

LOUISIANA STATE BOARD OF MEDICAL EXAMINERS

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February 8, 2018

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Re: Final Report: Proposed Amendment of Rules
Governing Physician General, Licensure and
Certification — (LAC 46:XLV.125, 311, 404 and 417)

Dear Sirs:

Pursuant to La. Rev. Stat. §49:968(D), the Louisiana State Board of Medical Examiners respectfully submits the enclosed report on the final adoption of the captioned rules. Notice was previously published in the July 2017 edition of the *Register*, Vol. 43, No. 7, pp. 1447-1449 and proposed substantive changes were noticed in the Potpourri Section of the December 2017 *Register*, Vol. 43, No. 12, pp. 2659-2660. The Board plans to adopt the rules by and upon publication in the March 20, 2018, edition of the *Register*.

Very truly yours,

**LOUISIANA STATE BOARD OF
MEDICAL EXAMINERS**

By: _____

A handwritten signature in blue ink, appearing to read "Vincent A. Culotta, Jr.", written over a horizontal line.

Vincent A. Culotta, Jr., M.D.

Executive Director

Enclosure

**FINAL REPORT RELATIVE TO PROPOSED
AMENDMENT OF ADMINISTRATIVE RULES
GOVERNING PHYSICIANS; GENERAL, LICENSURE
AND CERTIFICATION**

(La. Rev. Stat. § 49:968(D))

By The
LOUISIANA STATE
BOARD OF MEDICAL EXAMINERS

Submitted To The
COMMITTEE ON HEALTH AND WELFARE,
LOUISIANA SENATE,

COMMITTEE ON HEALTH AND WELFARE,
LOUISIANA HOUSE OF REPRESENTATIVES,

PRESIDENT OF THE SENATE

And

SPEAKER OF THE HOUSE OF REPRESENTATIVES

February 9, 2018

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AMENDMENT OF ADMINISTRATIVE RULES
GOVERNING PHYSICIANS; GENERAL, LICENSURE
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(La. Rev. Stat. § 49:968(D))

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This Report is respectfully submitted by the Louisiana State Board of Medical Examiners (the “Board”), within the Department of Health and Hospitals, pursuant to La. Rev. Stat. §49:968(D).

By Notice of Intent published in the July 20, 2017, edition of the *Louisiana Register*, Vol. 43, No. 7, pp. 1447-1449, the Board proposed to amend its general, licensure and certification rules governing physicians. Concurrently with submission of the Notice of Intent, in accordance with La. Rev. Stat. §40:968, the Board submitted a Report to the Senate and House Committees on Health and Welfare, the President of the Senate and the Speaker of the House of Representatives.¹ Thereafter, the Board received several written comments and a request for a public hearing, which was noticed and held on August 28, 2017. A number of individuals attended the hearing and several of them provided oral comments.

As a result of its consideration of the written and oral comments at its October 2017 meeting, the Board elected to make substantive changes to the proposed amendments. Notice of the proposed changes, which was transmitted to all commenters, appeared in the Potpourri Section of the December 20, 2017 edition of the *Register*, Vol. 43, No. 12, pp. 2659-2660. In conformity with La. R.S. 49:968H(2), a public hearing was held on January 24, 2018 to receive comments on the proposed substantive changes.

Following publication of proposed substantive changes, the Board did not receive any written comments in advance of the Potpourri hearing and no one appeared at the hearing on January 24, 2018 to present further or additional oral comments.

This Report, submitted by the Board pursuant to and as prescribed by La. Rev. Stat. §49:968(D), sets forth a summary of the comments received by the Board on the subject administrative rule amendments, and a statement of the Board's response to each comment, including a concise statement of the principal reasons for and against adoption of any modifications or changes suggested. A copy of the Notice of Intent published in July 20, 2017 edition of the *Register*, as substantively amended by the Notice of proposed substantive changes that appeared in the Potpourri Section of the December 20, 2017 edition of the *Register*, along with an annotated draft of such changes, accompanies this Report as Appendix A, which the Board intends to adopt as final amendments and formally promulgate by and upon publication in the March 20, 2018 edition of the *Register*.

¹*Electronic Mail*, Keith C. Ferdinand, M.D., Interim Exec. Dir., La. State Bd. Med. Exam., RE: Report Relative to Proposed Rule Amendments Governing Physicians (July 7, 2017).

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I. Background—The Louisiana State Board of Medical Examiners proposes to amend its administrative rules governing physicians, General, LAC Title 46:XLV, Subpart 1 (General) Chapter 1 (Fees and Costs), Section 125B.1, (Licensure, Permits and Examination); Subpart 2, (Licensure and Certification), Chapter 3 (Physicians), Subchapter B (Graduates of American and Canadian Schools and Colleges), Section 311 (Qualifications for License), Subchapter H (Restricted Licensure, Permits), Section 404 (Continuing Postgraduate Training beyond Year One) and Subchapter I (License Issuance, Termination, Renewal, Reinstatement and Exceptions), Section 417 (Renewal of license; Prerequisite Conditions) to add 417C, respecting initial renewal of a license. In accordance with the specific requirements of La. Rev. Stat. §49:968(D), the Board submits the following information regarding the proposed amendments, which appear at LAC 46:XLV: Subpart 1, §125, Subpart 2, §§311, 404 and 417.

As noted in its initial Legislative Report, the circumstances necessitating the proposed amendments follow an extensive review of its disciplinary statistics over a twenty year period (1990-2010) which revealed a correlation between Board disciplinary action with the number of years of postgraduate year (“PGY”) training and board certification. The Board’s study was published in the *Journal of Medical Regulation* (Vol. 102, No. 4, 2016), a publication sponsored by the Federation of State Boards of Medical Examiners of the United States, Inc. The study indicates that physicians who do not complete a minimum of three years PGY training are twice as likely to be the subject of disciplinary action, and that these physicians are more likely to be sanctioned for competency/standards-related issues. By elevating the competence level of physicians prior to commencing independent practice, the Board anticipates that there will be a benefit to the patients in Louisiana due to increased quality of care delivered by licensed physicians and a reduction in costs to the citizens of this state associated with quality of care deficiencies.²

II. Summary of Proposed Rules—Under the Board’s current rules, graduates of medical schools in the United States and Canada (U.S. Graduates) are permitted to apply for a medical license after completing one year of postgraduate training (PGY-1/internship). International medical graduates (IMGs) *e.g.*, graduates from medical schools in countries other than the U.S. or Canada, are required to complete at least three years of postgraduate training. This distinction is primarily due to the lack of uniformity in the standards and accreditation of medical schools internationally. The cost for initial issuance of a permit for U.S. or Canadian medical school graduates to continue

²See Legislative Report, footnote 1, Item No. 4.

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postgraduate beyond PGY-1 is \$100/\$100 for issuance/renewal, while the cost for initial issuance/renewal of an IMG permit is \$200/\$100.

As originally proposed in the July 20, 2017 edition of the *Register* the Board planned, commencing on January 1, 2019 (§311A.6.a), to amend its rules to increase the PGY training requirement necessary for medical licensure for American and Canadian medical school graduates from one year (PGY-1/internship) to three years (PGY-3) of training (§311A.6.b.), on par with the requirements for IMGs. It also proposed to: increase the cost of a continuing postgraduate training permit (PGY-2) from \$100 to \$200 for initial issuance on par with the permit costs for IMGs (§125B.1) and clarify the nature of the training permit for U.S. and Canadian Graduates *e.g.*, a continuing postgraduate training permit (§§125, 404).

In consideration of the comments received, during its meeting on October 16, 2017 the Board elected to make substantive changes to the proposed amendments noticed in the July 20, 2017 *Register*. The proposed changes, which were noticed in the *Potpourri* Section of the December 20, 2017 edition of the *Register*, appear in Section 311A.6.b: (i) after the words *at least* to delete the words *three years* and add the words “two years, or alternatively have completed one year and have a current commitment in a form and manner specified by the board for a second year,”; (ii) after the words *approved by the board*. to add the words “For physicians pursuing training in oral and maxillofacial surgery, one year of such training may be in a program accredited by the Commission on Dental Accreditation of the American Dental Association.”; (iii) after the words *not fewer than* to delete the word *two* and add the word “one”; (iv) to delete and replace the word *three* with the word “two” wherever it appears in 311A.6.b.; (v) after the words *postgraduate year* to delete the word *four* and the acronym *PGY-4* and replace them with the word “three” and the acronym “PGY-3”; and (vi) after the word *training*; to add the words “and applicants are only permitted to engage in extracurricular medical practice outside of the program with the written permission and assurance of the program director that the applicant is in good standing, has good credentials, and is recommend for such extracurricular practice engagement.”; (vii) 404A: after the words *accredited by* to delete the words “(and not on probationary status with)”; (viii) in the title to Section 417 after the words *Renewal of License*; to add the words “Prerequisite Condition”; and (ix) 417: to add as a new Subsection 417C, to read as follows: “C. Initial application for renewal of a license, issued on the basis of a commitment for year two of postgraduate clinical training under 311A.6.b shall, as a prerequisite to renewal consideration, be accompanied by documentation satisfactory to the board of the completion of year two of such training.”

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III. Summary of the Comments and Board Response—The Board received a total of eight (8) written comments opposing the proposed changes as originally noticed or suggesting substantive amendments.³ A number of individuals attended the public hearing on August 28, 2017 and four (4) individuals (three (3) who had provided written comments) provided oral comments.⁴

Written Comments in Response to Notice of Intent (July 2017 Register) and Oral Comments Submitted at the Public Hearing (August 28, 2017)

Comment 1. (311A.6.b). While the majority of the commenters appreciated the Board's effort to better provide for the welfare of Louisiana citizens, all but two (2) commenters⁵ were either opposed to the amendments as originally noticed to 311A.6.b. or believed there may be unintended consequences of increasing PGY training from one (1) to three (3) years for U.S. and Canadian medical graduates. The primary reasons suggested by all of the commenters focused on the proposed amendments' impact on the ability of residents to work outside of their training programs (*e.g.*, moonlight) in the absence of a full medical license during PGY-2 and PGY-3 training. The commenters claimed that the proposed amendments would: reduce the ability of training programs to attract and maintain residents, impair the ability of hospitals to properly staff their emergency and other departments, particularly in underserved and rural areas, reduce access and increase cost of care, and prevent residents from gaining experience and exposure to various facilities and pay down their student-loans. One commenter additionally suggested that physicians should remain eligible for licensure and practice after the completion of PGY-1 without additional training,⁶ and several expressed concern that the proposed amendments would result in the provision of more care by allied healthcare providers with less training than a physician with PGY-1 training. Several of the commenters proposed or suggested seeking alternative changes.

³Written comments were received from: Randy Pilgram, M.D., CMO, Schumacher Clinical Partners (Aug. 16, 2017); J. Michael Cuba, M.D., Pres., La. Cpt. Of Amer. College of ER Physicians (Aug. 16, 2017); Paul A. Salles, CEO, La. Hosp. Assoc., (Aug. 18, 2017); Paul E. Luther, M.D./Teri B. O'Neal, M.D., Family Med. Residency, LSUHSC-S Monroe (Aug. 18, 2017); Christopher J. Saal, DDS, M.D. (Aug. 19, 2017); Larry Holier, M.D., Chancellor, LSUHCS-NO (Aug. 21, 2017); G.E. Ghali, DDS, M.D., Chancellor & Dean, LSUHCS-S (Aug. 21 and Aug. 22, 2017).

⁴Oral comments were provided at the public hearing by Euil Luther, M.D., Julius Kaplan, M.D., G.E. Ghali, DDS, M.D. and Christopher J. Saal, DDS, M.D.

⁵Paul E. Luther, M.D./Teri B. O'Neal, M.D.

⁶Larry Holier, M.D.

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As a compromise, one (1) commenter suggested considering eligibility for full licensure after completion of PGY-2 training,⁷ one (1) suggested exploring alternative solutions,⁸ five (5) suggested leaving the current requirement (completion of PGY-1 training) in place,⁹ with one (1) of these suggesting that in order to moonlight the resident should be required to have a letter from his/her program director stating that the resident is in good standing, has good reviews, and is or is not recommended for moonlighting.¹⁰

Response. Initially, the Board firmly believes that its study accurately demonstrates that physicians who do not complete a minimum of three years of PGY training are twice as likely to be the subject of disciplinary action, and that these physicians are more likely to be sanctioned for competency/standards-related issues. It further believes that by elevating the competence level of physicians prior to commencing independent practice, there will be a benefit to the patients in Louisiana due to increased quality of care delivered by licensed physicians. Therefore, the Board is disinclined to accept the comments suggesting that the Board maintain the current requirements without more.

That said, the Board appreciates the concerns voiced by the commenters and is persuaded that a step-wise, measured approach to increased training for U.S. and Canadian medical graduates which, to some extent, incorporates all of the commenters' suggested changes, would be an acceptable solution at this time. We believe, that is, that the concerns expressed by the commenters have been addressed by the proposed substantive amendments to 311A.6.b. set forth in the Potpourri Section of the December 2017 edition of the *Register*. Our view is supported by the fact that following notice of the proposed substantive changes, the Board did not receive any further written comments and no one appeared at the public hearing convened on January 24, 2018 to present oral comments.

Pursuant to the proposed substantive changes eligibility for medical licensure would be two years of PGY training, rather than three years as originally noticed, for those who have already completed training. However, for those in training, the changes would leave in place the current licensure requirement for completion of PGY-1, provided the individual has a commitment from his/her program for PGY-2 training. Thereafter, documentation of the completion of PGY-2 would be required for initial license renewal

⁷Randy Pilgram, M.D.

⁸Paul A. Salles.

⁹Julius Kaplan, M.D., G.E. Ghali, DDS, M.D., Christopher J. Saal, DDS, M.D., Larry Holier, M.D., J. Michael Cuba, M.D.

¹⁰G.E. Ghali, DDS, M.D.

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(417C). As proposed, individuals who are licensed following PGY-1 training could, if they desire, engage in extracurricular practice outside of their program with the written permission of their program director. Because the number of physicians who do not complete PGY-2 training is believed to be negligible, the Board is of the view that the proposed changes advances the goal and benefits of more training with minimal impact on current practices.

Comment 2. (311A.6.b). For the same reasons expressed by the other commenters with respect to the proposed amendments originally noticed, (1) commenter suggested that in lieu of increased PGY training, the Board require training programs to report those who leave training early, to better identify at-risk physicians.¹¹

Response. Residency training programs are currently required to report whether an individual who was issued a training permit by the Board, has performed successfully and competently in post-PGY-1 training years and whether his/her appointment will be renewed (404F.2.a.-b.). While such reports may impact the Board's decision to renew the permit, once PGY-1 training has been completed an individual is eligible for licensure. For the reasons set forth in response to Comment 1, we believe that the measured approach to increased training discussed in response to Comment 1 above adequately addresses this comment. Therefore, the Board is not inclined to accept the suggestion.

Comment 3. (311A.6.b.) Two (2) of the same commenters¹² also expressed concern that the proposed amendments originally noticed would adversely impact training programs for those pursuing a dual DDS/MD degree for oral and maxillofacial surgery. Such training consist of one year of training accredited by the ACGME (American Council on Graduate Medical Education), with the remaining years of training accredited by the Commission on Dental Accreditation of the American Dental Association ("CODA"), which is recognized by the U.S. Department of Labor. They note that existing rules, and changes originally proposed, only recognize postgraduate training accredited by the ACGME and requested an amendment to the rules to accommodate the training program requirements.

Response. Given that physicians seeking a DDS/MD degree must necessarily participate in training programs accredited by CODA, considering its status and the information provided by commenters relative to its national recognition as an accrediting entity, the Board determined it appropriate to accommodate the commenters' concerns by recognizing CODA accredited programs for one year of

¹¹Larry Holier, M.D.

¹²Christopher J. Saal, DDS, M.D., G.E. Ghali, DDS, M.D.

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such training *e.g.*, PGY-1 or commitment for PGY-2 training. We believe this concern has been addressed by the proposed substantive amendments to 311A.6.b. set forth in the Potpourri Section of the December 2017 edition of the *Register*. Under such changes, training in programs accredited by CODA will be accepted by the Board for those pursuing training in oral and maxillofacial surgery (DDS/MD).

Comment 4. (311A.6.b.) Existing rules provide that postgraduate training must take place in an institution offering not fewer than two residency or equivalent programs accredited by the ACGME, AOA (American Osteopathic Association) or RCPS (Royal College of Physicians and Surgeons). Two commenters¹³ suggested that the current requirement for not fewer than “two” residency or equivalent programs be removed to accommodate training in institutions that may offer a single, independently functioning accredited residency training program, particularly those geared to primary care physicians in this state.

Response. In its recent institutional history, the Board does not recall application of this requirement as a basis to deny recognition of postgraduate training. Therefore, for consistency with current practices, the Board elected to accept the commenters’ suggestion. Among the substantive amendments previously published in the December 2017 edition of the *Register* to 311A.6.b., reference to the word “two” has been replaced with “one.”

Comment 5. (404A) Current rules provide that a continuing postgraduate training permit may be issued for accredited postgraduate training beyond PGY-1, provided the program is fully accredited by (and not on probationary status with) the ACGME and approved by the Board. Noting that training programs on probation remain accredited, are generally provided a year to remediate deficiencies,¹⁴ and training permits withheld on this basis would lead individuals to seek training elsewhere, two commenters asked that wording “and not on probationary status with” be removed.

Response. The Board recognizes that there are many reasons why a training program may be placed on probationary status. Furthermore, given that a program remains accredited until accreditation is withdrawn, the Board does not disagree with the commenters’ suggestion. Among the substantive amendments previously published in the December 2017 edition of the *Register* to 404A., the referenced wording has been removed.

¹³Paul E. Luther, M.D./Teri B. O’Neal, M.D.

¹⁴Paul E. Luther, M.D./Teri B. O’Neal, M.D.

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Comment 6 (404F.1) Current rules provide that a continuing postgraduate training permit is subject to renewal provided that prior to the expiration of the initial permit the permit holder has taken and successfully passed all three steps or levels of the appropriate medical licensing examination (USMLE or COMLEX-USA). Two commenters¹⁵ suggested that the time to complete the medical licensing examination be extended to the end of postgraduate year two (PGY-2) rather than expiration of the initial permit.

Response. As noted in the existing rule, a continuing postgraduate training permit is issued for the purpose of participating in accredited training in this state beyond (after completion of) postgraduate year one (PGY-1). To be eligible for issuance of such a permit the applicant must have completed PGY-1 (404B.2). Therefore, expiration of the initial continuing postgraduate training permit occurs at the end of PGY-2 training. Because the current rules already accommodate the commenters' suggestion the Board does not believe the suggested amendment is necessary.

Comments in reply to Potpourri Notice in December 20, 2017 Register.

None.

Comments offered at Potpourri public hearing held on January 24, 2018.

None.

* * *

¹⁵Paul E. Luther, M.D./Teri B. O'Neal, M.D.

Public Hearing

A request pursuant to R.S. 49:953(A)(2) for a public hearing must be made in writing and received by the Board within 20 days of the date of this notice. If a public hearing is requested to provide data, views, arguments, information or comments in accordance with the Louisiana Administrative Procedure Act, the hearing will be held on August 28, 2017, at 9 a.m. at the office of the State Board of Certified Public Accountants of Louisiana, 601 Poydras Street, Suite 1770, New Orleans, LA 70130. Any person wishing to attend should call to confirm that a hearing is being held.

Darla M. Saux, CPA, CGMA
Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES RULE TITLE: Certified Public Accountants

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENT UNITS (Summary)

The State Board of Certified Public Accountants (Board) will incur expenses due to the proposed rule change. Other than one-time costs for notice and rule publication, the proposed rule also includes a \$100 per month increase in Board member compensation for the seven Board members over current levels, in place since 1980. The proposed change would allow officers to receive \$250 per month and other members \$200 per month, resulting in an estimated annual increase of \$8,400. The Board also anticipates devoting some administrative resources to reviewing college transcripts for education hours earned during the period between application to sit for the Certified Public Accountant (CPA) exam and application to become licensed, but believes any additional costs can be absorbed with existing resources.

The proposed changes are primarily being made to conform the Board's rules to the Louisiana Accountancy Act, as amended by Act 553 of the 2016 Session of the Legislature. The proposed changes: remove the 150 semester hour requirement to sit for the CPA exam but maintain the requirement as a condition of licensure; establish a minimum age for licensure as a CPA at 18 years of age; add a "CPA-Retired" status category; provide for an increase in Board member compensation and a maximum range of fees which could subsequently be assessed for Board services. In accordance with Act 188 of the 2013 Regular Session of the Louisiana Legislature, the proposed changes provide that practical experience be verified rather than supervised by a licensed CPA. Among other items, the proposed changes: modify educational provisions and delivery methods; incorporate the Uniform Accountancy Act Model rules regarding testing; modify language providing for recognition of foreign credential equivalency and reporting disciplinary action; define and include acceptable military service experience; clarify the provision that 8 hours of continuing professional education in Accounting and Auditing during a calendar year is required when a CPA participates in attest engagements; adopt and include compliance with the American Institute of Certified Public Accountants' Code of Professional Conduct; clarify and remove outdated language; incorporate corresponding standards of other states and national regulatory authorities for CPAs; and include other changes made necessary by the passage of time and for consistency with current Board practices.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

Revenue collections for the State Board of CPAs will increase in the future. The proposed maximum fees are established within the limits established by Act 553 (319A), however no fees are being increased at this time over current levels. The maximum fee schedule in Act 553 is not intended to be fully adopted or realized for many years; rather, proposed fee rates will be considered and adopted by the Board so that rates may be increased gradually as needed over the years until the maximum level is reached. Over time, the proposed maximum changes could increase revenue collections over current collections by \$487,885 (e.g., active licensees and applicants (\$199,275); inactive and retired applicants (\$50,000); firm permits (\$220,740); and delinquent applications (\$17,870) = \$487,885).

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NONGOVERNMENTAL GROUPS (Summary)

Persons seeking to enter the CPA profession, and individuals in the CPA profession will be affected by the proposed rule change. Individuals seeking to become a CPA will likely benefit from being able to sit for the CPA exam before completing the required education to become licensed and the changes relating to verification rather than supervision of practical experience. Licensees will also benefit from the establishment of a CPA-Retired category. The actual cost or economic benefit of these changes, which resulted from implementation of changes to the Louisiana Accountancy Act by Acts 553 and 188, is unknown. Individual CPAs, CPA firms and employers of CPAs would be directly affected by any subsequent increase in license and permit fees within the range permitted by Act 553 and the proposed changes.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed rule change will have no effect on competition and employment.

Darla M. Saux, CPA, CGMA
Executive Director
1707#031

Evan Brasseaux
Staff Director
Legislative Fiscal Office

NOTICE OF INTENT

Department of Health Board of Medical Examiners

Physicians—General, Licensure and Certification
(LAC 46:XLV.125, 311 and 404)

Notice is hereby given that in accordance with the Louisiana Administrative Procedure Act, R.S. 49:950 et seq., and pursuant to the authority vested in the Louisiana State Board of Medical Examiners (Board) by the Louisiana Medical Practice Act, R.S. 37:1270, the board intends to amend its Rules governing physician licensure and certification. The proposed amendments increase the postgraduate training requirement for medical licensure for U.S. and Canadian medical school graduates from one to three years (§311.A.6), on par with same requirement for international medical graduates (IMGs) e.g., graduates from medical schools in countries other than the U.S. or Canada, which has been in place for many years. The proposed amendments also: clarify the nature of the training permit for U.S. or Canadian graduates e.g., a continuing postgraduate

training temporary permit (§§125, 404); and increase the cost of such permit from \$100 to \$200 for initial issuance, as is the case for a training permit for IMGs (§125.B).

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XLV. Medical Professions

Subpart 1. General

Chapter 1. Fees and Costs

Subchapter C. Physicians and Surgeons Fees

§125. Licenses, Permits and Examination

A. - A.2.

B. For processing applications for permits of the type indicated, the following fees shall be payable to the board.

1. Graduate medical education and, on and after January 1, 2019, a continuing postgraduate training temporary permit—\$200.

B.2. - D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270 and 37:1281.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:906 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 17:603 (June 1991), LR 21:467 (May 1995), LR 21:1238 (November 1995), LR 30:238 (February 2004), amended by the Department of Health, Board of Medical Examiners, LR 43:

Subpart 2. Licensure and Certification

Chapter 3. Physicians

Subchapter B. Graduates of American and Canadian Medical School and Colleges

§311. Qualifications for License

A. To be eligible for a license, an applicant shall:

1. - 5.h. ...

6. have:

a. with respect to applications for licensure first received by the board before January 1, 2019, completed at least one year of postgraduate clinical training in a medical internship or equivalent program accredited by the American Council on Graduate Medical Education (ACGME) of the American Medical Association, or by the American Osteopathic Association (AOA), or by the Royal College of Physicians and Surgeons (RCPS) of Canada, and approved by the board. A combined postgraduate year one training program that is not accredited shall be deemed to satisfy the requirements of this Section provided each program comprising the combined program is accredited by the ACGME or by the AOA or by the RCPS;

b. with respect to applications for licensure first received by the board on and after January 1, 2019, completed at least three years of postgraduate clinical training in the United States or in Canada in a medical residency or equivalent program accredited by the ACGME, AOA, or by the RCPS and approved by the board. To be approved by the board such program must be: offered and taken in an institution offering not fewer than two residency or equivalent programs accredited by the ACGME, AOA, or the RCPS; the program in which the applicant participates must evidence the applicant's progressive responsibility for patient care; and the three years of such a program must be in the same specialty or alternatively, constitute the applicant, upon completion of the three years of such

program, as eligible for specialty board certification or for postgraduate year four (PGY-4) training.

A.7. - C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1271, 37:1272, 37:1274 and 37:1275.1.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:908 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 16:513 (June 1990), LR 27:836 (June 2001), LR 31:1583 (July 2005), LR 37:337 (January 2011), LR 38:3173 (December 2012), amended by the Department of Health, Board of Medical Examiners, LR 43:

Subchapter H. Restricted Licensure, Permits

§404. Continuing Postgraduate Training beyond Year One

A. The board shall issue a temporary permit to an applicant of an approved American or Canadian medical school or college (whether allopathic or osteopathic) for the purpose of participating in an accredited program of postgraduate medical training (residency training), beyond postgraduate year one, in a Louisiana medical school, college or other medical institution that is fully accredited by (and not on probationary status with) the ACGME and approved by the board.

B. Qualifications for Permit. To be eligible for a temporary permit for postgraduate medical training beyond year one, the applicant shall:

B.1. - E.3. ...

F. Renewal, Reissuance. A permit issued under this Section which has expired may be renewed or reissued by the board for two or more successive 12 month periods, provided that:

1. prior to the expiration of the initial temporary permit, permit holder has taken and successfully passed all three steps of USMLE or all three levels of COMLEX-USA or all steps, levels, parts or components of those examinations in the manner specified by §311.A.5.a-h, within the limitations and restrictions prescribed by §387 of these rules; and

2. - 2.c. ...

G. Causes for Refusal to Issue or Renew. Notwithstanding an applicant's eligibility for a permit under this Section, under the standards and criteria set forth in this Section, the board may nevertheless deny issuance or renewal of such permit for any of the causes for which it may deny licensure under R.S. 37:1285(A) or for which it may revoke a temporary permit pursuant to §404.H.

H. - H.3. ...

I. Effect of Revocation. A permittee who has had his temporary permit revoked by the board pursuant to §404.H shall not thereafter be eligible for a permit or a license to practice medicine in the state of Louisiana.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1275, 37:1277, 37:1281 and 37:1285.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 27:844 (June 2001), amended by the Department of Health, Board of Medical Examiners, LR 43:

Family Impact Statement

In compliance with Act 1183 of the 1999 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on the family has been considered. It is not anticipated that the proposed amendments will have any

impact on family, formation, stability or autonomy, as described in R.S. 49:972.

Poverty Impact Statement

In compliance with Act 854 of the 2012 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on those that may be living at or below 100 percent of the federal poverty line has been considered. It is not anticipated that the proposed amendments will have any impact on child, individual or family poverty in relation to individual or community asset development, as described in R.S. 49:973.

Provider Impact Statement

In compliance with HCR 170 of the 2014 Regular Session of the Louisiana Legislature, the impact of the proposed amendments on organizations that provide services for individuals with development disabilities has been considered. It is not anticipated that the proposed amendments will have any impact on the staffing, costs or overall ability of such organizations to provide the same level of services, as described in HCR 170.

Public Comments

Interested persons may submit written data, views, arguments, information or comments on the proposed amendment to Rita Arceneaux, Confidential Executive Assistant, Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, LA 70130, (504) 568-6820, Ex. 242. She is responsible for responding to inquiries. Written comments will be accepted until 4 p.m., August 21, 2017.

Public Hearing

A request pursuant to R.S. 49:953(A)(2) for a public hearing must be made in writing and received by the board within 20 days of the date of this notice. If a public hearing is requested to provide data, views, arguments, information or comments orally in accordance with the Louisiana Administrative Procedure Act, the hearing will be held on Monday, August 28, 2017, 10:30 a.m. at the office of the Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, LA 70130. Any person wishing to attend should call to confirm that a hearing is being held.

Keith C. Ferdinand, M.D.
Interim Executive Director

FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES

RULE TITLE: Physicians General, Licensure and Certification

I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

Other than the publication fee associated with the proposed rule change, which is estimated to cost the Louisiana State Board of Medical Examiners \$426, it is not anticipated that the Board, state, or local governmental units will incur any other costs or savings.

In addition to technical updates and clarifying language, effective January 1, 2019, the proposed amendments increase the post-graduate year (PGY) training requirement necessary for medical licensure for U.S. and Canadian medical school

graduates from one year (PGY1/internship) to three years (PGY3) of training, on par with the requirements for international medical schools graduates.

II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)

The proposed change is estimated to reduce revenue collected by the Louisiana State Board of Medical Examiners by \$53,478 in FY 19 and in subsequent years. The loss in revenue is as a result in the difference in the fees for a medical permit versus a medical license.

Physician residency training programs are a minimum of three years. Under current rules, after completing a PGY1/internship a resident pays a permit fee of \$100 in year 2 and \$100 in year 3. After year 1, U.S. and Canadian residents may choose to convert their permit to a license, paying an initial licensing fee of \$382 and an annual renewal fee of \$332. Historically, 32% of U.S. and Canadian residents (111) opted to do this in year 2 and 34% of residents (118) opted to do this in year 3. Because of the proposed amendment, the option to apply for a license before year 3 will no longer be available to these residents, resulting in loss of revenue for the Board. The cost for initial issuance of training permit after internship (PGY2) is also being increased from \$100 to \$200 for these residents.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS OR NONGOVERNMENTAL GROUPS (Summary)

The proposed amendment will impact U.S. and Canadian medical school graduates in a residency program that desire to apply for licensure after 1 year of post graduate medical training. Occasionally, those that applied for licensure after one year of training would have the option of practicing outside of their training programs. This would no longer be an option.

Furthermore, of those that applied for licensure, most completed a residency program; however, each year an estimated 2% of U.S./Canadian medical graduates in training in this state (7 physicians) do not complete a residency program and enter into practice. This would no longer be an option.

Finally, the cost for a PGY2 training permit for these residents is being increased by \$100, effective January 1, 2019.

However, these proposed amendments are anticipated to improve the quality of healthcare delivered. A nationally published study of the Board's data over a twenty year period reveals that physicians who completed one year, but less than three, of PGY training are more than two times likely to be disciplined for competency/standards-related issues as physicians with three or more years of post-graduate training. It is also anticipated that the proposed amendments will reduce the costs to the citizens of this state associated with quality of care deficiencies, related malpractice and associated Board action.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed amendment may decrease employment opportunities for: (1) physicians who would have entered medical practice prior to completing at least three years of post-graduate training and (2) PGY2 and 3 residents who would have otherwise obtained a license to work outside of their training programs.

Keith C. Ferdinand, M.D.
Interim Executive Director
1707#063

Evan Brasseaux
Staff Director
Legislative Fiscal Office

POTPOURRI

Department of Health Board of Medical Examiners

Public Hearing—Substantive Changes to Proposed Rule—Physicians—General, Licensure and Certification (LAC 46:XLV.311, 404, and 417)

The Louisiana State Board of Medical Examiners (the “board”) published a Notice of Intent to amend its rules in the July 20, 2017, edition of the *Louisiana Register* (LR 43:1447-1449). The notice solicited comments. Comments were received in writing and at a public hearing held on August 28, 2017. As a result of its consideration of the comments received during its meeting on October 16, 2017, the board agreed to make substantive changes to the original proposed Rule amendments in the following respects. In Section: 311.A.6.b: (i) after the words *at least* to delete the words *three years* and add the words “two years, or alternatively have completed one year and have a current commitment in a form and manner specified by the board for a second year;”; (ii) after the words *approved by the board* to add the words “For physicians pursuing training in oral and maxillofacial surgery, one year of such training may be in a program accredited by the Commission on Dental Accreditation of the American Dental Association.”; (iii) after the words *not fewer than* to delete the word *two* and add the word “one”; (iv) to delete and replace the word *three* with the word “two” wherever it appears in 311.A.6.b; (v) after the words *postgraduate year* to delete the word *four* and the acronym *PGY-4* and replace them with the word “three” and the acronym “PGY-3”; and (vi) after the word *training*; to add the words “and applicants are only permitted to engage in extracurricular medical practice outside of the program with the written permission and assurance of the program director that the applicant is in good standing, has good credentials, and is recommend for such extracurricular practice engagement.”; (vii) 404.A: after the words *accredited by* to delete the words “(and not on probationary status with)”; (viii) in the title to 417 after the words *Renewal of License*; to add the words “Prerequisite Condition”; and (ix) 417: to add as a new Subsection 417.C, to read as follows: “C. Initial application for renewal of a license, issued on the basis of a commitment for year two of postgraduate clinical training under 311.A.6.b shall, as a prerequisite to renewal consideration, be accompanied by documentation satisfactory to the board of the completion of year two of such training.” As substantively amended, these provisions will read as set forth below.

No fiscal or economic impact will result from the amendments proposed in this notice.

Title 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XLV. Medical Professions

Subpart 2. Licensure and Certification

Chapter 3. Physicians

Subchapter B. Graduates of American and Canadian Medical School and Colleges

§311. Qualifications for License

A. To be eligible for a license, an applicant shall:

1. - 5.h. ...

6. have:

a. ...

b. with respect to applications for licensure first received by the board on and after January 1, 2019, completed at least two years, or alternatively have completed one year and have a current commitment in a form and manner specified by the board for a second year, of postgraduate clinical training in the United States or in Canada in a medical residency or equivalent program accredited by the ACGME, AOA, or by the RCPS and approved by the board. For physicians pursuing training in oral and maxillofacial surgery, one year of such training may be in a program accredited by the Commission on Dental Accreditation of the American Dental Association. To be approved by the board such program must be: offered and taken in an institution offering not fewer than one residency or equivalent program accredited by the ACGME, AOA, or the RCPS; the program in which the applicant participates must evidence the applicant's progressive responsibility for patient care; the two years of such a program must be in the same specialty or alternatively, constitute the applicant, upon completion of the two years of such program, as eligible for specialty board certification or for postgraduate year three (PGY-3) training; and applicants are only permitted to engage in extracurricular medical practice outside of the program with the written permission and assurance of the program director that the applicant is in good standing, has good credentials, and is recommend for such extracurricular practice engagement.

A.7. - C. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1271, 37:1272, 37:1274 and 37:1275.1.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:908 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 16:513 (June 1990), LR 27:836 (June 2001), LR 31:1583 (July 2005), LR 37:337 (January 2011), LR 38:3173 (December 2012), amended by the Department of Health, Board of Medical Examiners, LR 44:

Subchapter H. Restricted Licensure, Permits

§404. Continuing Postgraduate Training beyond Year One

A. The board shall issue a temporary permit to an applicant of an approved American or Canadian medical school or college (whether allopathic or osteopathic) for the purpose of participating in an accredited program of postgraduate medical training (residency training), beyond postgraduate year one, in a Louisiana medical school, college or other medical institution that is fully accredited by the ACGME and approved by the board.

B. - I. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1275, 37:1277, 37:1281 and 37:1285.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 27:844 (June 2001), amended by the Department of Health, Board of Medical Examiners, LR 44:

Subchapter I. License Issuance, Termination, Renewal, Reinstatement and Exemptions

§417. Renewal of License; Prerequisite Condition

A. - B. ...

C. Initial application for renewal of a license, issued on the basis of a commitment for year two of postgraduate clinical training under §311.A.6.b shall, as a prerequisite to

renewal consideration, be accompanied by documentation satisfactory to the board of the completion of year two of such training.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1270(A)(8), 37:1271, 37:1272, 37:1274, 37:1275.1, 37:1280 and 37:1281.

HISTORICAL NOTE: Promulgated by the Department of Health and Human Resources, Board of Medical Examiners, LR 10:914 (November 1984), amended by the Department of Health and Hospitals, Board of Medical Examiners, LR 16:523 (June 1990), LR 24:1500 (August 1998), LR 26:695 (April 2000), LR 27:848 (June 2001), LR 44:

Public Comments

Interested persons may submit written comments on these proposed substantive changes to Rita Arceneaux, Confidential Executive Assistant, Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, LA, 70130, (504) 568-6820, Ex. 242. She is responsible for responding to inquiries. Written comments will be accepted until 4 p.m., January 19, 2018.

Public Hearing

In accordance with R.S. 49:968(H)(2), the board gives notice that a public hearing to receive comments and testimony on these substantive changes to the rule amendments originally proposed will be held on Wednesday, January 24, 2018, at 8:30 a.m. in the office of the Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, LA 70130.

Vincent A. Culotta, Jr., M.D.
Executive Director

1712#051

POTPOURRI

**Department of Health
Board of Veterinary Medicine**

Examination and Board Meeting Dates

Spring/Summer Examination Dates

The Louisiana Board of Veterinary Medicine will administer the state board examination (SBE) for licensure to practice veterinary medicine on the first Tuesday of every month. Deadline to apply for the SBE is the third Friday prior to the examination date desired. SBE dates are subject to change due to office closure (i.e. holiday, weather).

The board will accept applications to take the North American veterinary licensing examination (NAVLE) which will be administered through the International Council for Veterinary Assessment (ICVA), formerly National Board of Veterinary Medical Examiners (NBVME), and the National Board Examination Committee (NBEC), as follows.

Test Window Date	Deadline To Apply
April 9 through April 21, 2018	February 1, 2018

The board will also accept applications for the veterinary technician national examination (VTNE) for state registration of veterinary technicians which will be administered through the American Association of Veterinary State Boards (AAVSB), as follows.

Test Date	Deadline To Apply
March 15 through April 15, 2018	February 15, 2018
July 15 through August 15, 2018	June 15, 2018
November 15 through December 15, 2018	October 15, 2018

Applications for all examinations must be received on or before the deadline. No late application will be accepted. Requests for special accommodations must be made as early as possible for review and acceptance. Applications and information may be obtained from the board office at 301 Main Street, Suite 1050, Baton Rouge, LA 70801, via telephone at (225) 342-2176, and by e-mail at admin@lsbvm.org; application forms and information are also available on the website at www.lsbvm.org.

Board Meeting Dates

The members of the Louisiana Board of Veterinary Medicine will meet at 8:30 a.m. on the following dates in 2018:

- Thursday, February 1, 2018
- Thursday, April 5, 2018
- Thursday, June 7, 2018 (annual meeting)
- Thursday, August 2, 2018
- Thursday, October 4, 2018
- Thursday, December 6, 2018

These dates are subject to change, so please contact the board office via telephone at (225) 342-2176 or email at admin@lsbvm.org to verify actual meeting dates.

Wendy D. Parrish
Executive Director

1712#039

POTPOURRI

**Department of Health
Bureau of Health Services Financing**

2018 Third Quarter Hospital Stabilization Assessment

In compliance with House Concurrent Resolution (HCR) 51 of the 2016 Regular Session of the Louisiana Legislature, the Department of Health, Bureau of Health Services Financing amended the provisions governing provider fees to establish hospital assessment fees and related matters (*Louisiana Register*, Volume 42, Volume 11).

House Concurrent Resolution 8 of the 2017 Regular Session of the Louisiana Legislature enacted an annual hospital stabilization formula and directed the Department of Health to calculate, levy and collect an assessment for each assessed hospital.

The Department of Health shall calculate, levy and collect a hospital stabilization assessment in accordance with HCR 8. For the quarter beginning January 1, 2018 through March 31, 2018, the quarterly assessment amount to all hospitals will be \$13,707,885. This amounts to 0.1208695 percent of total inpatient and outpatient hospital net patient revenue of the assessed hospitals.

Rebekah E. Gee MD, MPH
Secretary

1712#026

POTPOURRI

Department of Health and Hospitals
Board of Medical Examiners

Public Hearing; Substantive Changes to Proposed Rules;
Physicians, General, Licensure and Certification—LAC
46:XLV.125, 311, 440

The Louisiana State Board of Medical Examiners (the "board") published a Notice of Intent to amend its rules in the July 20, 2017, edition of the *Louisiana Register* (LR 43:1447-1449). The notice solicited comments. Comments were received in writing and at a public hearing held on August 28, 2017. As a result of its consideration of the comments received during its meeting on October 16, 2017, the board agreed to make substantive changes to the original proposed rule amendments in the following respects. In Section: 311A.6.b: (i) after the words *at least* to delete the words *three years* and add the words "two years, or alternatively have completed one year and have a current commitment in a form and manner specified by the board for a second year,"; (ii) after the words *approved by the board*, to add the words "For physicians pursuing training in oral and maxillofacial surgery, one year of such training may be in a program accredited by the Commission on Dental Accreditation of the American Dental Association."; (iii) after the words *not fewer than* to delete the word *two* and add the word "one"; (iv) to delete and replace the word *three* with the word "two" wherever it appears in 311A.6.b.; (v) after the words *postgraduate year* to delete the word *four* and the acronym *PGY-4* and replace them with the word "three" and the acronym "PGY-3"; and (vi) after the word *training*; to add the words "and applicants are only permitted to engage in extracurricular medical practice outside of the program with the written permission and assurance of the program director that the applicant is in good standing, has good credentials, and is recommend for such extracurricular practice engagement."; (vii) 404A: after the words *accredited by* to delete the words "(and not on probationary status with)"; (viii) in the title to 417 after the words *Renewal of License*; to add the words "Prerequisite Condition"; and (ix) 417: to add as a new Subsection 417C, to read as follows: "C. Initial application for renewal of a license, issued on the basis of a commitment for year two of postgraduate clinical training under 311A.6.b shall, as a prerequisite to renewal consideration, be accompanied by documentation satisfactory to the board of the completion of year two of such training." As substantively amended, these provisions will read as set forth below:

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STANDARDS

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Chapter 3. Physicians

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- 1. - 5.h. ...
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AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1271, 37:1272, 37:1274 and 37:1275.1.

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AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1275, 37:1277, 37:1281 and 37:1285.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Medical Examiners, LR 27:844 (June 2001), amended by the Department of Health, Board of Medical Examiners, LR 43:

Subchapter I. License Issuance, Termination, Renewal, Reinstatement and Exemptions

§417. Renewal of License; Prerequisite Condition

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satisfactory to the board of the completion of year two of such training.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1270, 37:1270(A)(8), ~~37:1271, 37:1272, 37:1274, 37:1275.1, 37:1280 and 37:1281.~~

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No fiscal or economic impact will result from the amendments proposed in this notice.

In accordance with R.S. 49:968(H)(2), the board gives notice that a public hearing to receive comments and testimony on these substantive changes to the rule amendments originally proposed will be held on [Jan. 24-29], 2018, at [insert] .m. in the office of the Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, Louisiana 70130. Interested persons may submit written comments on these proposed substantive changes to Rita Arceneaux, Confidential Executive Assistant, Louisiana State Board of Medical Examiners, 630 Camp Street, New Orleans, Louisiana, 70130, (504) 568-6820, Ex. 242. She is responsible for responding to inquiries. Written comments will be accepted until 4 p.m., January 19, 2018.

Vincent A. Culotta, Jr., M.D.
Executive Director