



# Advocacy News

Keeping you informed from Washington, D.C.

October 16, 2024

## Interstate Medical Licensure Compact Releases Annual Report

The IMLC is increasing license portability for physicians in participating states, in 2023, 39 percent of initial licenses were issued via [the IMLCC pathway](#), up from 31 percent in 2022 and 19 percent in 2021. This has had the positive effect of increasing the healthcare workforce in more rural states as **Montana, Nebraska, Vermont, Mississippi, Wyoming, and Idaho** are among the handful of states where over 50 percent of initial licenses were granted through the IMLCC, meaning care is becoming more accessible.

Active in 40 states, Guam, and the District of Columbia, the IMLC has granted nearly 118,000 licenses since its activation in 2017, with a streamlined process that nearly 85% of physicians [say](#) is beneficial. To see the Annual Report, click [here](#).

If your state is considering enacting the IMLC, we can be of assistance [Reach out to us here!](#)



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## Pending Legislation of Interest

### Healthcare Workforce

The [Health Care Workforce Investment Act \(H.R. 9812\)](#), introduced by **Rep. James Comer (R-KY)**, would aim to address the shortage of healthcare workers, such as direct support professionals, nurses, mental health professionals, nurse aides, and emergency medical services personnel. The bill proposes to create a grant program for states that develop a "State Health Care Workforce Improvement Plan," overseen by a Health Care Workforce Council. This council would foster public-private partnerships with healthcare providers, facilities, businesses, and associations. These partnerships are designed to raise awareness of healthcare careers, improve pathways from high school and technical programs into healthcare professions, and reduce barriers to entering these fields. Additionally, the council will evaluate the partnerships, offer incentives to successful programs, and provide scholarships to help reduce financial obstacles for students pursuing healthcare careers.

The [Medical License Verification Act \(H.R. 9802\)](#), introduced by **Rep. Aaron Bean (R-FL)**, would amend the Social Security Act to require the HHS Secretary to establish and implement an automated system that verifies whether a health care provider is licensed in good standing before

issuing a unique health identifier which is used for billing insurance, a step that is not currently required and could help to fight fraudulent billing. The Senate companion bill, [S. 2684](#), was introduced in July 2023.

### Veterans' Affairs

The [Expanding Knowledge on Military Reproductive Health Care Act \(H.R. 9741\)](#), introduced by **Rep. Mikie Sherrill (D-NJ)**, would ensure TRICARE beneficiaries are provided with information on “reproductive health care, including abortion care, that they are entitled to receive; circumstances under which they can receive such care at a military treatment facility; how to request leave and travel benefits for travel to another State to receive non-covered reproductive health care; and how to find a non-Department provider of reproductive health care.” This information must be shared annually and not later than 14 days after a permanent or temporary change of station. The bill also requires health care providers at military treatment facilities to receive training on their obligation to “provide covered reproductive health care and counseling, including abortion, contraceptive, and fertility care... notwithstanding the laws and regulations of the State” in which they are located, and also the rights and the protections afforded to such providers, regardless of their physical location.

The [Copay Fairness for Veterans Act \(H.R. 9773\)](#), introduced by **Rep. Lauren Underwood (D-IL)**, would eliminate copayments for veterans receiving preventive health services through the Department of Veterans Affairs, covering medications, hospital care, and medical services. This would align veterans' healthcare benefits with the zero out-of-pocket costs that civilians and retirees already receive under private insurance and Medicare.

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## Regulatory News

On September 30, **HHS declared** a Public Health Emergency (PHE) for **South Carolina** and **Tennessee** to address the health impacts of Hurricane Helene, following the PHE declarations for **Florida**, **Georgia**, and **North Carolina**. Since the declaration, the **Administration for Strategic Preparedness and Response (ASPR)** has deployed approximately 200 personnel that will work with state and local officials to assess the storm's impacts to hospitals, nursing homes, dialysis centers, and other health care facilities. On October 8, **HHS declared** a PHE for **Florida** to address the health impacts of Hurricane Milton.

On October 5, **ASPR activated** the [Emergency Prescription Assistance Program \(EPAP\)](#) for **Tennessee** and **North Carolina** to aid uninsured residents in these states replacing prescription medicines or certain medical equipment lost or damaged due to the impacts of Hurricane Helene. Through EPAP, uninsured residents can request a free 30-day supply of certain prescription medications at any EPAP-participating pharmacy which can be renewed every 30 days while the program is active.

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## Judicial News

On October 2, a judge in the **U.S.D.C. for the Eastern District of Texas** paused, in [Texas v. Becerra](#), a lawsuit from Texas and Montana challenging federal protections for transgender health care that the **Biden Administration** says is protected by Section 1557 of the Affordable Care Act and prohibitions against discrimination on the basis of sexual orientation and gender identity.

On October 7, the **Supreme Court** declined to intervene with a **US Circuit Court of Appeals** decision, in [Becerra v. Texas](#), that ruled **Texas**, which has a broad abortion ban, was not bound by HHS' [guidance](#) requiring hospitals to offer the procedure on an emergency basis to protect a mother's health in line with the **Biden Administration's** interpretation of the Federal EMTALA, which requires hospitals receiving federal funds to provide stabilizing care to patients.

On October 7, the **Supreme Court** declined to review an **Alabama Supreme Court** decision, in [LePage v. Center for Reproductive Medicine PC](#), that allows patients to sue in vitro fertilization (IVF) providers for wrongful destruction of embryos, based on the legal concept of “personhood.” Several states, including **Louisiana**, **Missouri**, and **Utah**, recognize “personhood” in their laws, which could make IVF providers liable for “wrongful death” or “fetal homicide” when embryos are destroyed.

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### 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 [Lisa Robin](#), Chief Advocacy Officer, at [lrobin@fsmb.org](mailto:lrobin@fsmb.org), or by phone at (202) 463-4006.



# State Legislative News

## Executive Orders

On October 7, **Florida Governor Ron DeSantis** issued [Executive Order 24-215](#) in anticipation of Hurricane Milton, allowing Floridians to receive early prescription refills - excluding Schedule II controlled substances - during a declared state of emergency in their county.

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## Regulatory News

The **Oklahoma State Board of Medical Licensure and Supervision** issued [proposed rules](#) that streamline and modernize rules regarding the licensure of foreign medical graduates, specifically, removing the use of Board-provided translators, the requirement for IMGs to score 10 percentage points higher on medical exams, submitting recordings of the applicant speaking in English, and the 10-year limitation on passing all stages of the USMLE. The rules also grant the authority to revoke or discipline a licensee for unprofessional conduct for “engaging in conduct with a patient which is sexual in nature or any verbal behavior which is seductive or sexually demeaning,” as well as the authority to revoke or discipline a licensee for “failing to supervise, delegate or oversee appropriately as required by the Boards laws and rules.”

**Idaho's Division of Occupational and Professional Licenses**, in a [proposed rule](#) pursuant to [HB 542](#) (2024) and [HB 153](#) (2023), set a \$300 fee for the three-year, provisional license for international physicians and a \$300 fee for the single-year license for bridge year physicians (analogous to assistant physicians).

On October 7, the **New Mexico Medical Cannabis Advisory Board** [voted](#) 7-2 to add female orgasm difficulty (FOD) as a qualifying condition for medical marijuana. Next, the Board's recommendation will next go to the secretary of health, who will ultimately decide whether to accept, deny, or modify the recommendation.

The **Oregon Medical Board** promulgated a [final rule](#) regarding [postgraduate limited licenses](#), which are issued to resident physicians in the state. Specifically, the rule “increase[s] the maximum registration period... from one year to up to five years, not to exceed a postgraduate trainee’s enrollment in the postgraduate program.” Currently, postgraduate physicians are granted a 12- or 13-month limited license that must be reapplied for each additional year of training.

The **Ohio Medical Board** issued final rules ([doctors/PAs](#)) regarding office-based treatment for opioid addiction (OBOT), specifically requiring continuing medical education hours; establishing rules for OBOT treatment plans, which include “assessment, induction, stabilization, maintenance, and tapering;” requiring a co-prescription of an overdose reversal drug; and the consideration of psychosocial treatments such as cognitive behavioral treatment, among other aspects.

On October 24, the **California Medical Board** will hold a virtual meeting for public comment on [draft legislation](#) to replace the current physician health and wellness program (PHWP) with a new bill that would provide definitions, program requirements for the PHWP, requirements for the third party entity that would administer the program, confidentiality and mandatory reporting, funding and costs, and the process by which licensees would be recommended for program evaluation, treatment, and monitoring, among other aspects. Details to view the meeting can be found [here](#).

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## Judicial News

On October 7, the **Georgia Supreme Court** reinstated, in [State of Georgia v. Sistersong Women of Color Reproductive Justice Collective](#), the state's “heartbeat ban,” which prohibits abortions after about six weeks of pregnancy. The state supreme court's order halted a **Fulton County Superior Court Judge's** Sept. 30 order striking the law - [HB 481](#) (2019) - which came into effect after the U.S. Supreme Court overturned *Roe v. Wade* in 2022, pending the state's appeal.

On October 9, the **Montana Supreme Court**, in [Planned Parenthood v. Montana](#), upheld a temporary block on state laws restricting Medicaid-funded abortions, banning dilation and evacuation abortions, and requiring ultrasounds before medication abortions, deeming the laws burdensome and

effectively barring telemedicine-based care.

On October 10, the **Florida Supreme Court** rejected a challenge to **Gov. Ron DeSantis'** use of taxpayer funds for anti-abortion messaging, ruling in [Richardson v. Florida Agency for Health Care Administration](#) that taxpayers cannot demand state courts bring criminal charges against officials as voters prepare to decide on a ballot measure to enshrine abortion rights.

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## Legislation Signed into Law

### Reproductive Care

**Delaware HB 110** – Enacted September 9, requires all health benefit plans delivered or issued for Medicaid, private health insurance plans, and state employee insurance plans to cover abortion in Delaware. Only **four** other states (CA, NY, OR, and WA) require all private health plans to cover abortion while **17 other states** require Medicaid to do so.

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## Pending Legislation of Interest

### Board Structure and Function

**New Jersey S 3729** - Creates a licensure class for orthopedic assistants (OAs), regulated by the Physician Assistant Advisory Committee (PAAC) and State Board of Medical Examiners, for individuals that meet the criteria meted out by the National Board for Certification of Orthopaedic Physician Assistants, including passing examinations. OAs are supervised by osteopathic physicians and must practice according to a protocol agreement submitted to the PAAC.

**Ohio HB 672** – Creates a licensure class for naturopaths under the purview of the Medical Board, which includes requirements for licensure, scope of practice, and CME requirements. The bill clarifies that naturopaths cannot use titles such as “doctor” or another title “in a way that represents [them] as engaged in the practice of medicine and surgery,” and establishes a naturopathic advisory council to aid the Board in regulating the practice, among other aspects.

**Puerto Rico PS 1945** - Creates “the Bill of Rights for medical and dental professionals,” which “protects medical and dental professionals, their practices, doctor-patient relationship, professional clinical judgment free from interference;” protects medical professionals from employers that “require working conditions and administrative tasks typical of a regular employee;” requires medical professionals working full-time for insurers to complete CME requirements; and prohibits any “licensing, certification, or recertification procedure [from] exceed[ing] 30 calendar days from the submission and certification” of materials, among other aspects.

**Virginia SB 351** - Shifts the regulation of APRNs and certified midwives from a joint Board of Medicine and the Board of Nursing collaboration to the Board of Nursing only.

### Continuing Medical Education

**New Jersey S 3763** - Requires physicians to complete one hour of CME on “communication with and treatment of persons who are deaf or hard of hearing” that is developed and administered by Division of Deaf and Hard of Hearing within the Dept. of Human Services; it also requires emergency departments to develop training protocols on the same topic.

**Virginia SB 740** - Directs the Board of Medicine to require unconscious bias and cultural competency training as part of the continuing education requirements for license renewal.

### Healthcare Professionals' Scope of Practice

**New Jersey A 4089 and S 3796** - Authorizes medication aides, who are certified by the Dept. of Health to administer medications as delegated by and under the authority of an RN, in State-licensed nursing homes.

### Medical Marijuana

**Pennsylvania HB 2500** - Requires practitioners to review the state's PDMP prior to “issuing a certification to determine the controlled substance history of a patient [and] recommending a change of amount or form of medical cannabis” and also allows the practitioner to consult the PDMP to determine what other treatments the patient may be taking and the patient's (documented) history with controlled substances.

### Mental Health

**Pennsylvania HB 2560 and SB 1305** - Defines “advanced practice professional” as a NP or PA with a mental health certification, or a NP or PA that “obtains a mental health certification within two years of being hired by an outpatient psychiatric clinic.” Allows psychiatrists and advanced practice professionals to render up to 50 percent of their care via telehealth, with the other half requiring physical presence in the outpatient psychiatric clinic, unless the clinic is granted a waiver by the Dept. of Human Services.



### Pain Management/Prescribing Practices

**New Jersey S 2283 and A 3852** - Establishes a legal, therapeutic psilocybin program in the state “to alleviate distress, provide preventative behavioral health care, and foster wellness and personal growth.” The program would allow practitioners, defined as a physician, APRN, PA, psychologist, clinical social worker, or professional counselor, to certify that the patient has a qualifying medical condition; require mandatory preparation and integration sessions before and after the administration of psilocybin; and create a regulatory framework for the licensing, manufacturing, and distribution of psilocybin under the Psilocybin Behavioral Health Access and Services Advisory Board under the aegis of the Dept. of Health. Rules are also established for psilocybin service centers licensing, their employees, and general recordkeeping requirements, among other aspects.

### Parental Rights

**New Jersey S 3740** - Requires that parents be notified before an unemancipated minor undergoes any medical or surgical procedure or treatment, unless set forth in a notarized writing that notice was given or in a medical emergency.

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## 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 COVID-19 adjacent 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](#).

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### 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, [atjbrem@fsm.org](mailto:atjbrem@fsm.org), or by phone at (202) 463-4021.



## Resources for Regulators

- [Resources for FSMB Members](#)
- [Pathway to Medical Licensure in the U.S.](#)



## Meetings & Events

**October 24-26, 2024:** FSMB Board of Directors Meeting, Dallas, Texas

**November 7-8, 2024:** [FSMB Board Attorneys Workshop](#), Reno, Nevada

**November 20-22, 2024:** [Administrators in Medicine Fall Workshop & CMBE Institute](#), Phoenix, Arizona

**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](#)

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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.

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