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June 10, 2012

ECONOMIC AFFAIRS IC
June 11, 2012
EXHIBIT 14

Economic Affairs Interim Committee
62nd Montana Legislature
PO Box 201706
Helena MT 59620-1706

Mr. Chairman and Members of the Economic Affairs Interim Committee,

The Montana Medical Association is delighted to have this chance to highlight what we believe are some opportunities to improve the licensure process for physicians in Montana. We thank you for the invitation to share those ideas with you and commend you for taking this step.

The MMA wants to acknowledge the good work of the Board of Medical Examiners. The members of the board clearly believe in carrying out the mission you, the legislature, have given them to provide for the health needs of the people of Montana by licensing competent physicians.

We are thankful for processes that are in place to protect health care consumers, these are the patients of our physicians, our family, friends and neighbors. Keeping the unprofessional, improper, and unqualified physicians from practicing medicine in this state is important to those physicians who are provding quality care now. Physicians need to be confident, in times when a referral is needed, that the physician at the other end of the state or delivering services through telemedicine from another part of the country or world is competent. The Board of Medical Examiners plays an important role and we believe they do a good job.

At the same time, it is important to get physicians working more quickly if possible. Filling physician vacancies more quickly is also important in the delivery of physician care and in relieving the workload pressures of phyisicians in a time when we are experiencing a physician workforce shortage. A proper balance must be struck.

There are opportunities within the licensure process that can be tapped to strike that balance in protecting the public and getting competent physicians to work more quickly. Below are some concepts we believe can be further explored and could lead to a quicker licensing process:

Expedited endorsement. License the experienced, competent physicians from states with equivalent standards through expedited endorsement. Review other state requirements, set criteria to approve licensure based on a valid license of another state, and establish a fast track process with intent to provide a speedier licensing process for physicians who are successfully practicing medicine in another state. Staff can use online methods to verify information from other states, the American Medical Association, National Practitioner Data Bank and the Federation of State Medical Boards (FSMB).

Eight states have adopted the expedited endorsement processes, including Iowa, Idaho, Nevada and Oregon. In developing the endorsement, Iowa looked at licensure rules, questioned the value of each rule, and sought out what other states were requiring. As a result, Iowa is removing some requirements like verification of hospital privileges, proof of employment and submittal of a transcript from medical school; adopted the use of the FSMB uniform application; and use online, direct access to AMA, National Practitioner Bank and FSMB information. The changes have made it easier for physician applicants and reduced mail into the Board office.

Reciprocity with registration. Explore agreements with neighboring states to recognize licenses issued by the other state without full review of individual credentials, and include a patient protection process. Allow for a registration system to ensure health care provider agrees to operate under the laws of Montana and understands the jurisdiction and authority of the Board of Medical Examiners to take disciplinary action if needed.

The MMA is hesitant to support a process of pure reciprocity that would permit licensees to work in Montana simply because they hold a license in another state. A registration process allowing for a review is needed to ensure for patient safety.

Issue temporary physician licenses. Set criteria to issue temporary licenses allowing physicians who meet a set criteria to be licensed between BoME meetings.

Evaluate to improve current business processes. Take time to evaluate the current process, map out the process by steps, note the time it takes for each step and review the value of each step and rule in meeting public protection goals. Seek out new ways and best practices to accomplish individual steps and overall goal, such as using online information from credible sources to reduce licensure wait time.

- Ensure staff follow BoME approved policy that licensing verification from other states is not needed at time of licensure, and can be delivered after license has been granted.

- Save time by offering new customer oriented services, including verification of licensure infomation and any disciplinary actions online by directly accessing other states' online licensing systems. Consider online website verification as "primary source." The current process requires primary source verification by hard copy from the regulatory board directly.

- Utilize the online verification service through the National Practitioner Databank to gain direct access to physician information. BoME can access information on physicians directly at a cost of $6.50/physician. Now, physicians making application for a license must do a "self-query" and once received, applicant is required to mail it to the board, unopened. Accessing information online could reduce the wait time for this information by around three weeks.

- Allow for online submittal of Uniform Application addenda and provide an online payment option.

Initiate Uniform Application refinement. Collaborate with other states who are utilizing the uniform application to develop mult-state addendums. States have individual addendums which could be reviewed to find common elements. Harmonization of standards through legislative or rule action should be explored. The Federation of State Medical Boards reports that nationally over 2 of every 10 physicians hold a license in more than one state. The number is higher in Montana and shows the need for portability.

Be innovative with license types. In reflection of the more mobile physician of today and the delivery of care with telehealth services, explore a "temporary limited" license for locum tenens and/or other phyisicians modeled off the state telemedicine laws.

Challenges that exist could include having the BoME be part of an umbrella organization who administers many licensing boards. This organization may place a higher value in having all boards within the state operate in the same manner administratively over the adoption of a process unique and a better fit for a specific profession.. Physicians may be a profession that should be looked at differently from other health care boards in reflection of the workforce shortage reality. We should encourage the exploration and adoption of innovative, creative licensure processes that recognize the customer demand for an easier, speedier process and embrace strong patient protection measures.

Thank you for this opportunity. Please contact Jean Branscum, MMA Executive Vice President, at jean@mmaoffice.org or by telephone at 406/443-4000 should additional information be needed.