

Keeping you informed from Washington, D.C.

June 27, 2024

Symposium on Alternate Licensing Models Convenes

Last week, more than 175 individuals from state medical boards professional associations, medical education, accreditation and certification organizations gathered in Washington, DC to discuss the increasing number of legislative proposals that would create a path to licensure bypassing the currently required, accredited, domestic GME. The feedback received from the symposium will be used to inform the deliberations of the **Advisory Commission on Alternate Licensing Models** which is expected to issue a discussion draft in the coming months. The Advisory Commission is co-hosted by the **Accreditation Council for Graduate Medical Education**, the **FSMB** and **Intealth**.

We will continue to closely monitor and report on federal and state legislation that impacts medical boards.

Please **reach out to us** if we can assist you on policy or legislative issues or questions!



Lisa Robin

Chief Advocacy Officer
Federation of State Medical Boards
(202) 463-4000 | lrobin@fsmb.org



Legislation Moving through Congress

The **House Armed Services Committee's** current version of the **National Defense Authorization Act for Fiscal Year 2025**, includes, among many other elements, a prohibition against cannabis testing as a condition of enlisting, which has been previously proposed but never enacted (§ 532); also included in the bill report is a directive to the Secretary of Defense to provide a report to Congress regarding the status of a DoD program - instituted by last year's NDAA - to "study the effectiveness of psychedelic substances and plant-based therapies in treating post-traumatic stress and traumatic brain injuries" (p. 243). A series of amendments were adopted, including:

- **Prohibiting** the DOD from paying for or reimbursing service members' travel expenses to receive an abortion, rescinding the Pentagon's October 2022 memo from **Rep. Van Duyne (R-TX)**;
- **Prohibiting** TRICARE from covering gender transition surgeries and **prohibiting** gender transition procedures or support for the minor dependent children of servicemembers from **Rep. Matt Rosendale (R-MT)**;
- **Instituting** a permanent hiring freeze for diversity, equity, and inclusion positions at DOD

- from **Rep. Jim Banks (R-IN)** and **eliminate** any DEI-related offices at the department, including personnel at the offices from **Rep. Ralph Norman (R-SC)**; and
- **Requiring** the DOD to implement a centralized program to monitor and provide assistance to service members at risk of suicide who have recently been discharged from health-care services from **Rep. Stephen Lynch (D-MA)**.

On Friday, June 14, the measure passed the House on a **217-199 vote**.

Pending Legislation of Interest

Women's Health

The **Advancing Menopause Care and Mid-Life Women's Health Act (S. 4246)** introduced by **Sen. Patty Murray (D-WA)**, would direct the NIH Director, in conjunction with the Office of Research on Women's Health, to coordinate and expand all research activities into the symptoms and changes across the menopausal transition and the postmenopausal period - such as osteoporosis, sarcopenia, joint and nerve pain, and trauma, anxiety, depression, mood disorders, and related mental and behavioral health conditions; among many others - on women's physical, mental, behavioral, and cognitive health; including how to prevent or mitigate associated adverse health outcomes. In addition, the bill authorizes grants supporting "the development of new treatments and diagnostic testing services for perimenopause and acute and chronic menopausal symptoms," expands "public health promotion and prevention activities with respect to mid-life women's health and chronic conditions, including diabetes, hypertension, heart disease, iron-deficiency anemia, inflammation, fibroids, endometriosis, and other related conditions and adverse health outcomes," and provide grants "to eligible entities to improve the early detection, diagnosis, and treatment of perimenopause and menopausal symptoms," among other related initiatives.

The **Mamas First Act (S. 4307/H.R. 8317)**, introduced by **Sen. Elizabeth Warren** and **Rep. Gwen Moore (D-WI)**, would allow Medicaid to cover "services and care, including prenatal, delivery, and postpartum care, provided in a culturally congruent manner... by doula, midwives, or tribal midwives (which are defined within the legislation)" regardless of location, including services rendered via telemedicine.

The **Keeping Obstetrics Local Act (S.)** introduced by **Sen. Ron Wyden (D-OR)**, would, among many other things, study and report on costs of providing maternity, labor, and delivery services (§ 101), require adequate Medicaid payment rates and increased Federal financial participating for such services (§ 102 & 103), require 12-month continuous coverage of full benefits for pregnant and postpartum individuals under Medicaid and CHIP (§ 201), require guidance on improving Medicaid and CHIP coverage for doula and midwife services (§ 203), authorizes the HHS Secretary to deploy obstetrics-trained providers from the Commissioned Corps of the U.S. Public Health Service (USPHS) to certain hospitals and states with urgent maternal health care needs (§ 301), and collect extensive data on hospital obstetric units (§ 402).

Reproductive Health

The **Access to Birth Control Act (S. 4223)** introduced by **Sen. Cory Booker (D-NJ)**, would require pharmacies provide contraceptives and contraceptive-related drugs and devices to a requesting customer "without delay" so long as the item is in stock, and if the item is not in stock, refer the customer to a pharmacy that has the item in stock, or transfer their prescription to the subsequent pharmacy. Pharmacies are prohibited from "operat[ing] an environment in which customers are intimidated, threatened, or harassed in the delivery of services relating to a request for contraception," having their employees misrepresent or deceive customers about the availability of contraceptives, or breaching confidentiality with regards to requests for contraceptives; pharmacies in violation face a potential civil penalty of \$1,000 per day.

The **Access to Infertility Treatment and Care Act (S. 2386/H.R. 4731)**, introduced by **Sen. Cory Booker (D-NJ)** and **Rep. Rosa DeLauro (D-CT)**, would require insurers that cover obstetrical services to cover infertility treatments, including assisted reproductive technology procedures, and standard fertility preservation services; provides definitions of key terms detailed in statute; and prohibits insurers from providing incentives to beneficiaries to *not* utilize infertility treatments or fertility preservation services.

The **Veteran Families Health Services Act (S. 2801/H.R. 5492)**, re-introduced by **Sen. Patty Murray (D-WA)** and **Rep. Rick Larsen (D-WA)**, would require the Secretary of Defense to furnish fertility treatment and counseling, including assisted reproductive technology, to members of the Armed Forces and their spouse or partner, "without regard to [their] sex, gender identity, sexual orientation, or marital status." The bill details guidelines regarding in vitro fertilization, including using donated "genetic material," spells out the eligible fertility treatments, and rules regarding and procedures for fertility preservation, such as cryopreservation, if necessary.

The **Women's Protection in Telehealth Act (H.R. 8284)** introduced by **Rep. Greg Steube (R-FL)**, would prohibit physicians from participating in Medicare if they prescribe, administer, dispense, or furnish an abortion-inducing drug - defined within the legislation - **unless** they physically examine the patient, are physically present when the patient takes the drug, and schedule an in-person follow-up

visit within 14 days.

The [Conscience Protection Act \(S. 4524\)](#), introduced by **Sen. James Lankford (R-OK)**, would prohibit discrimination by any person or entity that receives Federal financial assistance against health care entities - broadly defined as individual health care professionals, health care facilities, insurers, provider-sponsored organizations, and health education institutions, among others - that do not participate in abortion. The bill also designates HHS' Office for Civil Rights to receive complaints alleging violations of the *Religious Freedom Restoration Act of 1993*, investigate, issue findings, and require corrective actions if the complaint is validated; and provide a right of action for individuals that have been harmed, including injunctive relief and compensatory damages. On June 20, a unanimous consent request for the bill was blocked on the Senate floor.

The [Reproductive Freedom for Women Act \(S. 4554\)](#), introduced by **Sen. Patty Murray (D-WA)**, would express Congress' support for protecting access to reproductive health care in the aftermath of the *Dobbs v. Jackson* decision and express support for restoring the protections enshrined in *Roe v. Wade*, and ensuring "reproductive freedom for all."

Mental Health

The [United States Senate Commission on Mental Health Act of 2024 \(S.4312\)](#) introduced by **Sens. John Fetterman (D-PA) and Tina Smith (D-MN)**, would establish a Senate Commission on Mental Health to "provide Congress and the President independent, expert policy recommendations to improve mental health care services, including improving equitable access and affordability," composed of three Democrats, three Republicans, and two experts in mental health care. The Commission would study the mental health care services provided by, payment parity, and reimbursement requirements for Medicare, Medicaid, and CHIP; as well as workforce challenges for mental health care providers, including the challenges and barriers that prevent individuals from entering the field or problems they face while pursuing their degrees, and the factors that contribute to burnout, among other topics.

Federal Contact

The FSMB's federal legislative staff will continue to track and monitor legislation and regulations of interest to state medical boards. If there is specific legislation you would like us to assist with, please contact **Kandis McClure**, Director, Federal Advocacy and Policy, atkmccclure@fsmb.org, or by phone at (202) 463-4003.



Regulatory News

The **Connecticut Department of Consumer Protection** [approved two new qualifying conditions](#) for medical marijuana, Autism Spectrum Disorder and Female Orgasmic Difficulty/Disorder, after they were approved unanimously by the Medical Marijuana Program Board of Physicians.

The **Arizona Dept. of Health Services** issued [new rules](#), effective June 13, implementing the state's [statutorily required](#) telehealth provider registration for out-of-state providers, providing regulations regarding initial application, renewal, practice standards, informed consent, and liability insurance, among other aspects.

The **South Carolina Department of Labor, Licensing and Regulation** [finalized rules](#) (p. 148) amending the fee schedule for the **Board of Medical Examiners**, effective May 24, 2024. These changes are now reflected on South Carolina's BME [website](#).

The **Washington Medical Commission** [proposed a rule](#) that would allow the use of nitrous oxide in office based surgical settings, defining the inhaled anesthetic as "minimally sedating" and therefore allowable.

On June 17, *Arizona Central* [reported](#) that the State's 1864 abortion ban, which had been expected to go into effect this summer, is **not likely** to go into effect, according to **Arizona AG Kris Mayes**. Earlier this summer, the Arizona legislature enacted [HB 2677](#) to repeal the previous ban, which the state's Supreme Court had deemed valid.

Judicial News

On June 5, a judge in **North Dakota's** South Central District **ruled** that the state's **law** banning gender-affirming care for children will continue to be enforced pending a court challenge, but any minors whose treatments began before the law took effect in April 2023 can keep receiving care. The law makes it a misdemeanor for a health care provider to prescribe or give hormone treatments or puberty blockers to a minor, and a felony to perform gender-affirming surgery.

On June 11, a judge in **Florida's** Federal District Court in Tallahassee **ruled** that Florida's **SB 254** and similar Boards of Medicine **rules** that prohibited minors from accessing gender-affirming care treatments, and added mandatory steps before adult transgender individuals could access care, were unconstitutional. The ruling allows for puberty blockers and hormone therapy when medically appropriate, leaves the state's prohibition on gender transition surgery for minors in place, and blocks certain rules as they pertain to adults seeking such care. **Florida Governor Ron DeSantis** said the state will appeal the decision.

On June 13, the **Louisiana Court of Appeals** upheld, in *Welch v. United Med. Healthwest* the state's Covid-era emergency care law that shields medical providers from liability for negligence alleged to have occurred during the pandemic. The immunity provision was rationally related to the state's legitimate interest in protecting Louisianans' access to health care during a public health emergency, the appeals court said in affirming the judgment.

On June 14, the **Texas Supreme Court** declined to take up an in vitro fertilization case, *Antoun v. Antoun*, that argued that embryos should be treated as children under the state's near total abortion ban. The Court's denial means non-implanted embryos in Texas can continue to be destroyed without legal consequences.

Legislation Signed into Law

International Medical Graduates

Louisiana HB 972 – Enacted June 11 and effective August 1, allows the State Board of Medical Examiners to issue licenses to IMGs that:

- Hold a medical doctorate or an equivalent degree from an international medical program that is "substantially similar" to the education or training required to practice in the state;
- Have a license in good standing with the medical licensing or regulatory body in their home country;
- Have completed a residency or similar PGT in their licensing country, or have at least five years' experience as a practicing physician;
- Have citizenship in the United States or Canada, or legal work status in the U.S., as well as English proficiency; and
- Have an offer of employment at a facility owned or operated by state-licensed hospitals.

Licensees can only practice at these licensed facilities for the first two years of their licensure but "after such time the licensee is no longer subject to this limitation," and the Board can revoke the license with "clear and convincing evidence" that services rendered violated medical safety, competency, or conduct standards established by the Board. The Board **shall** promulgate any necessary rules and regulations to enforce the legislation.

Public Health

Oklahoma SB 426 – Enacted June 5, holds that any "requirements or mandates issued by the World Health Organization, the United Nations, or the World Economic Forum... shall have no force or effect," although the law does not prevent the state from following recommendations, if they are deemed acceptable.

Telemedicine

Michigan HB 4580 – Enacted June 6, prohibits Medicaid or Healthy Michigan (the state's Medicaid program) from *requiring* a recipient to use telemedicine service in lieu of an in-person consultation or contact.

Legislation Vetoed

Miscellaneous

North Carolina HB 237 – **Vetoed** on June 21, the amended bill would have created an exception to the state's Civil Rights-era mask ban for a "person wearing a medical or surgical grade mask for the purpose of preventing the spread of contagious disease." An earlier version of the bill had removed the exception, instituted in 2020 for the pandemic, for "ensuring the physical health or safety of the wearer or others." The bill requires individuals to remove their masks upon the request of a law enforcement officer and makes wearing a mask "to conceal or attempt to conceal" their identity during the commission of a crime an aggravating factor that leads to sentence enhancement, among other aspects.

Pain Management/Prescribing Practices

[Arizona SB 1570 – Vetoed](#) June 18, bill would have authorized the Dept. of Human Services to license psilocybin-assisted therapy centers in the state, where trained facilitators could administer the psychedelic to qualified patients. The bill also provided definitions, outlines licensure requirements and restrictions, and creates the Psilocybin Advisory Board and the Psilocybin Control and Regulation Fund.

Pending Legislation of Interest

Board Structure and Function

[Pennsylvania HB 2381](#) - Grants temporary rulemaking authority (that can last up to three years) to a licensing board or commission that is subject to an interstate licensure compact.

Continuing Medical Education

[California SB 639](#) - Adds “special care needs of patients with dementia” course requirements to the CME curriculum of healthcare professionals who have a patient population of which over 25% are 65 years of age or older.

Gender-affirming Care

[Pennsylvania HB 2421](#) - Enacts a version of the Family Research Council's [Save Adolescents from Experimentation \(SAFE\) Act](#), which prohibits gender transition treatment for minors, including both surgical and nonsurgical interventions such as prescribing puberty blockers and sex hormones, and bars public funds from going towards paying for, or private insurers covering such services. The bill classifies a referral for, or the provision of, GAC to a child as a "a violation of the health care practitioner's scope of practice" and grounds for sanction under relevant State law.

Medical Marijuana

[New Hampshire HB 1349](#) - Adds generalized anxiety disorder to the list of qualifying medical conditions for recommending medical marijuana.

[New Hampshire HB 1278](#) - Adds “any debilitating or terminal medical condition or symptom for which the potential benefits... in the provider’s clinical opinion, likely outweigh the potential health risks” to the list of qualifying conditions for recommending medical marijuana and requires certifying providers to attest to their clinical opinion in their written certification.

Mental Health

[Michigan SB 915](#) - Requires psychiatrists to refer to a community mental health service program if they deem an individual should receive assisted outpatient treatment. The bill also adds physicians, PAs, and psychiatric NPs under supervision to psychiatrists as authorized professionals that can testify to an individual requiring treatment. Lastly, limits an individual's *second* order of hospitalization for mental health to a maximum of 90 days, or an assisted outpatient treatment to a maximum of one year.

National Practitioner Data Bank

[North Carolina HB 287](#) - Requires individuals applying for licensure as a marriage and family therapist by reciprocity to submit a National Practitioner Data Bank report, among other things.

Occupational Licensing Reform

[North Carolina SB 640](#) - Amends state occupational licensing in line with [North Carolina State Board of Dental Examiners v. FTC](#), specifically requiring Board members to receive training on state and federal laws regarding antitrust law and State action immunity, and adds rules about rulemaking, including:

- Boards “shall adopt rules for the receipt and resolution of complaints, for taking disciplinary or enforcement actions against its licensees, and for taking enforcement actions against persons not licensed by the board;”
- Requiring that “any interpretation, clarification, or other delineation of the scope of practice of an occupational licensing board shall be adopted as a rule;”
- Boards “shall have the authority to investigate unlicensed activity and notify unlicensed persons and entities of the possible violation of the law and administrative rules and any civil action or criminal penalty that may be imposed by a court...;” and
- Rules around notifying an unlicensed individual about their potential violation of law or regulation.

Lastly, the bill requires the venue for Boards seeking a court order to be the superior court of the county where the defendant resides or in the county where the occupational licensing board has its principal place of business, and recommends that boards with jurisdictional disputes resolve them through informal procedures, among other aspects.

Pain Management/Prescribing Practices

[California SB 803](#) - Allows San Francisco, Santa Cruz, and San Diego counties to establish pilot programs where veterans and first responders can receive psilocybin treatment with a licensed facilitator, defined as a physician, clinical psychologist, licensed clinical social worker, NP, PA,

licensed professional clinical counselor, or a naturopathic doctor.

Delaware SB 331 - Requires out-of-state practitioners that prescribe controlled substances to patients in Delaware pursuant to a practice privilege, interstate compact license, telehealth registration, or military registration, to obtain a Delaware controlled substance registration.

North Carolina HB 98 – Right-to-Try style bill that allows eligible patients, defined as someone that has considered all other treatment options and has received a recommendation from a treating physician to try the intervention, to use investigational drugs, biological products, or devices for a life-threatening or severely debilitating illness, so long as they have given their informed consent, the nature of which is detailed in the bill. Further, the bill prohibits sanctions against health care providers for relevant recommendations, and prohibits State officials to block or attempt to block an eligible patient's access to investigational care.

Reproductive Health

New Jersey A 4557 and S 382 - Prohibits abortions after 20 weeks of gestation, with exceptions to save the pregnant woman's life, rape, and incest. Physicians in abrogation of the legislation are subject to a third degree felony and could face a fine of up to \$15,000 and imprisonment for three to five years, although women who have the procedure are immune from civil or criminal liability.

New Jersey S 3452 and A 4601 - Requires health insurers to provide coverage for the termination of pregnancies, **unless** the coverage conflicts with the religious employer's bona fide religious beliefs and practices. The bill also prohibits medical malpractice insurers from taking any adverse action against an insured practitioner for providing or facilitating reproductive or gender-affirming health care services.

Women's Health

Delaware HB 426 - Requires that pregnant women in Dept. of Corrections custody are able to meet with a doula or midwife - which are **regulated by** the Board of Medical Licensure and Discipline - to create a birth plan regarding the birth of their child.

Legislation Affecting Board Authority

The FSMB continues to closely monitor legislative areas that could have significant implications on the practice and regulation of medicine: off-label treatment, reproductive health, and gender-affirming care. In addition to legislation highlighted in FSMB Advocacy Network News, all tracked off-label treatment legislation can be found [here](#), all tracked reproductive health legislation can be found [here](#), and all tracked gender-affirming care legislation can be found [here](#).

State Contact

The FSMB's state legislative staff will continue to track and monitor legislation and regulations of interest to state medical boards. If there is specific legislation you would like us to assist with, please contact **John Bremer**, Director, State Legislation and Policy, atjbremmer@fsmb.org, or by phone at (202) 463-4021.



Resources for Regulators

- [Directory of Physician Assessment and Remedial Education Programs](#)
- [FSMB Opioids and Pain Management webpage](#)



Meetings & Events

April 24-26, 2025: FSMB 113th Annual Meeting, Seattle, Washington

September 3-7, 2025: [16th International Conference on Medical Regulation](#), Dublin, Ireland

[More Meetings & Events](#)

Subscribe to Our Newsletters

To help medical boards keep up with current legislation around the country, FSMB tracks relevant

legislation and regulations in state houses across the United States, as well as the U.S. Congress.

Subscribe



Texas Office: 400 Fuller Wiser Road, Euless, TX 76039
Telephone: (817) 868-4000

Washington, D.C. Office: 1775 Eye St. NW Suite 410, Washington, D.C. 20006
Telephone: (202) 463-4000



Federation of State Medical Boards | 400 Fuller Wiser Road | Euless, TX 76039 US

[Unsubscribe](#) | [Update Profile](#) | [Constant Contact Data Notice](#)



Try email marketing for free today!