

**INTERSTATE MEDICAL LICENSING COMPACT  
COMMISSION  
Inaugural Meeting  
October 27, 2015**

Inaugural meeting of the Interstate Medical Licensure Compact Commission convened at 8:10am with a call to order from Commissioner Ian Marquand (MT) who the body agreed should serve as meeting facilitator unless or until the election of a chairperson.

Commissioner Marquand began the meeting by thanking all Commissioners for their service. He noted that the day was historic and reminded Commissioners that while it was the "dawn of a new day", it was "now time to get to work".

Commissioner Marquand invited Commissioner Brian Zachariah (IL) to deliver a welcome on behalf the state of Illinois who agreed to host the inaugural meeting. Commissioner Zachariah noted that Illinois was honored to host both the pre-commission meeting as well as the first meeting and thanked specifically Kathleen Walsh, the liaison to the Medical Disciplinary Board in Illinois for her work and Ron, who served as the AV and technician for the meeting.

Commissioner Zachariah informed the Commission that the location for the second day of the meeting would be at the Thompson Center located across the street from the Bilandic building, where the first day meeting was held.

Commissioner Marquand asked the Commission if there were any objections to inviting Colmon Elridge, Director of the National Center for Interstate Compacts with the Council of State Governments to assist in an administrative role for the beginning of the meeting. No objections were stated and Mr. Elridge came forward.

Commissioner Marquand began the roll call of the states, in alphabetical order. The member states as called in the roll call are AL, ID, IL, IA, MN, MT, NV,SD,UT, WV, and WY. All eleven compact states were in attendance with each member state being fully represented by both appointment commissioners.

Commissioner Marquand received letters of appointment or other appointment documents from those Commissioners who had them on hand and asked those that did not to send them in as soon as possible.

Commissioner Marquand declared that a quorum of Commissioners was present and the Commission officially could begin its work. No objections were stated.

Commissioner Marquand asked the audience members to identify themselves and informed them that there would be a sign in sheet so that their presence would be recorded.

Commissioner Marquand reminded the Commission that the business of the commission would be conducted using Robert's Rules of Order and that each member state has two votes, one vote per Commissioner, that Commissioners vote as individuals and that there would be no proxy votes.

Commissioner Marquand asked the commission if there were any changes to the draft agenda. Seeing none, Dr. Jon Thomas (MN) moved for adoption of the agenda. His motion was seconded by Dr. Zachariah (IL). The Commission approved by acclamation.

The Commission then moved into presentations.

Commissioner Mark Bowden (IA) presented an overview of the Interstate Medical Licensure Compact. He began by presenting a timeline of the compact from first meetings on the idea of a compact to the final draft and legislation being released. That timeline ran from January 2013 through September 2014.

Commissioner Bowden remarked that the Interstate Medical Licensure Compact has 6,023 words and twenty-four (24) sections.

Commissioner Bowden noted that the language of the purpose of the compact provides a clearly articulated and consistent desire to create a streamlined approach to licensure portability and clearly defines the practice is where the patient is. He also noted that the language presents a positive and constructive definition for the practice of medicine and that the definitions included set the bar high for standards, expectations, and to hold one another accountable.

Commissioner Bowden noted that the commission must "drill down" on the application process as well as defining the rules and processes of applying.

He noted that the Commission can write rules regarding fees and that the compact recognizes the necessity of fees to serve as the operating budget for the commission.

Commissioner Bowden stated that the commission would be responsible for the creation of a database that tracks those who have been approved for licenses as well as to track all public disciplinary actions or complaints in member states. He also noted that the compact does not supersede state medical boards but rather compliments them.

Commissioner Bowden reminded the commission that rule making allows the commission to run effectively and that the importance of rulemaking to the compact and to the charge to the commission is noted in its importance because it is written into 12 of the 24 sections of the compact. He noted that certain rules are mandated by the compact.

Commissioner Bowden concluded by reminding Commissioners that the compact is a state law and to change it there must be an agreement by the commission and it must be adopted by the member states. He also noted that the compact represents a blueprint of where to go and what is expected and expressed his belief that the commission can make it effective and achieve its purpose.

Commissioner Marquand then asked Mr. Daniel Kelber of Illinois to come forward and present on the Role and Duty of the Commission.

Mr. Kelber stated that the biggest effort of the commission is to write rules. He reminded commissioners that the rules are binding on all states even if a state voted against them, so long as the vote has a majority of votes in the affirmative.

Mr. Kelber noted that the commission must provide for fees for applications and renewal of licenses administered and that the commission must also establish rules for how member state boards provide information on investigations and disciplinary actions, and how that information is then shared.

He noted that per the compact the commission must establish definitions for the designation and redesignation of home state should someone move.

Mr. Kelber continued that the commission must issue advisory opinions to member states upon request and must set up committees as determined by the commission as a whole.

The commission must also raise funds and pay for the activity of the commission as well as hire an executive director and decide on a physical location for the office of the Commission.

The commission must also establish rules for staffing the commission, adopt a seal, and report annually to member state Governors, Legislatures, and Medical Boards. Budgets and audits must be presented annually as well.

Commissioner Marquand thanked Mr. Kelber and invited Commissioner Hansen to present.

Commissioner Margaret "Meg" Hansen (SD) presented on the role of Commissioners. She noted that many of the duties of the Commissioners were outlined in the compact and walked through those duties as stated.

Commissioner Hansen reminded the commission that they had a duty to represent the best interest of the states they were appointed to represent and that each commissioner should feel comfortable asking questions and having those questions answered.

Commissioner Marquand thanked Commissioner Hansen and asked Commissioner Bohnenblust to present.

Commissioner Kevin Bohnenblust (WY) presented on the role of the states and began his presentation by thanking Colmon Elridge, his predecessor Crady DeGolian, and Rick Masters of the Council of State Governments for their work as well as Lisa Robin of the Federation of State Medical Boards.

Commissioner Marquand thanked Commissioner Bohnenblust for his presentation and moved to begin discussion of the draft bylaws.

Commissioner Marquand walked the commission through the draft bylaws and asked, section by section, for comments, suggestions, and any edits.

Commissioner Hansen asked that the document be amended to refer to "commission members" as "commissioners". That change was accepted by the body.

Commissioner Hansen (SD) made a motion that a bylaw committee be appointed. Her motion was seconded by Commissioner Mary Carpenter (SD). Commissioner Knittle (WV) made a motion to table the motion made by Commissioner Hansen until after the election of officers.

Commissioner Edward Cousineau (NV) asked the body to consider adopting the bylaws as a framework and then creating a committee that could make suggestions of where to adjust and amend. Commissioner Hansen withdrew her motion.

Commissioner Marquand noted that the draft bylaws included the addition of the office of Secretary. Commissioner Hansen objected stating that the compact did not allow for the addition. Commissioner Steinagle (UT) noted that there was a provision that implicitly gave the commissioner the authority to create offices as they saw fit. Without objection the office of Secretary remained.

Due to conversation regarding the designation and empowering of an executive committee, Commissioner Zachariah (IL) motioned to strike in entirety Section I entitled Executive Committee of Article VII entitled Committees, of the draft bylaws and replace Section I (Executive Committee) with Section II, entitled Committees. The motion was seconded by Commissioner Jon Thomas (MN) and adopted without objection.

Commissioner William Goetter (AL) moved to adopt the bylaws, as amended. Commissioner Brian Schneider (IL) seconded. The bylaws, as amended, were adopted without objection.

Commissioner Marquand thanked the body and then moved to begin elections of officers. After detailing the offices and duties, Commissioner Marquand informed the Commission that Mr. Elridge had created ballots for each office and that voting would be, per Robert's Rules, by secret ballot.

Commissioner Marquand opened the floor for nominations for the office of Chairperson. Commissioner Jon Thomas (MN) was nominated as was Commissioner Ian Marquand (MT). Commissioner Thomas was given the floor to speak in support of his nomination. At the conclusion of his remarks, Commissioner Marquand spoke in support of his nomination.

On the first ballot there was a tie with 11 votes for both Commissioner Thomas and Commissioner Marquand. On the second ballot, Commissioner Marquand was elected as Chairperson.

Chairman Marquand opened the floor for nominations for the office of Vice-Chairperson. Commissioner Jon Thomas (MN) and Commissioner Brian Zachariah (IL) were nominated.

Chairman Marquand turned the floor to Commissioner Thomas to speak in support of his nomination and at his conclusion Commissioner Zachariah was afforded the opportunity to speak in support of his nomination. Commissioner Jon Thomas (MN) was elected on the first ballot as Vice-Chairperson.

Chairman Marquand then opened the floor for nominations for the office of Secretary. Commissioner Margaret "Meg" Hansen (SD) and Commissioner Diana Shepard (WV) were nominated. Chairman Marquand turned the floor over to Commissioner Hansen to speak in support of her nomination and upon conclusion Commissioner Shepard was afforded the opportunity to speak in support of her nomination. Commissioner Shepard was elected on the first ballot as Secretary.

Chairman Marquand opened the floor for nominations for the office of Treasurer. Commissioner Brian Zachariah (IL) and Commissioner Kenneth Schaecher were nominated. Chairman Marquand turned the floor over to Commissioner Zachariah to speak in support of his nomination and upon conclusion Commissioner Schaecher was afforded the opportunity to speak in support of his nomination. Commissioner Zachariah was elected on the first ballot as Treasurer.

Chairman Marquand moved to postpone discussion of the establishment of committees until after lunch and the motion was approved without objection.

Chairman Marquand then called for a recess for lunch. There were no objections.

The Commission reconvened at 1:05 PM following a break for lunch. Roll call at 1:08 confirmed 100% attendance of all commissioners.

Chairman Marquand asked the Commission to defer the discussion of working committees and move to fiscal discussions. With no objections, Rick Masters and Colmon Elridge led the Commission in a discussion of potential funding sources and budgetary items the Commission would need to consider in their work.

While most funds will come from licensing fees, budgeting will require assured funding sources which may include: 1) a dues assessment, 2) grant monies, 3) flat fees paid by member states, 4) or a hybrid approach using some or all of the sources listed. Budgetary items that must be considered include: 1) accounting, 2) human resources for education and staffing, 3) legislative resources, 4) training and 5) IT services and support. Each individual compact commission must determine which financing model works best for them.

Establishing an implementation plan is crucial. The plan must be developed by prioritizing the services to be provided with the available funding. There has to be a mechanism to track licensing data once licenses are issued, a bank account must be established, an Executive Director should be hired within the first year with other staff as needed. The Council of State

Governments has implementation guidelines that, upon the Commission's approval, can be provided.

The need to incorporate the Commission was discussed. However, for the protection of the Commission as a government body, this was not encouraged. The ability to utilize member states' resources was also discussed as well as review and comparison of other interstate compacts.

Chairman Marquand invited Lisa Robin, the HRSA Grant Administrator from the Federation of State Medical Boards, to speak on the existing HRSA grant for License Portability, its history and possible future funding source for the Commission. The Federation of State Medical Boards has been working with state medical boards on license portability for many years. The Federation applied for and received a HRSA grant in the amount of \$225,446.00 for the Interstate Medical Licensing Project period of July 2015 through June 2016. Application for these grants are issued in the Spring of each year with a submission due date at the end of April. Ms. Robin provided a breakdown of the budget established for the Interstate Compact in 2015-16 as follows:

	<u>Grant Budget</u>	<u>Spent to Date</u>	<u>Amount Remaining</u>
Travel:	\$142,500	\$36,151	\$106,349
Consultant Costs:	57,946		57,946
Personnel:	<u>25,000</u>	<u></u>	<u>25,000</u>
TOTAL	\$225,446	\$36,151	\$189,295

Ms. Robin was asked if the Commission could apply for the HRSA grant in 2016 and whether current grant funds could be re-purposed. She answered affirmatively on each issue. She was also asked if funds are reduced if you don't use them at the end of the project period. She stated the funds could be carried over but the Commission would need to identify how the funds would be used in the future.

Commission members discussed the importance of keeping the commission a separate entity and to keep its sovereign immunity through review of governmental rules and regulations.

Chairman Marquand invited Dr. Ralph Loomis from the Federation of State Medical Boards Foundation for an announcement. Dr. Loomis reported that the Foundation will soon be accepting applications for a total of \$60,000 for individual board members of the Interstate Medical Licensing Compact. Commission members asked Dr. Loomis if the Commission could apply for and distribute the funds? Dr. Loomis will check with the Foundation and respond back to the Commission.

With many questions posed by Commission members regarding timelines, funding, assessments, and implementation, Chairman Marquand recommended the Commission take a fifteen minute break at 2:50 PM and return to set tomorrow's agenda.

The Commissioners returned at 3:05 PM and began to discuss prioritization of committee functions and goals. Commissioners were asked by Chairman Marquand to consider their individual strengths and where and how they could best use those strengths by serving on committees. Chairman Marquand also asked members to think about who the appropriate support staffs and organizations could/should be.

Commissioner Hansen moved, Commissioner Thomas seconded and the Commission approved to request comments from the audience before we adjourned for the day. Some of the comments received included:

- 1) Watch and consider state board fees. Many states have funding issues already and the idea of member board fees may discourage many state legislatures;
- 2) How fast and how soon can a compact license be issued;
- 3) The Commission received support from the American Association of Physician Assistants;
- 4) Will fees increase for non-participating compact physicians?
- 5) States are waiting for timeliness and expediency;
- 6) American Medical Association is in support of the Compact License, but requested clarification of board certification and Maintenance of certification.

Commissioner Thomas urged the Commission to consider why we could not issue the first Interstate Compact License by January 1, 2016. The Commission was recessed for dinner with the meeting to be continued tomorrow morning at 8:30 AM at the Thompson Center, Room 2-025.

**INTERSTATE MEDICAL LICENSING COMPACT  
COMMISSION  
Inaugural Meeting (Continued)  
October 28, 2015**

Chairman Marquand reconvened the Inaugural Meeting of the Interstate Medical Licensing Compact on October 28, 2015, at 8:30 AM in Room 2-025 of the Thompson Center, 100 West Randolph Street, Chicago, Illinois. Roll Call was taken, quorum was established with only Commissioner Schaecher absent. Today's agenda consists of discussion of the workplan, open discussion by the commissioners and time for public comment.

Chairman Marquand asked if the will of the Commission was to get to our tasks this morning or first hear comments from the public. There were no objections to hearing from the public before discussing the workplan.

The Commission heard from the Washington Medical Board, a representative from Telehealth, the Michigan Medical Board, the Vermont Medical Board, the Attorney General from the Missouri Medical Board and the Washington Osteopathic Medical Board. Issues raised included:

- 1) No state assessments;
- 2) Executive Director needed as soon as possible;
- 3) Quick licensing timeline not as important as good licensing process;
- 4) Telehealth companies are different from telehealth providers;
- 5) What the licensing/renewal process will look like;
- 6) Will Maintenance of Certification be required for compact license renewal;
- 7) Some states require physician profile information;
- 8) Information technology costs;
- 9) Transparency on administrative costs;
- 10) Possible funding from Robert Wood Johnson Foundation;
- 11) Rule making process.
- 12) Public access to Commission progress;

The Commission outlined five topics for discussion this morning: 1) Meeting schedule, 2) Committees, 3) Staff Support, 4) Communication; 5) Finance. Commissioner Ward raised the issue of how much and what kind of support the Commission could/should accept from the Council of State Governments and the Federation of State Medical Boards. Commissioner Hansen asked if RFP's should be issued before any work is done. Commissioner Cousineau suggested that there may be a division between start up support and continuation of staff support. That statement was also supported by Commissioner Knittle. Chairman Marquand outlined our work in this way. All five work areas have to work simultaneously, running on the same "track." When we set our next meeting, we have to determine what committee work has to be done before that meeting, what information needs to be brought back to the committee, what staff support is needed to carry out that work, how that information is going to be communicated to members of the Commission and to the public, and how we finance that work. The Commission began by establishing some calendar items and timelines for the work to continue.

Commissioner Thomas challenged the Commission yesterday to consider why we could not issue compact licenses by January 2016. In looking at the amount of work needed from all of the areas mentioned, we agreed that is not very probable. However, it does make us look at what possible deadlines need to be established to move forward.

The best calendar date for the majority of Commissioners was December 18, 2015, with plans to meet again in February and April 2016. The Bylaws make provision for electronic participation if attendance is not possible or for delegation of another Board representative. Commissioner Steinagle offered to host the next meeting of the Commission at the Utah Medical Board Offices in Salt Lake City.

Prior to the next meeting of the Commission, what committees need to be established and what **charge** should be given to each committee? The following committees, membership, chairs and charges were moved by Commissioner Bohnenblust and seconded by Commissioner Smith with unanimous approval.

	<u>Charge</u>	<u>Chair</u>	<u>Members</u>
<b>FUNDING:</b>	Seek alternative forms of funding, sources,	Commissioner Thomas	Commissioner Ward Commissioner Clark

	deadlines.		Commissioner Zachariah Commissioner Smith
<b>BUDGET:</b>	Define budgetary needs for the next six months with FSMB coordination of HRSA grant.	Commissioner Zachariah	Commissioner Knittle Commissioner Feist Commissioner Steinagle
<b>TECHNOLOGY:</b>	Review existing resources and needs by surveying state medical board requirements and current verification sources.	Commissioner Bohnenblust	Commissioner Goetter Commissioner Lawler Commissioner Schneider Commissioner Thomas
<b>BYLAWS/RULES:</b>	Survey member states on needs and potential rules required.. 30 days needed to provide membership with any potential bylaws changes.	Commissioner Bowden	Commissioner Hansen Commissioner Cousineau Commissioner Martinez Commissioner McGill
<b>PERSONNEL:</b>	Job description and potential costs for Executive Director. is available and what functionality is needed.	Commissioner Marquand	Commissioner Knittle Commissioner Longo Commissioner Hansen Commissioner Schneider
<b>COMMUNICATIONS:</b>	<u>Charge</u> Getting information out to public, imaging, what belongs on the website.	<u>Chair</u> Commissioner Hansen	<u>Members</u> Chairman Marquand Secretary Shepard

A motion was made by Commissioner Bohnenblust and seconded by Commissioner Smith to accept all committee assignments

A motion was made by Commissioner Goetter and seconded by Commissioner Smith to designate the Commission Officers to serve as a coordinating committee for the seven approved committees. The motion was unanimously carried.

Committees are asked to conduct their meetings via teleconferencing if at all possible. Committees should have their reports out to the Coordinating Committee by December 4, 2015 and reports should be out to membership by December 11, 2015.

A motion was made by Commissioner Ward and seconded by Commissioner Goetter for Council of State Governments to continue in their role as administrative, legal and policy support as outlined in the HRSA grant during the implementation of the Interstate Medical Licensing Compact Commission. The motion unanimously passed.

Council of State Governments can also act as the communication hub for the Commission during this implementation. Separate dedicated email addresses can be established for Commission members with a dedicated website for the posting of agendas, minutes, reports for public and Commission access. However, for those member states who wish to use their state email addresses, permission is granted for that method of communication. The committee chairs will communicate directly with their members via email. CSG will not need to be involved in that

communication. For other Commission communication, the emails established by CSG will be utilized by the Commissioners.

Motion was made by Commissioner Cousineau and seconded by Commissioner Hansen to mandate all member states to post meeting agendas on their individual websites until such time as the Commission has its own dedicated website. Motion was unanimously passed.

How will answers to external communications be handled? The Coordinating Committee can address direct inquiries from external parties. Regarding general public information requests, CSG as well as FSMB can handle press releases when authorized by the Commission via their current national lists of legislators, governors, judicial branch of government, healthcare entities, etc. No decision regarding press releases were made at the inaugural meeting.

Administrative support in preparing for the December meeting will be handled as follows:

- 1) Travel and lodging will be handled by the Federation of State Medical Boards through HRSA grant funding for those member states requesting they do so;
- 2) Meeting coordination will be handled by Utah Medical Board with support from Council of State Governments.
- 3) The Coordinating Committee will collect the information for the briefing books and get them to CSG for compilation and distribution electronically or in hard copy by request.
- 4) Secretary Shepard requested a decision on the time of posting minutes for public access. A motion was made by Commissioner Smith and seconded by Commissioner Goetter that the minutes not be posted until approved at the following meeting. Discussion followed regarding posting draft minutes as soon as possible and then post approved minutes after the next meeting of the Commission. Commissioner Smith withdrew his original motion and amended it to post draft minutes as soon as possible on CSG website, Administrators in Medicine website, License Portability website and on state member websites. This motion was also seconded by Commissioner Goetter and passed unanimously.

The Commission took a fifteen minute break and reconvened at 10:40 AM. Both Commissioners from Nevada had to exit to catch their flight home.

Chairman Marquand called us to the task of setting timelines. Motion was made by Commissioner Steinagle to set a target date of July 1, 2016 to be ready to accept the first application for an interstate medical license, with the caveat that, if there are significant issues, a delay would be considered. Motion was seconded by Commissioner Carpenter. Discussion ensued regarding the amount of information that will be coming forth at the December Commission meeting which would have great impact on how soon the Commission would be ready to approve a compact license. Motion was made by Commissioner Smith and seconded by Commissioner Feist to table the July 1, 2016, target date until the December meeting. Motion passed with one opposition vote.

Chairman Marquand asked each member state to report back at the December meeting on their state's readiness to implement the compact license.

Thanks were extended to Chairman Marquand for his leadership through this process, to Treasurer Zachariah and the Illinois Board of Medicine for their hosting this inaugural meeting and to the Council of State Governments and the Federation of State Medical Boards for their continued support in this implementation process.

Commissioner Bowden closed by reminding the Commission of its purpose to be united with expedited licensure, healthcare access, patient safety and local accountability.

The floor was once again open for public comment. Issues raised included:

- 1) Make sure the process is clear;
- 2) Emails vs. Webform;
- 3) Public access to Commission meetings;
- 4) Potential IMLC access for allied health;
- 5) Strategic Plan;
- 6) Reach out to state medical associations;
- 7) Thanks for the "heavy lifting."

Commissioner Steinagle offered a motion for adjournment and was seconded by Commissioner Thomas. Motion passed and the Inaugural Meeting of the Interstate Medical Licensing Compact Commission adjourned at 11:20 AM.

Respectfully submitted,

Diana Shepard, CMBE  
Commission Secretary