Report From Agency

STATE OF WISCONSIN MEDICAL EXAMINING BOARD

IN THE MATTER OF RULE-MAKING : ORDER OF THE

PROCEEDINGS BEFORE THE : MEDICAL EXAMINING BOARD

MEDICAL EXAMINING BOARD : ADOPTING RULES

: (CLEARINGHOUSE RULE 06-114)

ORDER

An order of the Medical Examining Board to amend Med 1.06 (3) (b); and to create a Note following Med 1.06 (3) (b), relating to the requirements for completion of the 3-step sequence of the United States Medical Licensing Examination (USMLE).

Analysis prepared by the Department of Regulation and Licensing.

<u>ANALYSIS</u>

Statute interpreted:

Section 448.05, Stats.

Statutory authority:

Sections 15.08 (5) (b) and 227.11 (2), Stats.

Explanation of agency authority:

The Medical Examining Board has the authority under ss. 15.08 (5) (b) and 448.05, Stats., to promulgate rules for the licensure of physicians, including the sequence for completion of the 3-step United States Medical Licensing Examination (USMLE).

Related statute or rule:

There are no other statutes or rules other than those listed above.

Plain language analysis:

The proposed revision to s. Med 1.06 (3) (b) changes the timeframe for completion of the 3-step USMLE sequence from 7 to 10 years for graduates of a standard M.D. training program. The proposed revision also changes the timeframe for completion of the examinations from 9 years to 12 years for graduates of a combined M.D./Ph.D. medical

scientist training program. The proposed rule revision enlarges the timeframe for completion of the sequence by 3 years for each category of graduate.

This rule primarily affects foreign graduates who encounter delays in completing the 3-step examination sequence due to visa and immigration problems. The rule will also affect other graduates, such as medical scientists, who often experience delays in completing the sequence due to the requirements of their combined programs. Finally, the rule will impact those graduates who encounter obstacles or delays resulting from voluntary or involuntary circumstances and hardships. The current 7-year and 9-year time sequence rule has resulted in an impediment to licensure of qualified applicants.

Summary of, and comparison with, existing or proposed federal regulation:

There is no existing or proposed federal regulation relating to these rules.

Comparison with rules in adjacent states:

Illinois:

The state of Illinois requires that applicants for medical licensure must complete USMLE Steps 1, 2 and 3 within 7 years of passing the first step.

Minnesota:

The state of Minnesota requires that applicants must complete USMLE Steps 1, 2 and 3 within 7 years of passing the first examination, and waives the timeframe for M.D./Ph.D. degree graduates.

Iowa:

Applicants for a medical license in the state of Iowa must complete Steps 1, 2 and 3 of the USMLE within 7 years of passing the first examination. Applicants who are graduates of a M.D./Ph.D. program must complete the examination sequence within 10 years after passing the first examination.

Michigan:

The state of Michigan requires that applicants for licensure must pass USMLE Step 3 within 5 years of their first attempt at Step 3.

Summary of factual data and analytical methodologies:

Currently, there are four states which are listed on the Federation of State Medical Examining Board website that have a 10-year rule and five states which have an unlimited time for completion of the examination sequence. Six states waive the completion timeframe for M.D./Ph.D. candidates. For osteopathic physicians, 24 states

have no time limit for completion of their examinations. The comparison of the rules in adjacent states was obtained directly from a review of those state rules and information compiled by the Federation of State Medical Boards. The proposed revisions to the rules were based upon recommendations from deans of the state medical schools and medical providers, and an ad hoc advisory panel consisting of members of the Medical Examining Board.

Analysis and supporting documents used to determine effect on small business or in preparation of economic impact report:

The department's physician licensing credentialing specialist recorded USMLE examination completion dates in phone calls received from prospective applicants for a four month period in 2005 and found that 17 prospective applicants would not qualify for licensure under a 7/9 year rule but would qualify under a 9/12 year rule. The Wisconsin Medical Society estimates there are 11,300 total active physicians in the workforce and that 2,800, or 25%, work in a practice size ranging from 1-9 physicians. Assuming practices with 9 or fewer physicians can be categorized as small businesses, and that applicants are proportionately employed in practices of all sizes, the small business physician hiring pool could increase by at least 17 physicians annually under the new rule. The specialist also suggested that the number of additional physician applicants could be significantly higher because most physician recruiters are aware of Wisconsin's 7/9 year rule and eliminate Wisconsin from consideration automatically.

Section 227.137, Stats., requires an "agency" to prepare an economic impact report before submitting the proposed rule-making order to the Wisconsin Legislative Council. The Department of Regulation and Licensing is not included as an "agency" in this section.

Anticipated costs incurred by private sector:

The department finds that this rule has no significant fiscal effect on the private sector.

Fiscal estimate:

The department estimates that the proposed rule will have no significant fiscal impact.

Effect on small business:

These proposed rules will have no significant economic impact on small businesses, as defined in s. 227.114 (1), Stats. The Department's Regulatory Review Coordinator may be contacted by email at larry.martin@drl.state.wi.us, or by calling (608) 266-8608.

Agency contact person:

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Wisconsin 53708-8935. Telephone: (608) 266-0495. Email: pamela.haack@drl.state.wi.us.

Place where comments are to be submitted and deadline for submission:

Comments may be submitted to Pamela Haack, Paralegal, Department of Regulation and Licensing, 1400 East Washington Avenue, Room 152, P.O. Box 8935, Madison, Wisconsin 53708-8935, or by email at pamela.haack@drl.state.wi.us. Comments must be received on or before November 24, 2006, to be included in the record of rule-making proceedings.

TEXT OF RULE

SECTION 1. Med 1.06 (3) (b) is amended to read:

Med 1.06 (3) (b) Commencing January 1, 1994, the board accepts the 3-step USMLE sequence as its written or computer-based examination and administers step 3 of the sequence. Minimum standard passing scores for each step shall be not less than 75.0. Applicants who have completed a standard M.D. training program shall complete all 3 steps of the examination sequence within 7 10 years from the date upon which the applicant first passes a step, either step 1 or step 2. Applicants who have complete all 3 steps of the examination sequence within 9 12 years from the date upon which the applicant first passes a step, either step 1 or step 2. Applicants who have passed a step may not repeat the step unless required to do so in order to comply with the 7 year 10-year or 9 year 12-year time limit. If the applicant fails to achieve a passing grade on any step, the applicant may apply for and be reexamined on only the step failed according to the reexamination provisions of s. Med 1.08 (1).

SECTION 2. A Note following Med 1.06 (3) (b) is created to read:

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Medical Examining Board

 $Med\ 1.06(3)(b)\ CR06-114\ (USMLE\ 7-year\ rule)\ Final\ for\ Adoption\ 2-28-07$