

OCTOBER 13, 2017

TO: Interstate Medical Licensure Compact Commission

FR: Bylaws and Rules Committee (Bowden of Iowa, Cousineau of Nevada, Hansen of South Dakota, Maresh of Washington, Marx of Utah, McGovern of Colorado, Rosario of South Dakota)

RE: Motion to adopt rulemakings to establish Chapter 4 - State of Principal License and to amend Chapter 5 - Expedited Licensure.

MOTION: The Bylaws and Rules Committee moves that the following rulemakings are adopted by the Interstate Commission as presented. (Highlighted text are amendments to the rulemakings as they were noticed by the Interstate Commission on September 13, 2017)

ITEM 1. Adopt the following new chapter:

Chapter 4 - State of Principal License

4.1 Authority. This chapter is promulgated by the Interstate Commission pursuant to the Interstate Medical Licensure Compact Section 4. The rule shall become effective upon adoption by the Interstate Commission.

4.2 Definitions. As used in this chapter:

“*Employer*” means a person, business or organization **located in a physician’s designated state of principal license** that employs **or contracts with** a physician to practice medicine.

“Member board” means a state agency in a member state that acts in the sovereign interests of the state by protecting the public through licensure, regulation, and education of physicians as directed by the state government.

“Practice of medicine” means the clinical prevention, diagnosis, or treatment of human disease, injury, or condition requiring a physician to obtain and maintain a license in compliance with the medical practice act of a member state. The practice of medicine occurs where the patient is located at the time of the physician-patient encounter.

“Primary residence” means the dwelling where a person usually lives. A person can only have one primary residence at any given time.

“State of principal license” means a member state where a physician holds a license to practice medicine and which has been designated as such by the physician for purposes of registration and participation in the Compact.

4.3 Designation of state of principal license.

a. A physician shall designate a member state as the state of principal license for purposes of registration for expedited licensure through the Compact if the physician possesses a full and unrestricted license to practice medicine in that state, and the state is:

- (1) The state of primary residence for the physician, or
- (2) The state where at least twenty-five percent of the practice of medicine occurs, or
- (3) The location of the physician’s employer, or
- (4) If no state qualifies under subparagraph (1), subparagraph (2), or subparagraph (3), the state designated as state of residence for purposes of federal income tax.

b. The physician must meet one of the state of principal license’s eligibility requirements when the application for a letter of qualification is reviewed by the designated state of principal license’s medical board. Member boards shall apply these requirements contemporaneously to determine if a physician has appropriately designated a state of principal license.

4.4 Redesignation of the state of principal license.

a. The physician may redesignate a member state as the state of principal license at any time, as long as the physician meets the requirements in paragraph “*a*” of Section 4 of the Compact, following this process:

(1) The physician shall complete a state of principal license form at the Interstate Commission’s website, www.imlcc.org

(2) Upon receipt of the completed form, the Interstate Commission shall notify the new state of principal license and existing state of principal license.

(3) Physician information collected by the Interstate Commission during the process to redesignate a state of principal license shall be distributed to all member boards.

4.5 Maintaining a state of principal license. If a physician licensed through the Compact no longer meets any requirement under Compact Section 4 to designate a state of principal license, then all licenses issued through the Compact to the physician shall be **ineligible for renewal through the Compact** terminated pursuant to Section 5”f” of the Compact.

ITEM 2. Re-letter Chapter 5 paragraphs 5.2 “u” through “gg” as 5.2 “v” through “hh”.

ITEM 3. Adopt the **new** letter paragraph 5.2 “u” as follows:

u. “*Graduate medical education*” means an ACGME- or AOA-approved specialty or subspecialty program that achieves ABMS or AOA board eligibility status. **ACGME- or AOA-approved means the program is accredited by the ACGME or the AOA.** A one-year transitional internship or a one-year rotating internship does not qualify as graduate medical education required in Compact Section 2k(3) or this chapter.

ITEM 4. Amend subrule 5.4(1) “c” as follows:

c. Successfully completed graduate medical education approved by the ACGME or the AOA. "Completed" means participation in an ACGME- or AOA-approved postgraduate training specialty or subspecialty program that achieves ABMS or AOA board eligibility status. ~~as designated in 2015.~~ **ACGME- or AOA-approved means the program is accredited by the ACGME or the AOA.** ~~A one-year transitional internship or a one-year rotating internship, prior to 2015, does not qualify as graduate medical education required in Compact Section 2k(3) or this chapter.~~

ITEM 5. Amend subrule 5.5(1) as follows:

5.5(1) An applicant for a letter of qualification shall:

a. Designate a state of principle license. The applicant must meet one of the state of principal license eligibility requirements in Compact Section 4 at the time the application for a letter of qualification is reviewed by the designated state of principal license’s member board. A

member board shall apply Compact Section 4 requirements contemporaneously when evaluating an applicant's designation of a state of principal license.