

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), LR.

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:

A.1.-A.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), LR.

Subchapter H. Restricted Licensure, Permits

§404. Continuing Postgraduate Training beyond Year One

A. The board shall issue ~~an institutional~~ 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 ~~accredited~~ 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 ~~an institutional~~ 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 ~~one-two~~ or more successive 12 month periods, provided that:

1. prior to the expiration of the initial ~~institutional~~ 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

F.2.-F.2.c. . . .

G. Causes for Refusal to Issue or Renew. Notwithstanding an applicant's eligibility for ~~an institutional~~ 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 ~~an institutional~~ a temporary permit pursuant to §404.H.

H.-H.3. . . .

I. Effect of Revocation. A permittee who has had his ~~institutional~~ 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), LR.

**FISCAL AND ECONOMIC IMPACT STATEMENT
FOR ADMINISTRATIVE RULES**

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Rule Title: PHYSICIAN LICENSURE

Date Rule Takes Effect: ON FINAL PROMULGATION, OCTOBER 20, 2017 (est.)

SUMMARY
(Use complete sentences)

In accordance with Section 953 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a fiscal and economic impact statement on the rule proposed for adoption, repeal or amendment. The following statements, based on the attached worksheets, will be published in the Louisiana Register with the proposed agency rule.

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 BENEFIT TO DIRECTLY AFFECTED PERSONS OR NON-GOVERNMENTAL 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.
Signature of Agency Head or Designee
KEITH C. FERDINAND, M.D.
Interim Executive Director

Evan Brasel, Staff Director
Legislative Fiscal Officer or Designee

July 10, 2017
Name and Title of Agency Head or Designee
Date of Signature

RECEIVED *7/11/17*
Date of Signature

JUL 11 2017

Legislative Fiscal Office