Kavlie:** Nobody gets licensed as anything but a physician—you get a license to practice medicine—M.D. or D.O. to practice medicine. Don't get a license to practice surgery, family practice, anesthesia, etc.

**Duane Hodack, Executive Secretary, North Dakota Board of Medical Examiners** didn't intend to testify but wanted to address some questions. This really is all about licensing butting up to board certifications. They already have what they call a special license that they give to international medical graduates after two years that allows them to practice that third year of residency. That really isn't the issue; it is all about trying to change things so that the American Board of Family Practice would let these take the summer test. We would give them a license immediately the first day eligible and the test is after that point. But they wouldn't change; they said no, have to have a license when you apply to take the test which is earlier in the year. So this 36 down to 30 months allows them to apply in January-March for that summer test, but really has nothing to do with their ability to practice in North Dakota. Hope that clears up that question.

**Senator Flakoli:** The change on page 2, is that more technical in nature? **Duane Hodack:** It really does reduce the months; clearly does—reduces it to 30 months. Think what Dr. Kavlie was saying and Senator Lee's questions alluded to—as a practical matter you have to complete that residency to get board certification and to practice in most institutions so that is going to be the driving force in what allows them to go into a facility and practice. It does reduce what they would look at and say YES, we can give you a full medical license after 30 months of post-graduate training as opposed to 36.

**Senator Flakoli:** Bill references on page 2 the first sentence—talking where we change it from the 2<sup>nd</sup> and 3<sup>rd</sup> years to the last 18 months. Kind of lines 2 & 3. That hasn't been talked about too much this morning so wanted to address it. **Duane Hodack:** That is that special license he was talking about; right now it says if the person has successfully completed one year of post-graduate training in a program approved by the board and they have all the experience we find that is equivalent to the second and third years of post-graduate training, then they are deemed eligible. That is that special license they can give them. Just cuts it back to 18 months because now the total has gone from 36 to 30 months. **Senator Gary Lee:** So if he is a North Dakota resident how long does it take for him to get a medical license? **Duane Hodack:** Your residency doesn't make any difference; it is where you went to school. If you went to a US or Canadian approved school and from North Dakota, you get the license after one year. If you went to an international medical school that is not in the US or Canada, then fall under the IMG rules.







**Senator Heckaman:** On lines 11 & 12 (exception) graduates of osteopathic schools located outside the US are not eligible. What is the reasoning for that? **Duane Hodack:** That is because osteopathic schools outside of the US are not the equivalent of US osteopathic schools that lead to a D.O. degree. They are not a medical degree in the sense we talk about it at all.

No further testimony in support; no opposition. Hearing closed.

**Senator Heckaman:** Move a Do Pass to HB 1222; second by **Senator Gary Lee.** Motion carried 7-0-0; **Senator Gary Lee** will carry the bill.

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Floor Assignment

Sen. Gary Lee. If the vote is on an amendment, briefly indicate intent:



#### **REPORT OF STANDING COMMITTEE**

HB 1222: Education Committee (Sen. Freborg, Chairman) recommends DO PASS (7 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1222 was placed on the Fourteenth order on the calendar.



### 2011 TESTIMONY

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HB 1222

Physicians Dedicated to the Health of North Dakota TESTIMONY



#### NORTH DAKOTA MEDICAL ASSOCIATION

1622 East Interstate Avenue Post Office Box 1198 Bismarck, North Dakota 58502-1198

> (701) 223-9475 Fax (701) 223-9476 www.ndmed.org

Kimberly T. Krohn, MD Minot President

A. Michael Booth, MD Bismarck Vice President Council Chair

Steven P. Strinden, MD Fargo tary-Treasurer

Jamestown Speaker of the House

Robert A. Thompson, MD Immediate Past President

Gaylord J. Kavlie, MD Bismarck AMA Delegate

**Robert W. Beattie, MD** Grand Forks AMA Alternate Delegate

Bruce Levi Executive Director and General Counsel

Leann Tschider Director of Membership Office Manager

Annette Weigel Administrative Assistant



## Testimony in Support of HB 1222 House Education Committee January 17, 2011

Madam Chairman Kelsch and Committee Members, I'm Bruce Levi and I serve as executive director of the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents and medical students.

NDMA supports HB 1222 which relates to the physician licensure requirement for graduates of international medical schools – those recognized medical schools not located in the United States or Canada. The Association requested Rep. George Keiser to introduce this legislation which resulted from a dialogue between NDMA, the Minot Center for Family Medicine, and the North Dakota Board of Medical Examiners. The North Dakota Board of Medical Examiners, at its most recent meeting in November, expressed its support for the specific language of this bill after it had approved the concept at its July board meeting.

HB 1222 would change the post graduate residency training requirement for purposes of licensure for residents who graduated from medical schools outside of the United States and Canada from thirty six months to thirty months.

While this change is simple, the reasons for the change are more complex. HB 1222 was introduced to ensure that North Dakota family medicine residents who graduated from an international medical school are provided every opportunity to remain in North Dakota to practice medicine after completion of their postgraduate training here in the state. The bill does not change the amount of training an international medical graduate will receive in a North Dakota residency program; it only changes the amount of training necessary for an international medical graduate to qualify for an unrestricted license to practice medicine, which is required for a resident in Family Medicine to take their national certifying exam to become board certified.

Most physicians take certifying exams to become board certified in their specialty after completing postgraduate training in their residency program. Most hospitals require board certification to have hospital privileges. For Family Medicine residents the certification to become board certified in Family Medicine is examination through the American Board of Family Medicine (ABFM). One of the qualifications to sit for the ABFM certification exam is "satisfactory completion of residency" and the applicant "… must hold a currently valid, full, and unrestricted license to practice medicine in the United States … ."

In North Dakota, a person who attends a medical school not located in the United States or Canada is required to complete three years of postgraduate training before becoming eligible to receive an unrestricted license to practice medicine. Currently, these residents are not deemed eligible for licensure until after completion of their residency on July 1. The threeyear requirement creates difficulty because the national certifying exam to become boardcertified in Family Medicine is scheduled at times that require our North Dakota international medical graduates to either wait to take their exam in the winter (December) rather than the summer (July), or instead receive a license from another state in order to take the exam. Once a resident receives a license to practice in another state, they tend to leave North Dakota and practice in the state in which they received a license. HB 1222 would allow the resident to receive their license in thirty months, rather than thirty-six months, which would address this issue by allowing for the issuance of an unrestricted license in time for the resident to qualify to take the summer exam.

The ABFM certifying exam is available in July (Summer Exam) and December (Winter Exam). Candidates for certification prefer to take the exam as soon as possible after completing residency training while information from their three years of study is still "fresh in their minds." In fact, statistics show that the pass rate for the Summer Exam is consistently higher than for the Winter Exam.

The ABFM application deadlines make it impossible for international medical graduate residents in Family Medicine residency programs to be eligible to take the American Board of Family Medicine certification summer exam in July, their first opportunity after completing residency.

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NDMA and the ND Board of Medical Examiners worked on different approaches to solving this problem before looking to legislation.

One option the Board pursued was to suggest that international medical school graduates apply for a special license after two years of residency which is authorized by law for the Board to issue. [See Letter of ND Board of Medical Examiners to Kimberly T. Krohn, MD, Program Director, Minot Center for Family Medicine, December 23, 2009]. In North Dakota, international medical graduates, after completing two years of postgraduate training, may receive a special license that allows the licensee to practice while the individual is enrolled in their residency program [See NDCC 43-17-18(4)].

However, this special license does not meet the ABFM requirement for a "permanent license without restrictions or limitations...." [See Letter of Kimberly T. Krohn, MD, Program Director, Minot Center for Family Medicine to ND Board of Medical Examiners, January 26, 2010].

Other efforts were made to address this situation. Prior rules required the residents to wait until the July meeting (the first meeting after completion of their residency education) of the North Dakota Board of Medical Examiners for a medical license to be granted to the physicians who had completed residency, which was usually scheduled near the end of the month. In response to a request from Dr. Krohn and the Family Medicine residents, the Board agreed to grant an unrestricted license immediately upon completion of residency education. This also was determined by the ABFM to not meet the requirements for application for the ABFM Certification Summer Exam since the granting of the license was still not timely for purposes of the Summer Exam in July.

After working through these other avenues unsuccessfully, it was determined that a change in state law is necessary to make residents eligible for the ABFM Summer Exam [See Letter of ND Board of Medical Examiners to Kimberly T. Krohn, MD, Program Director, Minot Center for Family Medicine, March 29, 2010].



Without a change in the law, the only solution now for Family Medicine residents is to apply for a license to practice medicine in another state. All of the international medical student

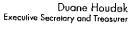
residents apply for licenses in one of the 23 states that require only two years or less of postgraduate education for international medical graduates. Most apply in Indiana where only two years of postgraduate education are required and the process is relatively inexpensive and not extensive. The consequence for North Dakota is that we are losing some of these new Family Medicine physicians we train here to other states. Since some residents are unable to take the Summer Exam due to lack of an unrestricted license, they apply for and receive a license from another state to be eligible for the ABFM Summer Exam, then leave after residency training because they have established a relationship with that other state.

Thank you Madam Chairman. NDMA urges a "Do Pass' vote on HB 1222. I'd be happy to answer your questions.

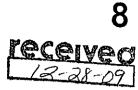


# NORTH DAKOTA STATE BOARD OF MEDICAL EXAMINERS

Established 1890 Phone (701) 328-6500 • Fax (701) 328-6505 418 E Broadway Ave, Suite 12 • Bismarck, ND 58501-4086 www.ndbomex.com



Lynette McDonald Deputy Executive Secretary



December 23, 2009

Kimberly T. Krohn, MD, Program Director Center for Family Medicine 1201 11<sup>th</sup> Ave SW Minot, ND 58701

JAN 1 2 2009

Dear Dr. Krohn:

At its November meeting, the Board considered a letter from Dr. Kim Krohn, who sought assistance for those international medical school graduates wanting to take the American Board of Family Practice examination in July, following the completion of their residency. This has been difficult in the past as these residents are not deemed eligible for licensure until after completion of their third year of residency (July 1) and because of the fact that residents can only sit for their board examination in July if they hold a permanent medical license in a state. The Board meeting to consider applicants for permanent licensure is normally not held until the latter party of July so the residents have had to delay taking their American Board examination at a later date.

To facilitate this matter, the Board encourages you to advise international medical school graduates to apply for a North Dakota special license after completion of two years of residency. The Board will then convert that special license to a permanent license following completion of their third year of residency in time for them to take their board examination in July. It is advisable that they apply for their permanent license approximately 60 days prior to completion of your program just in case any questions arise concerning their practice outside of the residency program during their third year.

Should you have any questions about the process, please feel free to contact me.

Sincerely,

Duane Houdek Executive Secretary



JAN 2 9 2010

Minor, ND 58701 (701) 858-6700 1-800-841-7321 Fax (701) 858-6249 www.centerforfamilymedicine.net

January 26, 2010

Mr. Duane Houdek North Dakota Board of Medical Examiners 418 East Broadway Avenue, Suite #12 Bismarck, ND 58501

Dear Duane:



I have enclosed a copy of the e-mail that I received from the American Board of Family Medicine, Inc., regarding the requirements for taking the ABFM certification exam. I really appreciate what I felt was your assurance that the North Dakota Board of Medical Examiners would figure out a way to make sure that our graduating residents could take this exam in July as other states allow. I am not sure if any of our graduates this year are going to take advantage of this change, as I think they have all already begun their process through Indiana or other states that have more secure and proven processes. It could be until next year that we test how this change will work for our residents.

I just wanted to make sure you had a copy of this information and that I had a chance to thank you again for the changes that have been made.

Yours truly,

Kimberiy T. Krohn, MD, MPH, FAAFP Program Director

KTK:scs

Enclosure - E-mail



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# NORTH DAKOTA STATE BOARD OF MEDICAL EXAMINERS

Established 1890

Phone (701) 328-6500 • Fax (701) 328-6505 418 £ Broadway Ave, Suite 12 • Bismarck, ND 58501-4086 www.ndbomex.com

March 29, 2010

Kimberly T. Krohn, MD Program Director Center for Family Medicine 1201 11<sup>th</sup> Ave. SW Minot, ND 58701

Dear Dr. Krohn:

The Board of Medical Examiners reviewed your letter of January 26, 2010, regarding the ABFM response to the solution we thought the Board had accomplished by allowing us to grant a permanent license immediately upon completion of the third year of residency, without having to wait for the next board meeting.

The Board expressed its support for retaining physicians in North Dakota. One board member, Dr. Kavlie, indicated that he has spoken with you about this matter, is researching it and will propose solutions should he find that research does not support the law that requires a three year residency for international medical graduates.

The Board concluded that the solution is legislative. The statute is question, 43-17-18(3), NDCC, provides, in relevant part:

"An applicant who has graduated from a medical school not located in the United States, its possessions, territories, or Canada, must present evidence, satisfactory to the board, that the applicant has successfully completed three years of postgraduate training in a program located in the United States...."

This language allowed the board to reach its earlier proposed solution of immediately providing a license with an effective date that corresponds to the last day of the third year of residency, but it does not permit the board to issue a license with an effective date that precedes the completion of three years of residency.

We will be getting information, as will you, from Dr. Kavlie, and will bring the matter back to the Board once we do. In the meantime, please keep us informed of any developments you see in this area.

Please feel free to contact me should you have any questions.

Sincerely,

C:

Duane Houdek

Executive Secretary



Gaylord Kavlie, MD

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Lynette McDonald Deputy Executive Secretary

Mission Statement



# TESTIMONY ATTACHMENTZ

#### HOUSE EDUCATION COMMITTEE

#### H.B. 1222

January 17, 2011

Testimony of the North Dakota State Board of Medical Examiners

Madam Chairman and members of the House Education Committee, thank you for the opportunity to offer my support of H.B. 1222 on behalf of the North Dakota State Board of Medical Examiners.

This bill is a result of a request made to us by the UND Family Practice Center in Minot. Dr. Krohn was concerned that our current statute requiring 36 months of postgraduate training was interfering with international residents taking the family practice boards at the appropriate time following completion of their training. Due to test rules, they could not apply to take the test first available following the completion of their residency program. She was further concerned that this would cause these doctors to seek residency training in other states, perhaps affecting the number of family physicians practicing in North Dakota.

One of our board members, Dr. Kavlie, studied the issue and recommended to the board that we reduce the length of postgraduate training required of international medical graduates. Many states require less than the three years we required. The available evidence indicated the postgraduate training could be shortened by as much as a year without detriment to the public.

The board supported reducing the length of required residency for international graduates from 36 months to 30, which would take care of the concern presented to us by the UND Family Practice Center, and would still maintain a high level of postgraduate training. That is what House Bill 1222 provides.

Thank you for the opportunity to testify. I will try to answer any questions you may have.



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Physicians Dedicated to the Health of North Dakota

## Testimony in Support of HB 1222 Senate Education Committee March 16, 2011

Chairman Freborg and Committee Members, I'm Courtney Koebele and I serve as Director of Advocacy for the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents and medical students.

NDMA supports HB 1222 which relates to physician licensure requirement for graduates of international medical schools – those recognized medical schools not located in the United States or Canada. The association requested Rep. George Keiser to introduce this legislation which resulted from a dialogue between NDMA, the Minot Center for Family Medicine, and the North Dakota Board of Medical Examiners. The North Dakota Board of Medical Examiners, at its most recent meeting in November, expressed its support for the specific language of this bill after it had approved the concept at its July board meeting.

HB 1222 would change the post graduate residency training requirement for purposes of licensure for residents who graduated from medical schools outside of the United States and Canada from thirty-six months to thirty months.

While this change is simple, the reasons for the change are more complex. HB 1222 was introduced to ensure that North Dakota family medicine residents who graduated from an international medical school are provided every opportunity to remain in North Dakota to practice medicine after completion of their postgraduate training here in the state. The bill does not change the amount of training an international medical graduate will receive in a North Dakota residency program; it only changes the amount of training necessary for an international medical graduate to qualify for an unrestricted license to practice medicine, which is required for a resident in Family Medicine to take their national certifying exam to become board certified.

Most physicians take certifying exams to become board certified in their specialty after completing postgraduate training in their residency program. Most hospitals require board certification to have hospital privileges. For Family Medicine residents the certification to become board certified in Family Medicine is examination through the American Board of Family Medicine (ABFM). One of the qualifications to sit for the ABFM certification exam is "satisfactory completion of residency" and the applicant "…must hold a currently valid, full, and unrestricted license to practice medicine in the United States…"

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In North Dakota, a person who attends a medical school not located in the United States or Canada is required to complete three years of postgraduate training before becoming eligible to receive an unrestricted license to practice medicine. Currently, these residents are not deemed eligible for licensure until after completion of their residency on July 1. The three-year requirement creates difficulty because the national certifying exam to become board-certified in Family Medicine is scheduled at times that require our North Dakota international medical graduates to either wait to take their exam in the winter (December) rather than the summer (July), or instead receive a license from another state in order to take the exam. Once a resident receives a license to practice in another state, they tend to leave North Dakota and practice in the state in which they received a license. HB 1222 would allow the resident to receive their license in thirty months, rather than thirty six months, which would address this issue by allowing for the issuance of an unrestricted license in time for the resident to qualify to take the summer exam.

The ABFM certifying exam is available in July (Summer Exam) and December (Winter Exam). Candidates for certification prefer to take the exam as soon as possible after completing residency training while information from their three years of study is still "fresh in their minds." In fact, statistics show that the pass rate for the Summer Exam is consistently higher than for the Winter Exam.

The ABFM application deadlines make it impossible for international medical graduate residents in Family Medicine residency programs to be eligible to take the American Board of Family Medicine certification summer exam in July, their first opportunity after completing residency.



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