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Board of Medicine seeks legislation to expedite multiple-state licensure

DES MOINES, IA -- The Iowa Board of Medicine is seeking legislation to establish a compact with other state boards of medicine that would allow highly qualified physicians to rapidly be licensed to practice medicine in multiple states.

The compact, a legally binding agreement between states, would simplify and improve the licensure process for physicians practicing across state lines as well as providing telemedicine services in multiple states. The compact could be a boon for physician recruiting efforts by rural hospitals with chronic staffing shortages and lack of access to specialists.

Developed by representatives of state medical boards, including Iowa, under the auspices of the Federation of State Medical Boards, the interstate compact is expected to be introduced in more than 20 state legislatures in 2015. At least seven states must adopt the legislation for the compact to be enacted.

The compact is being offered at a time of physician shortages, the expected influx of millions of new patients into the healthcare system as a result of the Affordable Care Act, and the growing use of telemedicine to increase access to healthcare.

The compact does not create a single national medical license, but preserves states' ability to license and regulate the practice of medicine within their borders and protect their patients. It defines that the practice of medicine as taking place where the patient receives care and requires a physician to be licensed in the state where the patient receives that care.

If a physician is licensed in a compact state and meets requirements of the compact, then other compact states are required to issue licenses immediately as requested by the physician. If a physician doesn't meet the compact requirements, licensure can be pursued through a traditional

pathway, which includes a detailed and lengthy process to verify and evaluate licensure history, education, training and employment history to determine licensure eligibility.

The compact establishes a commission to help administer multiple-state licensure applications and to help facilitate more aggressive exchange of physician licensure and disciplinary information between states. The commission will have 2 representatives from each state medical board participating in the compact.

Iowa is currently a member of 24 interstate compacts, including one that provides for multiple state licensing of nurses.

HIGHLIGHTS

INTERSTATE MEDICAL LICENSURE COMPACT

- Creates a new process to expedite licensing for highly qualified physicians interested in practicing in multiple states
- Defines the practice of medicine as taking place where the patient receives care
- Requires the physician to be licensed in the state where the patient receives care
- Allows states to exchange information to track and investigate physicians
- Participation in the compact is voluntary for both physicians and state medical boards
- Creates another pathway for medical licensure, but does not otherwise change a state's existing Medical Practice Act
- Creates a commission to administer the compact and function alongside the existing licensing authority of state medical boards
- Requires at least 7 states to join the compact for it to become operational
- Funded by compact fees paid by licensees and assessments levied on participating states

KEY ELIGIBILITY CRITERIA FOR PHYSICIANS

- A full and unrestricted medical license issued by a state board that is a member of the compact
- Successful completion of an accredited graduate medical education curriculum
- Certification by nationally recognized medical or osteopathic specialty boards
- Never convicted or subject to certain alternatives to conviction by a court for a felony, gross misdemeanor, or crime of moral turpitude
- Never disciplined by a medical board, excluding actions related to nonpayment of license fees

- Never had a controlled substance license or permit suspended or revoked
- Not under active investigation by a law enforcement agency or a medical board
- An estimated 80 percent of physicians nationwide will meet eligibility requirements

WHY IT'S GOOD FOR IOWA

- Maintains local control and local accountability of physicians who treat patients in Iowa
- Expedited licensure process will help small community hospitals and clinics recruit physicians
- Complements Iowa physicians' needs for multiple-state licenses. 55 percent of Iowa's physicians have active licenses in 2 or more states compared with 20 percent nationally.
- Complements the burgeoning practice of telemedicine. More Iowa physicians are extending their practices beyond state borders, and out-of-state physicians who want to treat patients via telemedicine in Iowa must have an Iowa medical license.
- Allows the Iowa Board of Medicine to keep its licensure fees, which fund public safety initiatives through regulation and compliance actions
- Exchange of more licensure and disciplinary information between states will help the Board keep problematic doctors out of Iowa

The following is the draft legislation to establish an interstate medical licensure compact:

SENATE/HOUSE FILE _____
BY (PROPOSED BOARD OF MEDICINE
BILL)

A BILL FOR

1 An Act establishing an interstate medical licensure compact.
2 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

DRAFT

1 Section 1. NEW SECTION. 148G.1 Interstate medical licensure
2 compact.

3 1. *Purpose.*

4 a. In order to strengthen access to health care, and in
5 recognition of the advances in the delivery of health care,
6 the member states of the interstate medical licensure compact
7 have allied in common purpose to develop a comprehensive
8 process that complements the existing licensing and regulatory
9 authority of state medical boards and provides a streamlined
10 process that allows physicians to become licensed in multiple
11 states, thereby enhancing the portability of a medical license
12 and ensuring the safety of patients. The compact creates
13 another pathway for licensure and does not otherwise change
14 a state's existing medical practice act. The compact also
15 adopts the prevailing standard for licensure and affirms that
16 the practice of medicine occurs where the patient is located
17 at the time of the physician-patient encounter, and therefore,
18 requires the physician to be under the jurisdiction of the
19 state medical board where the patient is located.

20 b. State medical boards that participate in the compact
21 retain the jurisdiction to impose an adverse action against
22 a license to practice medicine in that state issued to a
23 physician through the procedures in the compact.

24 2. *Definitions.* In this compact:

25 a. "*Bylaws*" means those bylaws established by the interstate
26 commission pursuant to subsection 11 for its governance, or for
27 directing and controlling its actions and conduct.

28 b. "*Commissioner*" means the voting representative appointed
29 by each member board pursuant to subsection 11.

30 c. "*Conviction*" means a finding by a court that
31 an individual is guilty of a criminal offense through
32 adjudication, or entry of a plea of guilt or no contest to the
33 charge by the offender. Evidence of an entry of a conviction
34 of a criminal offense by the court shall be considered final
35 for purposes of disciplinary action by a member board.

1 *d. "Expedited license"* means a full and unrestricted medical
2 license granted by a member state to an eligible physician
3 through the process set forth in the compact.

4 *e. "Interstate commission"* means the interstate commission
5 created pursuant to this section.

6 *f. "License"* means authorization by a state for a physician
7 to engage in the practice of medicine, which would be unlawful
8 without the authorization.

9 *g. "Medical practice act"* means laws and regulations
10 governing the practice of allopathic and osteopathic medicine
11 within a member state.

12 *h. "Member board"* means a state agency in a member state
13 that acts in the sovereign interests of the state by protecting
14 the public through licensure, regulation, and education of
15 physicians as directed by the state government.

16 *i. "Member state"* means a state that has enacted the
17 compact.

18 *j. "Offense"* means a felony, gross misdemeanor, or crime of
19 moral turpitude.

20 *k. "Physician"* means any person who satisfies all of the
21 following:

22 (1) Is a graduate of a medical school accredited by the
23 liaison committee on medical education, the commission on
24 osteopathic college accreditation, or a medical school listed
25 in the international medical education directory or its
26 equivalent.

27 (2) Passed each component of the United States medical
28 licensing examination or the comprehensive osteopathic medical
29 licensing examination within three attempts, or any of its
30 predecessor examinations accepted by a state medical board as
31 an equivalent examination for licensure purposes.

32 (3) Successfully completed graduate medical education
33 approved by the accreditation council for graduate medical
34 education or the American osteopathic association.

35 (4) Holds specialty certification or a time-unlimited

1 specialty certificate recognized by the American board of
2 medical specialties or the American osteopathic association's
3 bureau of osteopathic specialists.

4 (5) Possesses a full and unrestricted license to engage in
5 the practice of medicine issued by a member board.

6 (6) Has never been convicted, received adjudication,
7 deferred adjudication, community supervision, or deferred
8 disposition for any offense by a court of appropriate
9 jurisdiction.

10 (7) Has never held a license authorizing the practice of
11 medicine subjected to discipline by a licensing agency in any
12 state, federal, or foreign jurisdiction, excluding any action
13 related to nonpayment of fees related to a license.

14 (8) Has never had a controlled substance license or permit
15 suspended or revoked by a state or the United States drug
16 enforcement administration.

17 (9) Is not under active investigation by a licensing agency
18 or law enforcement authority in any state, federal, or foreign
19 jurisdiction.

20 1. *"Practice of medicine"* means the clinical prevention,
21 diagnosis, or treatment of human disease, injury, or condition
22 requiring a physician to obtain and maintain a license in
23 compliance with the medical practice act of a member state.

24 m. *"Rule"* means a written statement by the interstate
25 commission promulgated pursuant to subsection 12 that is of
26 general applicability, implements, interprets, or prescribes
27 a policy or provision of the compact, or an organizational,
28 procedural, or practice requirement of the interstate
29 commission, and has the force and effect of statutory law in a
30 member state, and includes the amendment, repeal, or suspension
31 of an existing rule.

32 n. *"State"* means any state, commonwealth, district, or
33 territory of the United States.

34 o. *"State of principal license"* means a member state where
35 a physician holds a license to practice medicine and which

1 has been designated as such by the physician for purposes of
2 registration and participation in the compact.

3 3. *Eligibility.*

4 a. A physician must meet the eligibility requirements as
5 defined in subsection 2, paragraph "k", to receive an expedited
6 license under the terms and provisions of the compact.

7 b. A physician who does not meet the requirements of
8 subsection 2, paragraph "k", may obtain a license to practice
9 medicine in a member state if the individual complies with all
10 laws and requirements, other than the compact, relating to the
11 issuance of a license to practice medicine in that state.

12 4. *Designation of state of principal license.*

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

18 (1) The state of primary residence for the physician, or

19 (2) The state where at least twenty-five percent of the
20 practice of medicine occurs, or

21 (3) The location of the physician's employer, or

22 (4) If no state qualifies under subparagraph (1),
23 subparagraph (2), or subparagraph (3), the state designated as
24 state of residence for purposes of federal income tax.

25 b. A physician may redesignate a member state as the state
26 of principal license at any time, as long as the state meets
27 the requirements in paragraph "a".

28 c. The interstate commission is authorized to develop rules
29 to facilitate redesignation of another member state as the
30 state of principal license.

31 5. *Application and issuance of expedited licensure.*

32 a. A physician seeking licensure through the compact shall
33 file an application for an expedited license with the member
34 board of the state selected by the physician as the state of
35 principal license.

1 *b.* Upon receipt of an application for an expedited
2 license, the member board within the state selected as
3 the state of principal license shall evaluate whether the
4 physician is eligible for expedited licensure and issue a
5 letter of qualification, verifying or denying the physician's
6 eligibility, to the interstate commission.

7 (1) Static qualifications, which include verification of
8 medical education, graduate medical education, results of any
9 medical or licensing examination, and other qualifications as
10 determined by the interstate commission through rule, shall
11 not be subject to additional primary source verification where
12 already primary source-verified by the state of principal
13 license.

14 (2) The member board within the state selected as the
15 state of principal license shall, in the course of verifying
16 eligibility, perform a criminal background check of an
17 applicant, including the use of the results of fingerprint or
18 other biometric data checks compliant with the requirements
19 of the federal bureau of investigation, with the exception
20 of federal employees who have suitability determination in
21 accordance with 5 C.F.R. §731.202.

22 (3) Appeal on the determination of eligibility shall be made
23 to the member state where the application was filed and shall
24 be subject to the law of that state.

25 *c.* Upon verification in paragraph "*b*", physicians eligible
26 for an expedited license shall complete the registration
27 process established by the interstate commission to receive a
28 license in a member state selected pursuant to paragraph "*a*",
29 including the payment of any applicable fees.

30 *d.* After receiving verification of eligibility under
31 paragraph "*b*" and any fees under paragraph "*c*", a member board
32 shall issue an expedited license to the physician. This
33 license shall authorize the physician to practice medicine in
34 the issuing state consistent with the medical practice act and
35 all applicable laws and regulations of the issuing member board

1 and member state.

2 e. An expedited license shall be valid for a period
3 consistent with the licensure period in the member state and in
4 the same manner as required for other physicians holding a full
5 and unrestricted license within the member state.

6 f. An expedited license obtained through the compact shall
7 be terminated if a physician fails to maintain a license in
8 the state of principal license for a nondisciplinary reason,
9 without redesignation of a new state of principal license.

10 g. The interstate commission is authorized to develop rules
11 regarding the application process, including payment of any
12 applicable fees, and the issuance of an expedited license.

13 6. *Fees for expedited licensure.*

14 a. A member state issuing an expedited license authorizing
15 the practice of medicine in that state may impose a fee for a
16 license issued or renewed through the compact.

17 b. The interstate commission is authorized to develop rules
18 regarding fees for expedited licenses.

19 7. *Renewal and continued participation.*

20 a. A physician seeking to renew an expedited license granted
21 in a member state shall complete a renewal process with the
22 interstate commission if the physician satisfies the following:

23 (1) Maintains a full and unrestricted license in a state of
24 principal license.

25 (2) Has not been convicted, received adjudication, deferred
26 adjudication, community supervision, or deferred disposition
27 for any offense by a court of appropriate jurisdiction.

28 (3) Has not had a license authorizing the practice of
29 medicine subject to discipline by a licensing agency in any
30 state, federal, or foreign jurisdiction, excluding any action
31 related to nonpayment of fees related to a license.

32 (4) Has not had a controlled substance license or permit
33 suspended or revoked by a state or the United States drug
34 enforcement administration.

35 b. Physicians shall comply with all continuing professional

1 development or continuing medical education requirements for
2 renewal of a license issued by a member state.

3 *c.* The interstate commission shall collect any renewal fees
4 charged for the renewal of a license and distribute the fees
5 to the applicable member board.

6 *d.* Upon receipt of any renewal fees collected in paragraph
7 "*c*", a member board shall renew the physician's license.

8 *e.* Physician information collected by the interstate
9 commission during the renewal process will be distributed to
10 all member boards.

11 *f.* The interstate commission is authorized to develop rules
12 to address renewal of licenses obtained through the compact.

13 8. *Coordinated information system.*

14 *a.* The interstate commission shall establish a database of
15 all physicians licensed, or who have applied for licensure,
16 under subsection 5.

17 *b.* Notwithstanding any other provision of law, member boards
18 shall report to the interstate commission any public action
19 or complaints against a licensed physician who has applied or
20 received an expedited license through the compact.

21 *c.* Member boards shall report disciplinary or investigatory
22 information determined as necessary and proper by rule of the
23 interstate commission.

24 *d.* Member boards may report any nonpublic complaint,
25 disciplinary, or investigatory information not required by
26 paragraph "*c*" to the interstate commission.

27 *e.* Member boards shall share complaint or disciplinary
28 information about a physician upon request of another member
29 board.

30 *f.* All information provided to the interstate commission or
31 distributed by member boards shall be confidential, filed under
32 seal, and used only for investigatory or disciplinary matters.

33 *g.* The interstate commission is authorized to develop rules
34 for mandated or discretionary sharing of information by member
35 boards.

1 9. *Joint investigations.*

2 *a.* Licensure and disciplinary records of physicians are
3 deemed investigative.

4 *b.* In addition to the authority granted to a member board by
5 its respective medical practice Act or other applicable state
6 law, a member board may participate with other member boards
7 in joint investigations of physicians licensed by the member
8 boards.

9 *c.* A subpoena issued by a member state shall be enforceable
10 in other member states.

11 *d.* Member boards may share any investigative, litigation, or
12 compliance materials in furtherance of any joint or individual
13 investigation initiated under the compact.

14 *e.* Any member state may investigate actual or alleged
15 violations of the statutes authorizing the practice of medicine
16 in any other member state in which a physician holds a license
17 to practice medicine.

18 10. *Disciplinary actions.*

19 *a.* Any disciplinary action taken by any member board against
20 a physician licensed through the compact shall be deemed
21 unprofessional conduct which may be subject to discipline
22 by other member boards, in addition to any violation of the
23 medical practice Act or regulations in that state.

24 *b.* If a license granted to a physician by the member board
25 in the state of principal license is revoked, surrendered,
26 or relinquished in lieu of discipline, or suspended, then
27 all licenses issued to the physician by member boards shall
28 automatically be placed, without further action necessary by
29 any member board, on the same status. If the member board
30 in the state of principal license subsequently reinstates
31 the physician's license, a license issued to the physician
32 by any other member board shall remain encumbered until that
33 respective member board takes action to reinstate the license
34 in a manner consistent with the medical practice Act of that
35 state.

1 c. If disciplinary action is taken against a physician by a
2 member board not in the state of principal license, any other
3 member board may deem the action conclusive as to matter of law
4 and fact decided and either:

5 (1) Impose the same or lesser sanctions against the
6 physician so long as such sanctions are consistent with the
7 medical practice Act of that state, or

8 (2) Pursue separate disciplinary action against the
9 physician under its respective medical practice Act, regardless
10 of the action taken in other member states.

11 d. If a license granted to a physician by a member board is
12 revoked, surrendered, or relinquished in lieu of discipline,
13 or suspended, then any licenses issued to the physician by
14 any other member boards shall be suspended, automatically and
15 immediately without further action necessary by the other
16 member boards, for ninety days upon entry of the order by the
17 disciplining board, to permit the member boards to investigate
18 the basis for the action under the medical practice Act of that
19 state. A member board may terminate the automatic suspension
20 of the license it issued prior to the completion of the
21 ninety-day suspension period in a manner consistent with the
22 medical practice Act of that state.

23 11. *Interstate medical licensure compact commission.*

24 a. The member states hereby create the interstate medical
25 licensure compact commission.

26 b. The purpose of the interstate commission is the
27 administration of the interstate medical licensure compact,
28 which is a discretionary state function.

29 c. The interstate commission shall be a body corporate
30 and joint agency of the member states and shall have all the
31 responsibilities, powers, and duties set forth in the compact,
32 and such additional powers as may be conferred upon it by a
33 subsequent concurrent action of the respective legislatures of
34 the member states in accordance with the terms of the compact.

35 d. The interstate commission shall consist of two voting

1 representatives appointed by each member state who shall serve
2 as commissioners. In states where allopathic and osteopathic
3 physicians are regulated by separate member boards, or if
4 the licensing and disciplinary authority is split between
5 multiple member boards within a member state, the member state
6 shall appoint one representative from each member board. A
7 commissioner shall be one of the following:

8 (1) An allopathic or osteopathic physician appointed to a
9 member board.

10 (2) An executive director, executive secretary, or similar
11 executive of a member board.

12 (3) A member of the public appointed to a member board.

13 e. The interstate commission shall meet at least once each
14 calendar year. A portion of this meeting shall be a business
15 meeting to address such matters as may properly come before
16 the commission, including the election of officers. The
17 chairperson may call additional meetings and shall call for a
18 meeting upon the request of a majority of the member states.

19 f. The bylaws may provide for meetings of the interstate
20 commission to be conducted by telecommunication or electronic
21 communication.

22 g. Each commissioner participating at a meeting of the
23 interstate commission is entitled to one vote. A majority of
24 commissioners shall constitute a quorum for the transaction
25 of business, unless a larger quorum is required by the bylaws
26 of the interstate commission. A commissioner shall not
27 delegate a vote to another commissioner. In the absence of its
28 commissioner, a member state may delegate voting authority for
29 a specified meeting to another person from that state who shall
30 meet the requirements of paragraph "d".

31 h. The interstate commission shall provide public notice
32 of all meetings and all meetings shall be open to the public.
33 The interstate commission may close a meeting, in full or
34 in portion, where it determines by a two-thirds vote of the
35 commissioners present that an open meeting would be likely to

1 result in one or more of the following:

2 (1) Relate solely to the internal personnel practices and
3 procedures of the interstate commission.

4 (2) Discuss matters specifically exempted from disclosure
5 by federal statute.

6 (3) Discuss trade secrets, commercial, or financial
7 information that is privileged or confidential.

8 (4) Involve accusing a person of a crime, or formally
9 censuring a person.

10 (5) Discuss information of a personal nature where
11 disclosure would constitute a clearly unwarranted invasion of
12 personal privacy.

13 (6) Discuss investigative records compiled for law
14 enforcement purposes.

15 (7) Specifically relate to the participation in a civil
16 action or other legal proceeding.

17 *i.* The interstate commission shall keep minutes which shall
18 fully describe all matters discussed in a meeting and shall
19 provide a full and accurate summary of actions taken, including
20 record of any roll call votes.

21 *j.* The interstate commission shall make its information
22 and official records, to the extent not otherwise designated
23 in the compact or by its rules, available to the public for
24 inspection.

25 *k.* The interstate commission shall establish an executive
26 committee, which shall include officers, members, and others as
27 determined by the bylaws. The executive committee shall have
28 the power to act on behalf of the interstate commission, with
29 the exception of rulemaking, during periods when the interstate
30 commission is not in session. When acting on behalf of the
31 interstate commission, the executive committee shall oversee
32 the administration of the compact including enforcement and
33 compliance with the provisions of the compact, its bylaws and
34 rules, and other such duties as necessary.

35 *l.* The interstate commission may establish other committees

1 for governance and administration of the compact.

2 12. *Powers and duties of the interstate commission.* The
3 interstate commission shall have power to perform the following
4 functions:

5 a. Oversee and maintain the administration of the compact.

6 b. Promulgate rules which shall be binding to the extent and
7 in the manner provided for in the compact.

8 c. Issue, upon the request of a member state or
9 member board, advisory opinions concerning the meaning or
10 interpretation of the compact, its bylaws, rules, and actions.

11 d. Enforce compliance with compact provisions, the rules
12 promulgated by the interstate commission, and the bylaws, using
13 all necessary and proper means, including but not limited to
14 the use of judicial process.

15 e. Establish and appoint committees including but not
16 limited to an executive committee as required by subsection 11,
17 which shall have the power to act on behalf of the interstate
18 commission in carrying out its powers and duties.

19 f. Pay, or provide for the payment of, the expenses related
20 to the establishment, organization, and ongoing activities of
21 the interstate commission.

22 g. Establish and maintain one or more offices.

23 h. Borrow, accept, hire, or contract for services of
24 personnel.

25 i. Purchase and maintain insurance and bonds.

26 j. Employ an executive director who shall have such
27 powers to employ, select, or appoint employees, agents, or
28 consultants, and to determine their qualifications, define
29 their duties, and fix their compensation.

30 k. Establish personnel policies and programs relating
31 to conflicts of interest, rates of compensation, and
32 qualifications of personnel.

33 l. Accept donations and grants of money, equipment,
34 supplies, materials, and services, and to receive, utilize, and
35 dispose of the same in a manner consistent with the conflict of

1 interest policies established by the interstate commission.

2 *m.* Lease, purchase, accept contributions or donations of, or
3 otherwise to own, hold, improve, or use, any property, real,
4 personal, or mixed.

5 *n.* Sell, convey, mortgage, pledge, lease, exchange, abandon,
6 or otherwise dispose of any property, real, personal, or mixed.

7 *o.* Establish a budget and make expenditures.

8 *p.* Adopt a seal and bylaws governing the management and
9 operation of the interstate commission.

10 *q.* Report annually to the legislatures and governors of
11 the member states concerning the activities of the interstate
12 commission during the preceding year. Such reports shall also
13 include reports of financial audits and any recommendations
14 that may have been adopted by the interstate commission.

15 *r.* Coordinate education, training, and public awareness
16 regarding the compact, its implementation, and its operation.

17 *s.* Maintain records in accordance with the bylaws.

18 *t.* Seek and obtain trademarks, copyrights, and patents.

19 *u.* Perform such functions as may be necessary or appropriate
20 to achieve the purposes of the compact.

21 13. *Finance powers.*

22 *a.* The interstate commission may levy on and collect an
23 annual assessment from each member state to cover the cost of
24 the operations and activities of the interstate commission and
25 its staff. The total assessment must be sufficient to cover
26 the annual budget approved each year for which revenue is not
27 provided by other sources. The aggregate annual assessment
28 amount shall be allocated upon a formula to be determined
29 by the interstate commission, which shall promulgate a rule
30 binding upon all member states.

31 *b.* The interstate commission shall not incur obligations of
32 any kind prior to securing the funds adequate to meet the same.

33 *c.* The interstate commission shall not pledge the credit of
34 any of the member states, except by, and with the authority of,
35 the member state.

1 *d.* The interstate commission shall be subject to a yearly
2 financial audit conducted by a certified or licensed public
3 accountant and the report of the audit shall be included in the
4 annual report of the interstate commission.

5 14. *Organization and operation of the interstate commission.*

6 *a.* The interstate commission shall, by a majority of
7 commissioners present and voting, adopt bylaws to govern its
8 conduct as may be necessary or appropriate to carry out the
9 purposes of the compact within twelve months of the first
10 interstate commission meeting.

11 *b.* The interstate commission shall elect or appoint annually
12 from among its commissioners a chairperson, a vice chairperson,
13 and a treasurer, each of whom shall have such authority and
14 duties as may be specified in the bylaws. The chairperson,
15 or in the chairperson's absence or disability, the vice
16 chairperson, shall preside at all meetings of the interstate
17 commission.

18 *c.* Officers selected in paragraph "b" shall serve without
19 remuneration from the interstate commission.

20 *d.* The officers and employees of the interstate commission
21 shall be immune from suit and liability, either personally or
22 in their official capacity, for a claim for damage to or loss
23 of property or personal injury or other civil liability caused
24 or arising out of, or relating to, an actual or alleged act,
25 error, or omission that occurred, or that such person had a
26 reasonable basis for believing occurred, within the scope of
27 interstate commission employment, duties, or responsibilities,
28 provided that such person shall not be protected from suit or
29 liability for damage, loss, injury, or liability caused by the
30 intentional or willful and wanton misconduct of such person.

31 (1) The liability of the executive director and employees of
32 the interstate commission or representatives of the interstate
33 commission, acting within the scope of such person's employment
34 or duties for acts, errors, or omissions occurring within such
35 person's state, may not exceed the limits of liability set

1 forth under the constitution and laws of that state for state
2 officials, employees, and agents. The interstate commission
3 is considered to be an instrumentality of the states for
4 the purposes of any such action. Nothing in this paragraph
5 "d" shall be construed to protect such person from suit or
6 liability for damage, loss, injury, or liability caused by the
7 intentional or willful and wanton misconduct of such person.

8 (2) The interstate commission shall defend the executive
9 director, its employees, and subject to the approval of
10 the attorney general or other appropriate legal counsel of
11 the member state represented by an interstate commission
12 representative, shall defend such interstate commission
13 representative in any civil action seeking to impose liability
14 arising out of an actual or alleged act, error, or omission
15 that occurred within the scope of interstate commission
16 employment, duties, or responsibilities, or that the defendant
17 had a reasonable basis for believing occurred within the
18 scope of interstate commission employment, duties, or
19 responsibilities, provided that the actual or alleged act,
20 error, or omission did not result from intentional or willful
21 and wanton misconduct on the part of such person.

22 (3) To the extent not covered by the state involved, member
23 state, or the interstate commission, the representatives or
24 employees of the interstate commission shall be held harmless
25 in the amount of a settlement or judgment, including attorney
26 fees and costs, obtained against such persons arising out of
27 an actual or alleged act, error, or omission that occurred
28 within the scope of interstate commission employment, duties,
29 or responsibilities, or that such persons had a reasonable
30 basis for believing occurred within the scope of interstate
31 commission employment, duties, or responsibilities, provided
32 that the actual or alleged act, error, or omission did not
33 result from intentional or willful and wanton misconduct on the
34 part of such persons.

35 15. *Rulemaking functions of the interstate commission.*

1 a. The interstate commission shall promulgate reasonable
2 rules in order to effectively and efficiently achieve the
3 purposes of the compact. Notwithstanding the foregoing, in
4 the event the interstate commission exercises its rulemaking
5 authority in a manner that is beyond the scope of the purposes
6 of the compact, or the powers granted hereunder, then such an
7 action by the interstate commission shall be invalid and have
8 no force or effect.

9 b. Rules deemed appropriate for the operations of the
10 interstate commission shall be made pursuant to a rulemaking
11 process that substantially conforms to the model state
12 administrative procedure Act of 2010, and subsequent amendments
13 thereto.

14 c. Not later than thirty days after a rule is promulgated,
15 any person may file a petition for judicial review of the
16 rule in the United States district court for the District
17 of Columbia or the federal district where the interstate
18 commission has its principal offices, provided that the filing
19 of such a petition shall not stay or otherwise prevent the
20 rule from becoming effective unless the court finds that the
21 petitioner has a substantial likelihood of success. The
22 court shall give deference to the actions of the interstate
23 commission consistent with applicable law and shall not find
24 the rule to be unlawful if the rule represents a reasonable
25 exercise of the authority granted to the interstate commission.

26 16. *Oversight of interstate compact.*

27 a. The executive, legislative, and judicial branches
28 of state government in each member state shall enforce the
29 compact and shall take all actions necessary and appropriate to
30 effectuate the compact's purposes and intent. The provisions
31 of the compact and the rules promulgated hereunder shall have
32 standing as statutory law but shall not override existing state
33 authority to regulate the practice of medicine.

34 b. All courts shall take judicial notice of the compact and
35 the rules in any judicial or administrative proceeding in a

1 member state pertaining to the subject matter of the compact
2 which may affect the powers, responsibilities, or actions of
3 the interstate commission.

4 *c.* The interstate commission shall be entitled to receive
5 all service of process in any such proceeding, and shall have
6 standing to intervene in the proceeding for all purposes.
7 Failure to provide service of process to the interstate
8 commission shall render a judgment or order void as to the
9 interstate commission, the compact, or promulgated rules.

10 17. *Enforcement of interstate compact.*

11 *a.* The interstate commission, in the reasonable exercise of
12 its discretion, shall enforce the provisions and rules of the
13 compact.

14 *b.* The interstate commission may, by majority vote of
15 the commissioners, initiate legal action in the United
16 States district court for the District of Columbia, or, at
17 the discretion of the interstate commission, in the federal
18 district where the interstate commission has its principal
19 offices, to enforce compliance with the provisions of the
20 compact, and its promulgated rules and bylaws, against a
21 member state in default. The relief sought may include
22 both injunctive relief and damages. In the event judicial
23 enforcement is necessary, the prevailing party shall be awarded
24 all costs of such litigation including reasonable attorney
25 fees.

26 *c.* The remedies herein shall not be the exclusive remedies
27 of the interstate commission. The interstate commission may
28 avail itself of any other remedies available under state law or
29 the regulation of a profession.

30 18. *Default procedures.*

31 *a.* The grounds for default include but are not limited
32 to failure of a member state to perform such obligations or
33 responsibilities imposed upon it by the compact, or the rules
34 and bylaws of the interstate commission promulgated under the
35 compact.

1 *b.* If the interstate commission determines that a member
2 state has defaulted in the performance of its obligations
3 or responsibilities under the compact, or the bylaws or
4 promulgated rules, the interstate commission shall do the
5 following:

6 (1) Provide written notice to the defaulting state and other
7 member states of the nature of the default, the means of curing
8 the default, and any action taken by the interstate commission.
9 The interstate commission shall specify the conditions by which
10 the defaulting state must cure its default.

11 (2) Provide remedial training and specific technical
12 assistance regarding the default.

13 *c.* If the defaulting state fails to cure the default, the
14 defaulting state shall be terminated from the compact upon an
15 affirmative vote of a majority of the commissioners and all
16 rights, privileges, and benefits conferred by the compact shall
17 terminate on the effective date of termination. A cure of the
18 default does not relieve the offending state of obligations or
19 liabilities incurred during the period of the default.

20 *d.* Termination of membership in the compact shall be imposed
21 only after all other means of securing compliance have been
22 exhausted. Notice of intent to terminate shall be given by
23 the interstate commission to the governor, the majority and
24 minority leaders of the defaulting state's legislature, and
25 each of the member states.

26 *e.* The interstate commission shall establish rules and
27 procedures to address licenses and physicians that are
28 materially impacted by the termination of a member state, or
29 the withdrawal of a member state.

30 *f.* The member state which has been terminated is responsible
31 for all dues, obligations, and liabilities incurred through
32 the effective date of termination including obligations, the
33 performance of which extends beyond the effective date of
34 termination.

35 *g.* The interstate commission shall not bear any costs

1 relating to any state that has been found to be in default or
2 which has been terminated from the compact, unless otherwise
3 mutually agreed upon in writing between the interstate
4 commission and the defaulting state.

5 *h.* The defaulting state may appeal the action of the
6 interstate commission by petitioning the United States district
7 court for the District of Columbia or the federal district
8 where the interstate commission has its principal offices. The
9 prevailing party shall be awarded all costs of such litigation
10 including reasonable attorney fees.

11 19. *Dispute resolution.*

12 *a.* The interstate commission shall attempt, upon the request
13 of a member state, to resolve disputes which are subject to
14 the compact and which may arise among member states or member
15 boards.

16 *b.* The interstate commission shall promulgate rules
17 providing for both mediation and binding dispute resolution as
18 appropriate.

19 20. *Member states, effective date, and amendment.*

20 *a.* Any state is eligible to become a member state of the
21 compact.

22 *b.* The compact shall become effective and binding upon
23 legislative enactment of the compact into law by no less than
24 seven states. Thereafter, it shall become effective and
25 binding on a state upon enactment of the compact into law by
26 that state.

27 *c.* The governors of nonmember states, or their designees,
28 shall be invited to participate in the activities of the
29 interstate commission on a nonvoting basis prior to adoption
30 of the compact by all states.

31 *d.* The interstate commission may propose amendments to the
32 compact for enactment by the member states. No amendment shall
33 become effective and binding upon the interstate commission and
34 the member states unless and until it is enacted into law by
35 unanimous consent of the member states.

1 21. *Withdrawal.*

2 *a.* Once effective, the compact shall continue in force and
3 remain binding upon each and every member state, provided that
4 a member state may withdraw from the compact by specifically
5 repealing the statute which enacted the compact into law.

6 *b.* Withdrawal from the compact shall be by the enactment
7 of a statute repealing the same, but shall not take effect
8 until one year after the effective date of such statute and
9 until written notice of the withdrawal has been given by the
10 withdrawing state to the governor of each other member state.

11 *c.* The withdrawing state shall immediately notify the
12 chairperson of the interstate commission in writing upon the
13 introduction of legislation repealing the compact in the
14 withdrawing state.

15 *d.* The interstate commission shall notify the other member
16 states of the withdrawing state's intent to withdraw within
17 sixty days of its receipt of notice provided under paragraph
18 "c".

19 *e.* The withdrawing state is responsible for all dues,
20 obligations, and liabilities incurred through the effective
21 date of withdrawal, including obligations, the performance of
22 which extend beyond the effective date of withdrawal.

23 *f.* Reinstatement following withdrawal of a member state
24 shall occur upon the withdrawing state reenacting the compact
25 or upon such later date as determined by the interstate
26 commission.

27 *g.* The interstate commission is authorized to develop
28 rules to address the impact of the withdrawal of a member
29 state on licenses granted in other member states to physicians
30 who designated the withdrawing member state as the state of
31 principal license.

32 22. *Dissolution.*

33 *a.* The compact shall dissolve effective upon the date of
34 the withdrawal or default of the member state which reduces the
35 membership in the compact to one member state.

1 in states in which they do not hold a traditional license.
2 Passage of the bill means Iowa would become a compact member
3 state. The compact shall become effective and binding upon
4 passage by at least seven states.

5 The bill recognizes the creation of an interstate medical
6 licensure compact commission to administer the compact. Its
7 commissioners would include two representatives from each
8 member state. The commissioners must be an allopathic or
9 osteopathic physician appointed to a state board, an executive
10 member of a state board, or a member of the public on a state
11 board. The interstate commission must hold at least one
12 meeting per year and all meetings would be open to the public,
13 subject to closure for specified topics. The interstate
14 commission must create an executive committee and may establish
15 other committees as necessary to govern and administer the
16 compact. The interstate commission will have the power to
17 adopt bylaws, create its own rules, enforce compliance with
18 its bylaws and rules, establish and maintain offices, purchase
19 and maintain insurance and bonds, employ an executive director
20 who may employ and fix compensation and duties for employees,
21 establish a budget and make expenditures, seek and obtain
22 trademarks, copyrights, and patents, and lease, buy, and sell
23 property, as well as other functions it deems necessary.

24 Physicians must designate a member state as their state of
25 principal license for purposes of applying for an expedited
26 license. An expedited license is a full and unrestricted
27 license granted by a member state. A physician seeking an
28 expedited license to practice medicine must apply to the board
29 of medicine in the physician's state of principal license. The
30 board of medicine must then verify or deny the physician's
31 eligibility for an expedited license to the interstate
32 commission. An expedited license granted to a physician shall
33 be terminated if the physician fails to maintain a license in
34 the physician's state of principal license.

35 The interstate commission shall have authority to establish

1 and maintain a database of all physicians who have applied for
2 an expedited license. Medical boards of member states may
3 participate in investigations of physicians in conjunction with
4 other boards of other member states. A physician subjected
5 to disciplinary action by any medical board of a member state
6 may also be subject to discipline by another member state
7 medical board. If a physician's license is suspended, revoked,
8 surrendered, or relinquished due to discipline by one medical
9 board of a member state, the physician's license shall be
10 automatically placed on the same status by other medical boards
11 of member states without additional disciplinary action.

12 The interstate commission's officers and employees shall be
13 immune from liability for claims of damage that occurred within
14 the scope of their duties. The interstate commission may
15 propose amendments to the compact that would become effective
16 upon passage by at least seven member states. The interstate
17 commission may initiate legal action to enforce the compact's
18 provisions and rules. If a member state defaults in its
19 performance of the compact's responsibilities, the interstate
20 commission shall notify the state as such and provide training
21 and assistance to remedy the default. If a member state fails
22 to cure its default, that state's rights and privileges under
23 the compact shall be terminated upon a vote of the majority of
24 commissioners.

25 The executive, legislative, and judicial branches of Iowa
26 would maintain authority to enforce the compact. The compact's
27 provisions would not override the state's existing authority
28 to regulate the practice of medicine. The board of medicine
29 would have jurisdiction to impose an adverse action against
30 a medical license issued in Iowa pursuant to the compact's
31 procedures. Member states may withdraw upon enactment of a
32 statute repealing the compact. The compact would dissolve when
33 membership declines to one state.