	PHYSICIAN AND USTEUPATHIC LICENSING
	AMENDMENTS
	2012 GENERAL SESSION
	STATE OF UTAH
	Chief Sponsor: Stephen E. Sandstrom
	Senate Sponsor: John L. Valentine
LO	NG TITLE
Gen	eral Description:
	This bill amends the Utah Medical Practice Act and the Utah Osteopathic Medical
Prac	tice Act relating to licensing requirements.
Hig	hlighted Provisions:
	This bill:
	<ul> <li>prohibits the Division of Occupational Licensing from requiring board or specialty</li> </ul>
certi	fication as a requirement for licensure; and
	<ul><li>makes technical changes.</li></ul>
Mor	ney Appropriated in this Bill:
	None
Oth	er Special Clauses:
	None
Utal	h Code Sections Affected:
AM	ENDS:
	<b>58-67-302</b> , as last amended by Laws of Utah 2011, Chapter 214
	<b>58-68-302</b> , as last amended by Laws of Utah 2011, Chapter 214



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28	58-67-302. Qualifications for licensure.
29	(1) An applicant for licensure as a physician and surgeon, except as set forth in
30	Subsection (2), shall:
31	(a) submit an application in a form prescribed by the division, which may include:
32	(i) submissions by the applicant of information maintained by practitioner data banks,
33	as designated by division rule, with respect to the applicant;
34	(ii) a record of professional liability claims made against the applicant and settlements
35	paid by or on behalf of the applicant; and
36	(iii) authorization to use a record coordination and verification service approved by the
37	division in collaboration with the board;
38	(b) pay a fee determined by the department under Section 63J-1-504;
39	(c) be of good moral character;
40	(d) provide satisfactory documentation of having successfully completed a program of
41	professional education preparing an individual as a physician and surgeon, as evidenced by:
42	(i) having received an earned degree of doctor of medicine from an LCME accredited
43	medical school or college; or
44	(ii) if the applicant graduated from a medical school or college located outside the
45	United States or its territories, submitting a current certification by the Educational
46	Commission for Foreign Medical Graduates or any successor organization approved by the
47	division in collaboration with the board;
48	(e) satisfy the division and board that the applicant:
49	(i) has successfully completed 24 months of progressive resident training in a program
50	approved by the ACGME, the Royal College of Physicians and Surgeons, the College of
51	Family Physicians of Canada, or any similar body in the United States or Canada approved by
52	the division in collaboration with the board; or
53	(ii) (A) has successfully completed 12 months of resident training in an ACGME
54	approved program after receiving a degree of doctor of medicine as required under Subsection
55	(1)(d);
56	(B) has been accepted in and is successfully participating in progressive resident
57	training in an ACGME approved program within Utah, in the applicant's second or third year
58	of postgraduate training; and

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(C) has agreed to surrender to the division the applicant's license as a physician and surgeon without any proceedings under Title 63G, Chapter 4, Administrative Procedures Act, and has agreed the applicant's license as a physician and surgeon will be automatically revoked by the division if the applicant fails to continue in good standing in an ACGME approved progressive resident training program within the state;

- (f) pass the licensing examination sequence required by division rule made in collaboration with the board;
- (g) be able to read, write, speak, understand, and be understood in the English language and demonstrate proficiency to the satisfaction of the board if requested by the board;
- (h) meet with the board and representatives of the division, if requested, for the purpose of evaluating the applicant's qualifications for licensure;
  - (i) designate:

- (i) a contact person for access to medical records in accordance with the federal Health Insurance Portability and Accountability Act; and
- (ii) an alternate contact person for access to medical records, in the event the original contact person is unable or unwilling to serve as the contact person for access to medical records; and
- (j) establish a method for notifying patients of the identity and location of the contact person and alternate contact person, if the applicant will practice in a location with no other persons licensed under this chapter.
- (2) An applicant for licensure as a physician and surgeon by endorsement who is currently licensed to practice medicine in any state other than Utah, a district or territory of the United States, or Canada shall:
- (a) be currently licensed with a full unrestricted license in good standing in any state, district, or territory of the United States, or Canada;
- (b) have been actively engaged in the legal practice of medicine in any state, district, or territory of the United States, or Canada for not less than 6,000 hours during the five years immediately preceding the date of application for licensure in Utah;
- (c) comply with the requirements for licensure under [Subsection] Subsections (1)(a) through (d), (1)(e)(i), and (1)(g) through (j);
  - (d) have passed the licensing examination sequence required in Subsection (1)(f) or

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another medical licensing examination sequence in another state, district or territory of the United States, or Canada that the division in collaboration with the board by rulemaking determines is equivalent to its own required examination;

- (e) not have any investigation or action pending against any health care license of the applicant, not have a health care license that was suspended or revoked in any state, district or territory of the United States, or Canada, and not have surrendered a health care license in lieu of a disciplinary action, unless:
- (i) the license was subsequently reinstated as a full unrestricted license in good standing; or
- (ii) the division in collaboration with the board determines to its satisfaction, after full disclosure by the applicant, that:
  - (A) the conduct has been corrected, monitored, and resolved; or
- (B) a mitigating circumstance exists that prevents its resolution, and the division in collaboration with the board is satisfied that, but for the mitigating circumstance, the license would be reinstated;
- (f) submit to a records review, a practice history review, and comprehensive assessments, if requested by the division in collaboration with the board; and
- (g) produce satisfactory evidence that the applicant meets the requirements of this Subsection (2) to the satisfaction of the division in collaboration with the board.
- (3) An applicant for licensure by endorsement may engage in the practice of medicine under a temporary license while the applicant's application for licensure is being processed by the division, provided:
- (a) the applicant submits a complete application required for temporary licensure to the division;
  - (b) the applicant submits a written document to the division from:
- (i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act, stating that the applicant is practicing under the invitation of the health care facility; or
- (ii) two individuals licensed under this chapter, whose license is in good standing and who practice in the same clinical location, both stating that:
  - (A) the applicant is practicing under the invitation of the individual; and

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121	(B) the applicant will practice at the same clinical location as the individual;
122	(c) the applicant submits a signed certification to the division that the applicant meets
123	the requirements of Subsection (2);
124	(d) the applicant does not engage in the practice of medicine until the division has
125	issued a temporary license;
126	(e) the temporary license is only issued for and may not be extended beyond the
127	duration of one year from issuance; and
128	(f) the temporary license expires immediately and prior to the expiration of one year
129	from issuance, upon notification from the division that the applicant's application for licensure
130	by endorsement is denied.
131	(4) The division shall issue a temporary license under Subsection (3) within 15
132	business days after the applicant satisfies the requirements of Subsection (3).
133	(5) The division may not require a specialty or board certification as a qualification for
134	<u>licensure.</u>
135	Section 2. Section <b>58-68-302</b> is amended to read:
136	58-68-302. Qualifications for licensure.
137	(1) An applicant for licensure as an osteopathic physician and surgeon, except as set
138	forth in Subsection (2), shall:
139	(a) submit an application in a form prescribed by the division, which may include:
140	(i) submissions by the applicant of information maintained by practitioner data banks,
141	as designated by division rule, with respect to the applicant;
142	(ii) a record of professional liability claims made against the applicant and settlements
143	paid by or on behalf of the applicant; and
144	(iii) authorization to use a record coordination and verification service approved by the
145	division in collaboration with the board;
146	(b) pay a fee determined by the department under Section 63J-1-504;
147	(c) be of good moral character;
148	(d) provide satisfactory documentation of having successfully completed a program of
149	professional education preparing an individual as an osteopathic physician and surgeon, as
150	evidenced by:
151	(i) having received an earned degree of doctor of osteopathic medicine from an AOA

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approved medical school or college; or

- (ii) submitting a current certification by the Educational Commission for Foreign Medical Graduates or any successor organization approved by the division in collaboration with the board, if the applicant is graduated from an osteopathic medical school or college located outside of the United States or its territories which at the time of the applicant's graduation, met criteria for accreditation by the AOA;
  - (e) satisfy the division and board that the applicant:
- (i) has successfully completed 24 months of progressive resident training in an ACGME or AOA approved program after receiving a degree of doctor of osteopathic medicine required under Subsection (1)(d); or
- (ii) (A) has successfully completed 12 months of resident training in an ACGME or AOA approved program after receiving a degree of doctor of osteopathic medicine as required under Subsection (1)(d);
- (B) has been accepted in and is successfully participating in progressive resident training in an ACGME or AOA approved program within Utah, in the applicant's second or third year of postgraduate training; and
- (C) has agreed to surrender to the division the applicant's license as an osteopathic physician and surgeon without any proceedings under Title 63G, Chapter 4, Administrative Procedures Act, and has agreed the applicant's license as an osteopathic physician and surgeon will be automatically revoked by the division if the applicant fails to continue in good standing in an ACGME or AOA approved progressive resident training program within the state;
- (f) pass the licensing examination sequence required by division rule, as made in collaboration with the board;
- (g) be able to read, write, speak, understand, and be understood in the English language and demonstrate proficiency to the satisfaction of the board, if requested by the board;
- (h) meet with the board and representatives of the division, if requested for the purpose of evaluating the applicant's qualifications for licensure;
  - (i) designate:
- (i) a contact person for access to medical records in accordance with the federal Health Insurance Portability and Accountability Act; and
  - (ii) an alternate contact person for access to medical records, in the event the original

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contact person is unable or unwilling to serve as the contact person for access to medical records; and

- (j) establish a method for notifying patients of the identity and location of the contact person and alternate contact person, if the applicant will practice in a location with no other persons licensed under this chapter.
- (2) An applicant for licensure as an osteopathic physician and surgeon by endorsement who is currently licensed to practice osteopathic medicine in any state other than Utah, a district or territory of the United States, or Canada shall:
- (a) be currently licensed with a full unrestricted license in good standing in any state, district or territory of the United States, or Canada;
- (b) have been actively engaged in the legal practice of osteopathic medicine in any state, district or territory of the United States, or Canada for not less than 6,000 hours during the five years immediately preceding the day on which the applicant applied for licensure in Utah;
- (c) comply with the requirements for licensure under Subsections (1)(a) through (d), (1)(e)(i), and (1)(g) through (j);
- (d) have passed the licensing examination sequence required in Subsection (1)(f) or another medical licensing examination sequence in another state, district or territory of the United States, or Canada that the division in collaboration with the board by rulemaking determines is equivalent to its own required examination;
- (e) not have any investigation or action pending against any health care license of the applicant, not have a health care license that was suspended or revoked in any state, district or territory of the United States, or Canada, and not have surrendered a health care license in lieu of a disciplinary action, unless:
- (i) the license was subsequently reinstated as a full unrestricted license in good standing; or
- (ii) the division in collaboration with the board determines, after full disclosure by the applicant, that:
  - (A) the conduct has been corrected, monitored, and resolved; or
- (B) a mitigating circumstance exists that prevents its resolution, and the division in collaboration with the board is satisfied that, but for the mitigating circumstance, the license

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214	would be reinstated;
215	(f) submit to a records review, a practice review history, and physical and
216	psychological assessments, if requested by the division in collaboration with the board; and
217	(g) produce evidence that the applicant meets the requirements of this Subsection (2) to
218	the satisfaction of the division in collaboration with the board.
219	(3) An applicant for licensure by endorsement may engage in the practice of medicine
220	under a temporary license while the applicant's application for licensure is being processed by
221	the division, provided:
222	(a) the applicant submits a complete application required for temporary licensure to the
223	division;

- ne division;
  - (b) the applicant submits a written document to the division from:

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- (i) a health care facility licensed under Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act, stating that the applicant is practicing under the invitation of the health care facility; or
- (ii) two individuals licensed under this chapter, whose license is in good standing and who practice in the same clinical location, both stating that:
  - (A) the applicant is practicing under the invitation of the individual; and
  - (B) the applicant will practice at the same clinical location as the individual;
- (c) the applicant submits a signed certification to the division that the applicant meets the requirements of Subsection (2);
- (d) the applicant does not engage in the practice of medicine until the division has issued a temporary license;
- (e) the temporary license is only issued for and may not be extended beyond the duration of one year from issuance; and
- (f) the temporary license expires immediately and prior to the expiration of one year from issuance, upon notification from the division that the applicant's application for licensure by endorsement is denied.
- (4) The division shall issue a temporary license under Subsection (3) within 15 business days after the applicant satisfies the requirements of Subsection (3).
- 243 (5) The division may not require a specialty or board certification as a qualification for 244 licensure.

Legislative Review Note as of 2-14-12 10:22 AM

Office of Legislative Research and General Counsel