



April 24, 2018

Texas Sunset Advisory Commission
P.O. Box 13066
Austin, TX 78711

Dear Commissioners,

On behalf of the Federation of State Medical Boards (FSMB), and as a resident of Fort Worth and consumer of health care, I would like to take this opportunity to comment on the Sunset review of the Texas Medical Board, specifically the Interstate Medical Licensure Compact. The Federation of State Medical Boards urges the Commission to include the Compact in the 2018-2019 Sunset Advisory Commission Staff Report, as it did during the 2016-2017 biennium.

The FSMB is a national, non-profit organization, headquartered in Euless, Texas, whose members include all of the 70 state medical and osteopathic licensing and disciplinary boards of the United States and its territories, including the Texas Medical Board. The FSMB is committed to improving the system of medical regulation in the U.S. and advancing medical boards' ability to protect the public.

The Interstate Medical Licensure Compact (IMLC) is simply a pathway to expedite the issuance of a Texas license to practice medicine. Texas' participation in the compact will expand access to care by streamlining the licensing process for qualified physicians. The IMLC facilitates multistate practice and will help to alleviate workforce shortages in underserved areas, particularly by providing access to specialty care. Participation in the IMLC will in no way compromise the Texas Medical Board's ability ensure Texas licensed physicians adhere to all rules, regulations, and statutes pertaining to the practice of medicine.

Beginning in 2013, the Compact was drafted by state medical board representatives, with the assistance of the FSMB and the Council of State Governments (CSG). Throughout the near two year drafting process, input and feedback was received and incorporated from a multitude of stakeholders, including state medical boards, provider organizations (American Medical Association and American Osteopathic Association), patient advocacy organizations, hospitals and health systems, and the telehealth industry. Since the final model legislative language was released in September 2014, 22 states, the District of Columbia, and Guam have enacted the Compact, with Maryland and Vermont awaiting gubernatorial action. Member states within regional proximity of Texas include Alabama, Arizona, Colorado, Kansas, and Mississippi.

The Compact has been supported in Texas by the Texas Medical Association, Texas e-Health Alliance, United Ways of Texas, Texas Association for Home Care and Hospice, Texas

Association of Business, Mental Health America of Texas, and the Texas Hospital Association, among others.

Contrary to misinformation expressed by opponents of the legislation, the Compact does not supersede the state's autonomy and control over the practice of medicine. On the contrary, it is the ultimate expression of state authority. States maintain control through a coordinated legislative and administrative process. The Compact thwarts the ongoing efforts of some federal policymakers and powerful interest groups that would seek to override the state-based medical licensure system. Under the Compact, the practice of medicine is defined as where the patient is located, not where the physician is located. The IMLC does not change the requirement that physicians must obtain state medical licensure in every state in which they expect to treat patients and as such, must abide by all state rules, regulations and statutes related to the practice of medicine.

In order to obtain a license through the Compact, a physician must meet nine eligibility requirements, including passage of a federal criminal background check. The requirements are of the highest criteria to ensure physicians have the highest standards to protect patient safety.

The administrative oversight of the IMLC is through a legislatively created Commission that is comprised of two representatives of each Member State. A multi-year grant from the U.S. Health and Human Resources Administration has funded costs of implementation and a self-sustaining business model has been implemented so there have been no assessments to the participating states. As of March 31, 2018, the Compact has been used by 906 physicians who were able to secure 1,301 medical licenses in Compact member states.

The IMLC is a testament to the work of state medical boards, physicians, and other key stakeholders to reach consensus in support of a state-based solution that will simultaneously expedite medical license portability while ensuring the protection of the public.

Again, I thank you for the opportunity to comment on the Sunset review of the Texas Medical Board and urge you to include the Compact as a recommendation in the Sunset Staff Report. The FSMB hopes you will look at the long-range benefits that this legislation will have on expanding access to care and streamlining the licensing process for physicians in Texas.

Sincerely,

Lisa A. Robin
Chief Advocacy Officer

From: [Sunset Advisory Commission](#)
To: [Janet Wood](#)
Subject: FW: Public Input Form for Agencies Under Review (Public/After Publication)
Date: Tuesday, April 24, 2018 8:35:58 AM

-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Tuesday, April 24, 2018 8:15 AM
To: Sunset Advisory Commission
Subject: Public Input Form for Agencies Under Review (Public/After Publication)

Agency: TEXAS MEDICAL BOARD

First Name: Lisa A.

Last Name: Robin

Title: Chief Advocacy Officer

Organization you are affiliated with: Federation of State Medical Boards

Email: LRobin@fsmb.org

City: Washington

State: District of Columbia

Your Comments About the Staff Report, Including Recommendations Supported or
Opposed:
April 24, 2018

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P.O. Box 13066
Austin, TX 78711

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Sincerely,

Lisa A. Robin
Chief Advocacy Officer

Any Alternative or New Recommendations on This Agency: See above.

My Comment Will Be Made Public: I agree