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134th General Assembly

Regular Session

Sub. S. B. No. 6

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Senators Roegner, Huffman, S.

Cosponsors: Senators Romanchuk, Antonio, Brenner, Cirino, Craig, Fedor, Gavarone, Hackett, Johnson, Kunze, Lang, Maharath, Manning, McColley, Peterson, Reineke, Rulli, Sykes, Thomas, Wilson, Yuko Representatives Cutrona, Carruthers, Click, John, Schmidt, Troy, Brown, Cross, Crossman, Galonski, Gross, Hoops, Lampton, Lanese, LaRe, Leland, Lepore-Hagan, Lightbody, Liston, Miller, A., Miller, J., O'Brien, Patton, Pavliga, Plummer, Roemer, Smith, K., Sobecki, White, Wiggam, Young, T.

A BILL

То	amend sections 3721.28, 3721.31, and 3721.32 and	1
	to enact sections 4731.11, 4731.111, and	2
	4731.112 of the Revised Code to enter into the	3
	Interstate Medical Licensure Compact, to revise	4
	the law governing nurse aide training and	5
	competency evaluation programs, and to make an	6
	appropriation.	7

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3721.28, 3721.31, and 3721.32 be	8
amended and sections 4731.11, 4731.111, and 4731.112 of the	9
Revised Code be enacted to read as follows:	10
Sec. 3721.28. (A)(1) Each nurse aide used by a long-term	11
care facility on a full-time, temporary, per diem, or other	12
basis on July 1, 1989, shall be provided by the facility a	13
competency evaluation program approved by the director of health	14

under division (A) of section 3721.31 of the Revised Code or

conducted by the director under division (C) of that section.

Each long-term care facility using a nurse aide on July 1, 1989,

shall provide the nurse aide the preparation necessary to

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complete the competency evaluation program by January 1, 1990.

- (2) Each nurse aide used by a long-term care facility on a full-time, temporary, per diem, or other basis on January 1, 1990, who either was not used by the facility on July 1, 1989, or was used by the facility on July 1, 1989, but had not successfully completed a competency evaluation program by January 1, 1990, shall be provided by the facility a competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code or conducted by the director under division (C) of that section. Each long-term care facility using a nurse aide described in division (A) (2) of this section shall provide the nurse aide the preparation necessary to complete the competency evaluation program by October 1, 1990, and shall assist the nurse aide in registering for the program.
- (B) Effective June 1, 1990, no long-term care facility shall use an individual as a nurse aide for more than four months unless the individual is competent to provide the services the individual is to provide, the facility has received from the nurse aide registry established under section 3721.32 of the Revised Code the information concerning the individual provided through the registry, and one of the following is the case:
- (1) The individual was used by a facility as a nurse aide 42 on a full-time, temporary, per diem, or other basis at any time 43 during the period commencing July 1, 1989, and ending January 1, 44

1990, and successfully completed, not later than October 1, 1990, a competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code or conducted by the director under division (C) of that section.

- (2) The individual has successfully completed a training and competency evaluation program approved by the director under division (A) of section 3721.31 of the Revised Code or conducted by the director under division (C) of that section or has met the conditions specified in division (F)(F)(1) or (2) of this section and, in addition, if the training and competency evaluation program or the training, instruction, or education the individual completed in meeting the conditions specified in division $\frac{F}{F}(F)$ (1) or (2) of this section was conducted by or in a long-term care facility, or if the director pursuant to division (E) of section 3721.31 of the Revised Code so requires, the individual has successfully completed a competency evaluation program conducted by the director.
- (3) Prior to July 1, 1989, if the long-term care facility is certified as a skilled nursing facility or a nursing facility under Title XVIII or XIX of the "Social Security Act," 49 Stat.
 620 (1935), 42 U.S.C.A. 301, as amended, or prior to January 1,
 1990, if the facility is not so certified, the individual completed a program that the director determines included a competency evaluation component no less stringent than the competency evaluation programs approved by the director under division (A) of section 3721.31 of the Revised Code or conducted by the director under division (C) of that section, and was otherwise comparable to the training and competency evaluation programs being approved by the director under division (A) of that section.

- (4) The individual is listed in a nurse aide registry maintained by another state and that state certifies that its program for training and evaluation of competency of nurse aides complies with Titles XVIII and XIX of the "Social Security Act" and regulations adopted thereunder.
- (5) Prior to July 1, 1989, the individual was found

 competent to serve as a nurse aide after the completion of a

 course of nurse aide training of at least one hundred hours'

 duration.
- of nursing education approved by the board of nursing or by an agency of another state that regulates nursing education, has provided the long-term care facility with a certificate from the program indicating that the individual has successfully completed the courses that teach basic nursing skills including infection control, safety and emergency procedures, and personal care, and has successfully completed a competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code.
- (7) The individual has the equivalent of twelve months or more of full-time employment in the preceding five years as a hospital aide or orderly and has successfully completed a competency evaluation program conducted by the director under division (C) of section 3721.31 of the Revised Code.
- (C) Effective June 1, 1990, no long-term care facility

 shall continue for longer than four months to use as a nurse

 aide an individual who previously met the requirements of

 division (B) of this section but since most recently doing so

 has not performed nursing and nursing-related services for

 monetary compensation for twenty-four consecutive months, unless

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the individual successfully completes additional training and	105
competency evaluation by complying with divisions (C)(1) and (2)	106
of this section:	107
(1) Doing one of the following:	108
(a) Successfully completing a training and competency	109
evaluation program approved by the director under division (A)	110
of section 3721.31 of the Revised Code or conducted by the	111
director under division (C) of that section;	112
(b) Successfully completing a training and competency	113
evaluation program described in division (B)(4) of this section;	114
(c) Meeting the requirements specified in division (B)(6)	115
or (7) of this section.	116
(2) If the training and competency evaluation program	117
completed under division (C)(1)(a) of this section was conducted	118
by or in a long-term care facility, or if the director pursuant	119
to division (E) of section 3721.31 of the Revised Code so	120
requires, successfully completing a competency evaluation	121
program conducted by the director.	122
(D)(1) The four-month periods provided for in divisions	123
(B) and (C) of this section include any time, on or after June	124
1, 1990, that an individual is used as a nurse aide on a full-	125
time, temporary, per diem, or any other basis by the facility or	126
any other long-term care facility.	127
(2) During the four-month period provided for in division	128
(B) of this section, during which a long-term care facility may,	129
subject to division (E) of this section, use as a nurse aide an	130
individual who does not have the qualifications specified in	131
divisions (B)(1) to (7) of this section, a facility shall	132
roquire the individual to comply with divisions (D) (2) (a) and	133

(b) of this section:	134
(a) Participate in one of the following:	135
(i) If the individual has successfully completed a	136
training and competency evaluation program approved by the	137
director under division (A) of section 3721.31 of the Revised	138
Code, and the program was conducted by or in a long-term care	139
facility, or the director pursuant to division (E) of section	140
3721.31 of the Revised Code so requires, a competency evaluation	141
program conducted by the director;	142
(ii) If the individual is enrolled in a prelicensure	143
program of nursing education described in division (B)(6) of	144
this section and has completed or is working toward completion	145
of the courses described in that division, or the individual has	146
the experience described in division (B)(7) of this section, a	147
competency evaluation program conducted by the director;	148
(iii) A training and competency evaluation program	149
approved by the director under division (A) of section 3721.31	150
of the Revised Code or conducted by the director under division	151
(C) of that section.	152
(b) If the individual participates in or has successfully	153
completed a training and competency evaluation program under	154
division (D)(2)(a)(iii) of this section that is conducted by or	155
in a long-term care facility, or the director pursuant to	156
division (E) of section 3721.31 of the Revised Code so requires,	157
participate in a competency evaluation program conducted by the	158
director.	159
(3) During the four-month period provided for in division	160
(C) of this section, during which a long-term care facility may,	161
subject to division (E) of this section, use as a nurse aide an	162

individual who does not have the qualifications specified in	163
divisions (C)(1) and (2) of this section, a facility shall	164
require the individual to comply with divisions (D)(3)(a) and	165
(b) of this section:	166
(a) Participate in one of the following:	167
(i) If the individual has successfully completed a	168
training and competency evaluation program approved by the	169
director, and the program was conducted by or in a long-term	170
care facility, or the director pursuant to division (E) of	171
section 3721.31 of the Revised Code so requires, a competency	172
evaluation program conducted by the director;	173
(ii) If the individual is enrolled in a prelicensure	174
program of nursing education described in division (B)(6) of	175
this section and has completed or is working toward completion	176
of the courses described in that division, or the individual has	177
the experience described in division (B)(7) of this section, a	178
competency evaluation program conducted by the director;	179
(iii) A training and competency evaluation program	180
approved or conducted by the director.	181
(b) If the individual participates in or has successfully	182
completed a training and competency evaluation program under	183
division (D)(3)(a)(iii) of this section that is conducted by or	184
in a long-term care facility, or the director pursuant to	185
division (E) of section 3721.31 of the Revised Code so requires,	186
participate in a competency evaluation program conducted by the	187
director.	188
(E) A long-term care facility shall not permit an	189
individual used by the facility as a nurse aide while	190
participating in a training and competency evaluation program to	191

(a) Has completed during the COVID-19 public health

emergency declared by the United States secretary of health and

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human services a minimum of seventy-five hours of training that	220
occurs in a long-term care facility setting, includes on-site	221
observation and work as a nurse aide under a COVID-19 pandemic	222
waiver issued by the federal centers for medicare and medicaid	223
services, and addresses all of the required areas specified in	224
42 C.F.R. 483.152(b), except that if gaps in on-site training	225
are identified, the individual also must complete supplemental	226
<pre>training;</pre>	227
(b) Has successfully completed the competency evaluation	228
<pre>conducted by the director of health under section 3721.31 of the</pre>	229
Revised Code.	230
(G) The director shall adopt rules in accordance with	231
Chapter 119. of the Revised Code specifying persons, in addition	232
to the director, who may establish competence of nurse aides	233
under division (B)(5) of this section, and establishing criteria	234
for determining whether an individual meets the conditions	235
specified in division $\frac{(F)(F)(1)}{(F)(1)}$ of this section.	236
(H) The rules adopted pursuant to divisions (E)(1) and (G)	237
of this section shall be no less stringent than the	238
requirements, guidelines, and procedures established by the	239
United States secretary of health and human services under	240
sections 1819 and 1919 of the "Social Security Act."	241
Sec. 3721.31. (A)(1) Except as provided in division (E) of	242
this section, the director of health shall approve competency	243
evaluation programs and training and competency evaluation	244
programs in accordance with rules adopted under section 3721.30	245
of the Revised Code and shall periodically review and reapprove	246
programs approved under this section.	247

(2) Except as otherwise provided in division (A)(3) of

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this section, the director may approve and reapprove programs 249 conducted by or in long-term care facilities, or by any 250 government agency or person, including an employee organization. 251

- (3) The director shall not approve or reapprove a 252 competency evaluation program or training and competency 253 evaluation program conducted by or in a long-term care facility 254 that was determined by the director or the United States 255 secretary of health and human services to have been out of 256 compliance with the requirements of subsection (b), (c), or (d) 257 of section 1819 or 1919 of the "Social Security Act," 49 Stat. 258 620 (1935), 42 U.S.C.A. 301, as amended, within a two-year 259 period prior to making application for approval or reapproval 260 and shall revoke the approval or reapproval of a program 261 conducted by or in a facility for which such a determination is 262 made. 263
- (4) A long-term care facility, employee organization, person, or government entity seeking approval or reapproval of a competency evaluation program or training and competency evaluation program shall make an application to the director for approval or reapproval of the program and shall provide any documentation requested by the director.
- (5) The director may conduct inspections and examinations 270 of approved competency evaluation programs and training and 271 competency evaluation programs, competency evaluation programs 272 and training and competency evaluation programs for which an 273 application for approval has been submitted under division (A) 274 (4) of this section, and the sites at which they are or will be 275 conducted. The director may conduct inspections of long-term 276 care facilities in which individuals who have participated in 277 approved competency evaluation programs and training and 278

competency evaluation programs are being used as nurse aides.	279
(B) In accordance with Chapter 119. of the Revised Code,	280
the director may do the following:	281
(1) Deny, suspend, or revoke approval or reapproval of any	282
of the following that is not in compliance with this section and	283
section 3721.30 of the Revised Code and rules adopted	284
thereunder:	285
(a) A competency evaluation program;	286
(b) A training and competency evaluation program;	287
(c) A training program for instructors or coordinators for	288
training and competency evaluation programs;	289
(d) A training program for evaluators for competency	290
evaluation programs.	291
(2) Deny a request that the director determine any of the	292
following for the purposes of division (B) of section 3721.28 of	293
the Revised Code:	294
(a) That a program completed prior to the dates specified	295
in division (B)(3) of section 3721.28 of the Revised Code	296
included a competency evaluation component no less stringent	297
than the competency evaluation programs approved or conducted by	298
the director under this section, and was otherwise comparable to	299
the training and competency evaluation programs being approved	300
under this section;	301
(b) That an individual satisfies division (B)(5) of	302
section 3721.28 of the Revised Code;	303
(c) That an individual meets the conditions specified in	304
division $\frac{(F)(F)(1)}{(F)(1)}$ of section 3721.28 of the Revised	305

Code.

(C) The director may develop and conduct a competency	307
evaluation program for individuals used by long-term care	308
facilities as nurse aides at any time during the period	309
commencing July 1, 1989, and ending January 1, 1990, and	310
individuals who participate in training and competency	311
evaluation programs conducted in or by long-term care	312
facilities. The director also may conduct other competency	313
evaluation programs and training and competency evaluation	314
programs. When conducting competency evaluation programs and	315
training and competency evaluation programs, the director may	316
use a nurse aide competency evaluation prepared by a testing	317
service, and may contract with the service to administer the	318
evaluation pursuant to section 3701.044 of the Revised Code.	319

- (D) The director may approve or conduct programs to train 320 instructors and coordinators for training and competency 321 evaluation programs and evaluators for competency evaluation 322 programs. The director may conduct inspections and examinations 323 of those programs that have been approved by the director or for 324 which an application for approval has been submitted, and the 325 sites at which the programs are or will be conducted. 326
- (E) Notwithstanding division (A) of this section and 327 division (C) of section 3721.30 of the Revised Code, the 328 director, in the director's discretion, may decline to approve 329 any competency evaluation programs. The director may require all 330 individuals used by long-term care facilities as nurse aides 331 after June 1, 1990, who have completed a training and competency 332 evaluation program approved by the director under division (A) 333 of this section or who have met the conditions specified in 334 division $\frac{F}{F}(F)(1)$ or (2) of section 3721.28 of the Revised Code 335

to complete a competency evaluation program conducted by the	336
director under division (C) of this section. The director also	337
may require all individuals used as nurse aides by long-term	338
care facilities after June 1, 1990, who were used by a facility	339
at any time during the period commencing July 1, 1989, and	340
ending January 1, 1990, to complete a competency evaluation	341
program conducted by the director under division (C) of this	342
section rather than a competency evaluation program approved by	343
the director under division (A) of this section.	344
(F) The test materials, examinations, or evaluation tools	345
used in any competency evaluation program or training and	346
competency evaluation program that the director conducts or	347
approves under this section are subject to the confidentiality	348
provisions of section 3701.044 of the Revised Code.	349
(G) The director shall impose fees prescribed by rules	350
adopted under section 3721.30 of the Revised Code for both of	351
the following:	352
(1) Making application for approval or reapproval of	353
either of the following:	354
(a) A competency evaluation program or a training and	355
competency evaluation program;	356
(b) A training program for instructors or coordinators for	357
training and competency evaluation programs, or evaluators for	358
competency evaluation programs;	359
(2) Participation in any competency evaluation program,	360
training and competency evaluation program, or other program	361
conducted by the director under this section.	362
Sec. 3721.32. (A) The director of health shall establish a	363

state nurse aide registry listing all individuals who have done

any of the following:

- (1) Were used by a long-term care facility as nurse aides
 on a full-time, temporary, per diem, or other basis at any time
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 during the period commencing July 1, 1989, and ending January 1,
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 1990, and successfully completed, not later than October 1,
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 1990, a competency evaluation program approved by the director
 under division (A) of section 3721.31 of the Revised Code or
 conducted by the director under division (C) of that section;
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- (2) Successfully completed a training and competency 373 evaluation program approved by the director under division (A) 374 of section 3721.31 of the Revised Code or met the conditions 375 specified in division $\frac{(F)(F)(1)}{(F)(1)}$ or $\frac{(2)}{(2)}$ of section 3721.28 of the 376 Revised Code, and, if the training and competency evaluation 377 program or the training, instruction, or education the 378 individual completed in meeting the conditions specified in 379 division $\frac{F}{F}(F)$ (1) of section 3721.28 of the Revised Code was 380 conducted in or by a long-term care facility, or if the director 381 so required pursuant to division (E) of section 3721.31 of the 382 Revised Code, has successfully completed a competency evaluation 383 384 program conducted by the director;
- (3) Successfully completed a training and competency

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 evaluation program conducted by the director under division (C)

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 of section 3721.31 of the Revised Code;

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- (4) Successfully completed, prior to July 1, 1989, a 388 program that the director has determined under division (B)(3) 389 of section 3721.28 of the Revised Code included a competency 390 evaluation component no less stringent than the competency 391 evaluation programs approved or conducted by the director under 392 section 3721.31 of the Revised Code, and was otherwise 393 comparable to the training and competency evaluation program 394

being approved by the director under section 3721.31 of the	395
Revised Code;	396
(5) Are listed in a nurse aide registry maintained by	397
another state that certifies that its program for training and	398
evaluation of competency of nurse aides complies with Titles	399
XVIII and XIX of the "Social Security Act," 49 Stat. 620 (1935),	400
42 U.S.C.A. 301, as amended, or regulations adopted thereunder;	401
(6) Were found competent, as provided in division (B)(5)	402
of section 3721.28 of the Revised Code, prior to July 1, 1989,	403
after the completion of a course of nurse aide training of at	404
least one hundred hours' duration;	405
(7) Are enrolled in a prelicensure program of nursing	406
education approved by the board of nursing or by an agency of	407
another state that regulates nursing education, have provided	408
the long-term care facility with a certificate from the program	409
indicating that the individual has successfully completed the	410
courses that teach basic nursing skills including infection	411
control, safety and emergency procedures, and personal care, and	412
have successfully completed a competency evaluation program	413
conducted by the director under division (A) of section 3721.31	414
of the Revised Code;	415
(8) Have the equivalent of twelve months or more of full-	416
time employment in the five years preceding listing in the	417
registry as a hospital aide or orderly and have successfully	418
completed a competency evaluation program conducted by the	419
director under division (C) of section 3721.31 of the Revised	420
Code.	421
(B) In addition to the list of individuals required by	422
division (A) of this section, the registry shall include both of	423

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SECTION 1. PURPOSE	452
In order to strengthen access to health care, and in	453
recognition of the advances in the delivery of health care, the	454
member states of the Interstate Medical Licensure Compact have	455
allied in common purpose to develop a comprehensive process that	456
complements the existing licensing and regulatory authority of	457
state medical boards, provides a streamlined process that allows	458
physicians to become licensed in multiple states, thereby	459
enhancing the portability of a medical license and ensuring the	460
safety of patients. The Compact creates another pathway for	461
licensure and does not otherwise change a state's existing	462
Medical Practice Act. The Compact also adopts the prevailing	463
standard for licensure and affirms that the practice of medicine	464
occurs where the patient is located at the time of the	465
physician-patient encounter, and therefore, requires the	466
physician to be under the jurisdiction of the state medical	467
board where the patient is located. State medical boards that	468
participate in the Compact retain the jurisdiction to impose an	469
adverse action against a license to practice medicine in that	470
state issued to a physician through the procedures in the	471
Compact.	472
SECTION 2. DEFINITIONS	473
<pre>In this compact:</pre>	474
(a) "Bylaws" means those bylaws established by the	475
Interstate Commission pursuant to Section 11.	476
(b) "Commissioner" means the voting representative	477
appointed by each member board pursuant to Section 11.	478
(c) "Conviction" means a finding by a court that an	479
individual is guilty of a criminal offense through adjudication,	480

or entry of a plea of guilt or no contest to the charge by the	481
offender. Evidence of an entry of a conviction of a criminal	482
offense by the court shall be considered final for purposes of	483
disciplinary action by a member board.	484
(d) "Expedited License" means a full and unrestricted	485
medical license granted by a member state to an eligible	486
physician through the process set forth in the Compact.	487
(e) "Interstate Commission" means the interstate	488
commission created pursuant to Section 11.	489
(f) "License" means authorization by a member state for a	490
physician to engage in the practice of medicine, which would be	491
unlawful without authorization.	492
(g) "Medical Practice Act" means laws and regulations	493
governing the practice of allopathic and osteopathic medicine	494
within a member state.	495
(h) "Member Board" means a state agency in a member state	496
that acts in the sovereign interests of the state by protecting	497
the public through licensure, regulation, and education of	498
physicians as directed by the state government.	499
(i) "Member State" means a state that has enacted the	500
Compact.	501
(j) "Practice of Medicine" means that clinical prevention,	502
diagnosis, or treatment of human disease, injury, or condition	503
requiring a physician to obtain and maintain a license in	504
compliance with the Medical Practice Act of a member state.	505
(k) "Physician" means any person who:	506
1) Is a graduate of a medical school accredited by	507
the Liaison Committee on Medical Education, the Commission on	508

Osteopathic College Accreditation, or a medical school listed in	509
the International Medical Education Directory or its equivalent;	510
2) Passed each component of the United State Medical_	511
Licensing Examination (USMLE) or the Comprehensive Osteopathic	512
Medical Licensing Examination (COMLEX-USA) within three	513
attempts, or any of its predecessor examinations accepted by a	514
state medical board as an equivalent examination for licensure	515
purposes;	516
3) Successfully completed graduate medical education	517
approved by the Accreditation Council for Graduate Medical	518
Education or the American Osteopathic Association;	519
4) Holds specialty certification or a time-unlimited	520
specialty certificate recognized by the American Board of	521
Medical Specialties or the American Osteopathic Association's	522
Bureau of Osteopathic Specialists;	523
5) Possesses a full and unrestricted license to	524
engage in the practice of medicine issued by a member board;	525
6) Has never been convicted, received adjudication,	526
deferred adjudication, community supervision, or deferred	527
disposition for any offense by a court of appropriate	528
jurisdiction;	529
7) Has never held a license authorizing the practice	530
of medicine subjected to discipline by a licensing agency in any	531
state, federal, or foreign jurisdiction, excluding any action	532
related to non-payment of fees related to a license;	533
8) Has never had a controlled substance license or	534
permit suspended or revoked by a state or the United States Drug	535
Enforcement Administration; and	536

9) Is not under active investigation by a licensing	537
agency or law enforcement authority in any state, federal, or	538
foreign jurisdiction.	539
(l) "Offense" means a felony, gross misdemeanor, or crime	540
of moral turpitude.	541
(m) "Rule" means a written statement by the Interstate	542
Commission promulgated pursuant to Section 12 of the Compact	543
that is of general applicability, implements, interprets, or	544
prescribes a policy or provision of the Compact, or an	545
organizational, procedural, or practice requirement of the	546
Interstate Commission, and has the force and effect of statutory	547
law in a member state, and includes the amendment, repeal, or	548
suspension of an existing rule.	549
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(n) "State" means any state, commonwealth, district, or	550
territory of the United States.	551
(o) "State of Principal License" means a member state	552
where a physician holds a license to practice medicine and which	553
has been designated as such by the physician for purposes of	554
registration and participation in the Compact.	555
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SECTION 3. ELIGIBILITY	556
(a) A physician must meet the eligibility requirements as	557
defined in Section 2(k) to receive an expedited license under	558
the terms and provisions of the Compact.	559
	F.60
(b) A physician who does not meet the requirements of	560
Section 2(k) may obtain a license to practice medicine in a	561
member state if the individual complies with all laws and	562
requirements, other than the Compact, relating to the issuance	563
of a license to practice medicine in that state.	564

SECTION 4. DESIGNATION OF STATE OF PRINCIPAL LICENSE	565
(a) A physician shall designate a member state as the	566
state of principal license for purposes of registration for	567
expedited licensure through the Compact if the physician	568
possesses a full and unrestricted license to practice medicine	569
in that state, and the state is:	570
1) The state of principal residence for the	571
physician, or	572
2) The state where at least 25% of the practice of	573
medicine occurs, or	574
3) The location of the physician's employer, or	575
4) If no state qualifies under subsection (1),	576
subsection (2), or subsection (3), the state designated as state	577
of residence for purpose of federal income tax.	578
(b) A physician may redesignate a member state as state of	579
principal license at any time, as long as the state meets the	580
requirements of subsection (a).	581
(c) The Interstate Commission is authorized to develop	582
rules to facilitate redesignation of another member state as the	583
state of principal license.	584
SECTION 5. APPLICATION AND ISSUANCE OF EXPEDITED LICENSURE	585
(a) A physician seeking licensure through the Compact	586
shall file an application for an expedited license with the	587
member board of the state selected by the physician as the state	588
of principal license.	589
(b) Upon receipt of an application for an expedited	590
license the member hoard within the state selected as the state	5 9 1

of principal license shall evaluate whether the physician is	592
eligible for expedited licensure and issue a letter of	593
qualification, verifying or denying the physician's eligibility,	594
to the Interstate Commission.	595
1) Static qualifications, which include verification_	596
of medical education, graduate medical education, results of any	597
medical or licensing examination, and other qualifications as	598
determined by the Interstate Commission through rule, shall not	599
be subject to additional primary source verification where	600
already primary source verified by the state of principal	601
license.	602
2) The member board within the state selected as the	603
state of principal license shall, in the course of verifying	604
eligibility, perform a criminal background check of an	605
applicant, including the use of the results of fingerprint or	606
other biometric data checks compliant with the requirements of	607
the Federal Bureau of Investigation, with the exception of	608
federal employees who have suitability determination in	609
accordance with 5 C.F.R. §731.202.	610
3) Appeal on the determination of eligibility shall	611
be made to the member state where the application was filed and	612
shall be subject to the law of that state.	613
(c) Upon verification in subsection (b), physicians	614
eligible for an expedited license shall complete the	615
registration process established by the Interstate Commission to	616
receive a license in a member state selected pursuant to	617
subsection (a), including the payment of any applicable fees.	618
(d) After receiving verification of eligibility under	619
subsection (b) and any fees under subsection (c), a member board	620

shall issue an expedited license to the physician. This license	621
shall authorize the physician to practice medicine in the	622
issuing state consistent with the Medical Practice Act and all	623
applicable laws and regulations of the issuing member board and	624
<pre>member state.</pre>	625
(e) An expedited license shall be valid for a period	626
consistent with the licensure period in the member state and in	627
the same manner as required for other physicians holding a full	628
and unrestricted license within the member state.	629
(f) An expedited license obtained through the Compact	630
shall be terminated if a physician fails to maintain a license	631
in the state of principal licensure for a non disciplinary	632
reason, without redesignation of a new state of principal	633
licensure.	634
(g) The Interstate Commission is authorized to develop	635
rules regarding the application process, including payment of	636
any applicable fees, and the issuance of an expedited license.	637
SECTION 6. FEES FOR EXPEDITED LICENSURE	638
(a) A member state issuing an expedited license	639
authorizing the practice of medicine in that state may impose a	640
fee for a license issued or renewed through the Compact.	641
(b) The Interstate Commission is authorized to develop	642
rules regarding fees for expedited licenses.	643
SECTION 7. RENEWAL AND CONTINUED PARTICIPATION	644
(a) A physician seeking to renew an expedited license	645
granted in a member state shall complete a renewal process with	646
the Interstate Commission if the physician:	647
1) Maintains a full and unrestricted license in a	648

state of principal license;	649
2) Has not been convicted, received adjudication,	650
deferred adjudication, community supervision, or deferred	651
disposition for any offense by a court of appropriate	652
jurisdiction;	653
3) Has not had a license authorizing the practice of	654
medicine subject to discipline by a licensing agency in any	655
state, federal, or foreign jurisdiction, excluding any action	656
related to non-payment of fees related to a license; and	657
4) Has not had a controlled substance license or	658
permit suspended or revoked by a state or the United States Drug	659
Enforcement Administration.	660
(b) Physicians shall comply with all continuing	661
professional development or continuing medical education	662
requirements for renewal of a license issued by a member state.	663
(c) The Interstate Commission shall collect any renewal	664
fees charged for the renewal of a license and distribute the	665
fees to the applicable member board.	666
(d) Upon receipt of any renewal fees collected in	667
subsection (c), a member board shall renew the physician's	668
license.	669
(e) Physician information collected by the Interstate	670
Commission during the renewal process will be distributed to all	671
member boards.	672
(f) The Interstate Commission is authorized to develop	673
rules to address renewal of licenses obtained through the	674
Compact.	675
SECTION 8. COORDINATED INFORMATION SYSTEM	676

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(a) The Interstate Commission shall establish a database	677
of all physicians licensed, or who have applied for licensure,	678
under Section 5.	679
(b) Notwithstanding any other provision of law, member_	680
boards shall report to the Interstate Commission any public	681
action or complaints against a licensed physician who has	682
applied or received an expedited license through the Compact.	683
(c) Member boards shall report disciplinary or	684
investigatory information determined as necessary and proper by	685
rule of the Interstate Commission.	686
(d) Member boards may report any non-public complaint,	687
disciplinary, or investigatory information not required by	688
subsection (c) to the Interstate Commission.	689
(e) Member boards shall share complaint or disciplinary	690
information about a physician upon request of another member	691
board.	692
(f) All information provided to the Interstate Commission	693
or distributed by member boards shall be confidential, filed	694
under seal, and used only for investigatory or disciplinary	695
<pre>matters.</pre>	696
(g) The Interstate Commission is authorized to develop	697
rules for mandated or discretionary sharing of information by	698
member boards.	699
SECTION 9. JOINT INVESTIGATIONS	700
(a) Licensure and disciplinary records of physicians are	701
deemed investigative.	702
(b) In addition to the authority granted to a member board	703
by its respective Medical Practice Act or other applicable state	704

law, a member board may participate with other member boards in	705
joint investigations of physicians licensed by the member	706
boards.	707
(c) A subpoena issued by a member state shall be	708
enforceable in other member states.	709
(d) Member boards may share any investigative, litigation,	710
or compliance materials in furtherance of any joint or	711
individual investigation initiate under the Compact.	712
(e) Any member state may investigate actual or alleged	713
violations of the statutes authorizing the practice of medicine	714
in any other member state in which a physician holds a license	715
to practice medicine.	716
SECTION 10. DISCIPLINARY ACTIONS	717
(a) Any disciplinary action taken by any member board	718
against a physician licensed through the Compact shall be deemed	719
unprofessional conduct which may be subject to discipline by	720
other member boards, in addition to any violation of the Medical	721
Practice Act or regulations in that state.	722
(b) If a license granted to a physician by the member	723
board in the state of principal license is revoked, surrendered	724
or relinquished in lieu of discipline, or suspended, then all	725
licenses issued to the physician by member boards shall	726
automatically be placed, without further action necessary by any	727
member board, on the same status. If the member board in the	728
state of principal license subsequently reinstates the	729
physician's license, a license issued to the physician by any	730
other member board shall remain encumbered until that respective	731
member board takes action to reinstate the license in a manner	732
consistent with the Medical Practice Act of that state.	733

(c) If disciplinary action is taken against a physician by	734
a member board not in the state of principal license, any other	735
member board may deem the action conclusive as to matter of law	736
and fact decided, and:	737
1) Impose the same or lesser sanction(s) against the_	738
physician so long as such sanctions are consistent with the	739
Medical Practice Act of that state; or	740
2) Dungue generate disciplinant action escinat the	7.41
2) Pursue separate disciplinary action against the	741
physician under its respective Medical Practice Act, regardless	742
of the action taken in other member states.	743
(d) If a license granted to a physician by a member board	744
is revoked, surrendered or relinquished in lieu of discipline,	745
or suspended, then any license(s) issued to the physician by any	746
other member board(s) shall be suspended, automatically and	747
immediately without further action necessary by the other member	748
board(s), for ninety (90) days upon entry of the order by the	749
disciplining board, to permit the member board(s) to investigate	750
the basis for the action under the Medical Practice Act of that	751
state. A member board may terminate the automatic suspension of	752
the license it issued prior to the completion of the ninety (90)	753
day suspension period in a manner consistent with the Medical	754
Practice Act of that state.	755
SECTION 11. INTERSTATE MEDICAL LICENSURE COMPACT	756
COMMISSION	757
(a) The member states bench, exects the UTntenstate	750
(a) The member states hereby create the "Interstate	758
Medical Licensure Compact Commission".	759
(b) The purpose of the Interstate Commission is the	760
administration of the Interstate Medical Licensure Compact,	761
which is a discretionary state function.	762

(c) The Interstate Commission shall be a body corporate	763
and joint agency of the member states and shall have all the	764
responsibilities, powers, and duties set forth in the Compact,	765
and such additional powers as may be conferred upon it by a	766
subsequent concurrent action of the respective legislatures of	767
the member states in accordance with the terms of the Compact.	768
(d) The Interstate Commission shall consist of two voting	769
representatives appointed by each member state who shall serve	770
as Commissioners. In states where allopathic and osteopathic	771
physicians are regulated by separate member boards, or if the	772
licensing and disciplinary authority is split between separate	773
member boards, or if the licensing and disciplinary authority is	774
split between multiple member boards within a member state, the	775
member state shall appoint one representative from each member	776
board. A Commissioner shall be a(n):	777
1) Allopathic or osteopathic physician appointed to a	778
member board;	779
2) Executive director, executive secretary, or	780
similar executive of a member board; or	781
3) Member of the public appointed to a member board.	782
(e) The Interstate Commission shall meet at least once	783
each calendar year. A portion of this meeting shall be a	784
business meeting to address such matters as may properly come	785
before the Commission, including the election of officers. The	786
chairperson may call additional meetings and shall call for a	787
meeting upon the request of a majority of the member states.	788
(f) The bylaws may provide for meetings of the Interstate	789
Commission to be conducted by telecommunication or electronic	790
communication	791

(g) Each Commissioner participating at a meeting of the	792
Interstate Commission is entitled to one vote. A majority of	793
Commissioners shall constitute a quorum for the transaction of	794
ousiness, unless a larger quorum is required by the bylaws of	795
the Interstate Commission. A Commission shall not delegate a	796
vote to another Commissioner. In the absence of its	797
Commissioner, a member state may delegate voting authority for a	798
specified meeting to another person from that state who shall	799
meet the requirements of subsection (d).	800
(h) The Interstate Commission shall provide public notice	801
of all meetings and all meetings shall be open to the public.	802
The Interstate Commission may close a meeting, in full or in	803
portion, where it determines by a two-thirds vote of the	804
Commissioners present that an open meeting would be likely to:	805
1) Relate solely to the internal personnel practice	806
and procedures of the Interstate Commission;	807
2) Discuss matters specifically exempted from	808
disclosure by federal statute;	809
3) Discuss trade secrets, commercial, or financial	810
information that is privileged or confidential;	811
4) Involve accusing a person of a crime, or formally	812
censuring a person;	813
5) Discuss information of a personal nature where	814
disclosure would constitute a clearly unwarranted invasion of	815
personal privacy;	816
6) Discuss investigative records compiled for law_	817
enforcement purposes; or	818
	010
7) Specifically relate to the participation in a	819

civil action or other legal proceeding.	820
(i) The Interstate Commission shall keep minutes which	821
shall fully describe all matters discussed in a meeting and	822
shall provide a full and accurate summary of actions taken,	823
including record of any roll call votes.	824
(j) The Interstate Commission shall make its information	825
and official records, to the extent not otherwise designated in	826
the Compact or by its rules, available to the public for	827
inspection.	828
(k) The Interstate Commission shall establish an executive	829
committee, which shall include officers, members, and others as	830
determined by the bylaws. The executive committee shall have the	831
power to act on behalf of the Interstate Commission, with the	832
exception of rulemaking, during periods when the Interstate	833
Commission is not in session. When acting on behalf of the	834
Interstate Commission, the executive committee shall oversee the	835
administration of the Compact including enforcement and	836
compliance with the provisions of the Compact, its bylaws and	837
rules, and other such duties as necessary.	838
(1) The Interstate Commission shall establish other	839
committees for governance and administration of the Compact.	840
SECTION 12. POWERS AND DUTIES OF THE INTERSTATE COMMISSION	841
(a) Oversee and maintain the administration of the	842
<pre>Compact;</pre>	843
(b) Promulgate rules which shall be binding to the extent	844
and in the manner provided for in the Compact;	845
(c) Issue, upon the request of a member state or member	846
board, advisory opinions concerning the meaning or	847

interpretation of the Compact, its bylaws, rules, and actions;	848
(d) Enforce compliance with Compact provisions, the rules	849
promulgated by the Interstate Commission, and the bylaws, using	850
all necessary and proper means, including but not limited to the	851
use of judicial process;	852
(e) Establish and appoint committees including, but not	853
limited to, an executive committee as required by Section 11,	854
which shall have the power to act on behalf of the Interstate	855
Commission in carrying out its powers and duties;	856
(f) Pay, or provide for the payment of the expenses	857
related to the establishment, organization, and ongoing	858
activities of the Interstate Commission;	859
(g) Establish and maintain one or more offices;	860
(h) Borrow, accept, hire, or contract for services of	861
<pre>personnel;</pre>	862
(i) Purchase and maintain insurance and bonds;	863
(j) Employ an executive director who shall have such	864
powers to employ, select or appoint employees, agents, or	865
consultants, and to determine their qualifications, define their	866
duties, and fix their compensation;	867
(k) Establish personnel policies and programs relating to	868
conflicts of interest, rates of compensation, and qualifications	869
<pre>of personnel;</pre>	870
(1) Accept donations and grants of money, equipment,	871
supplies, materials, and services and to receive, utilize, and	872
dispose of it in a manner consistent with the conflict of	873
interest policies established by the Interstate Commission;	874

(m) Lease, purchase, accept contributions or donations of,	875
or otherwise to own, hold, improve or use, any property, real,	876
personal, or mixed;	877
(n) Sell, convey, mortgage, pledge, lease, exchange,	878
abandon, or otherwise dispose of any property, real, personal,	879
or mixed;	880
(o) Establish a budget and make expenditures;	881
(p) Adopt a seal and bylaws governing the management and	882
operation of the Interstate Commission;	883
(q) Report annually to the legislatures and governors of	884
the member states concerning the activities of the Interstate	885
Commission during the preceding year. Such reports shall also	886
include reports of financial audits and any recommendations that	887
may have been adopted by the Interstate Commission;	888
(r) Coordinate education, training, and public awareness	889
regarding the Compact, its implementation, and its operation;	890
(s) Maintain records in accordance with the bylaws;	891
(t) Seek and obtain trademarks, copyrights, and patents;	892
and	893
(u) Perform such functions as may be necessary or	894
appropriate to achieve the purpose of the Compact.	895
SECTION 13. FINANCE POWERS	896
(a) The Interstate Commission may levy on and collect an	897
annual assessment from each member state to cover the cost of	898
the operations and activities of the Interstate Commission and	899
its staff. The total assessment must be sufficient to cover the	900
annual hudget approved each year for which revenue is not	901

provided by other sources. The aggregate annual assessment	902
amount shall be allocated upon a formula to be determined by the	903
Interstate Commission, which shall promulgate a rule binding	904
upon all member states.	905
(b) The Interstate Commission shall not incur obligations	906
of any kind prior to securing the funds adequate to meet the	907
same.	908
(c) The Interstate Commission shall not pledge the credit	909
of any of the member states, except by, and with the authority	910
of, the member state.	911
(d) The Interstate Commission shall be subject to a yearly	912
financial audit conducted by a certified or licensed accountant	913
and the report of the audit shall be included in the annual	914
report of the Interstate Commission.	915
SECTION 14. ORGANIZATION AND OPERATION OF THE INTERSTATE	916
COMMISSION	917
(a) The Interstate Commission shall, by a majority of	918
Commissioners present and voting, adopt bylaws to govern its	919
conduct as may be necessary or appropriate to carry out the	920
purposes of the Compact within twelve (12) months of the first	921
<u>Interstate Commission meeting.</u>	922
(b) The Interstate Commission shall elect or appoint	923
annually from among its Commissioners a chairperson, a vice-	924
chairperson, and a treasurer, each of whom shall have such	925
authority and duties as may be specified in the bylaws. The	926
chairperson, or in the chairperson's absence or disability, the	927
vice-chairperson, shall preside at all meetings of the	928
<u>Interstate Commission.</u>	929
(c) Officers selected in subsection (b) shall serve	930

without remuneration for the Interstate Commission.	931
(d) The officers and employees of the Interstate	932
Commission shall be immune from suit and liability, either	933
personally or in their official capacity, for a claim for damage	934
to or loss of property or personal injury or other civil	935
liability caused or arising out of, or relating to, an actual or	936
alleged act, error, or omission that occurred, or that such	937
person had a reasonable basis for believing occurred, within the	938
scope of Interstate Commission employment, duties, or	939
responsibilities; provided that such person shall not be	940
protected from suit or liability for damage, loss, injury, or	941
liability caused by the intentional or willful and wanton	942
misconduct of such person.	943
(e) The liability of the executive director and employees	944
of the Interstate Commission or representatives of the	945
Interstate Commission, acting within the scope of such person's	946
employment or duties for acts, errors, or omissions occurring	947
within such person's state, may not exceed the limits of	948
liability set forth under the constitution and laws of that	949
state for state officials, employees, and agents. The Interstate	950
Commission is considered to be an instrumentality of the states	951
for the purpose of any such action. Nothing in this subsection	952
shall be construed to protect such person from suit or liability	953
for damage, loss, injury, or liability caused by the intentional	954
or willful and wanton misconduct of such person.	955
(f) The Interstate Commission shall defend the executive	956
director, its employees, and subject to the approval of the	957
attorney general or other appropriate legal counsel of the	958
member state represented by an Interstate Commission	959
representative, shall defend such Interstate Commission	960

representative in any civil action seeking to impose liability	961
arising out of an actual or alleged act, error or omission that	962
occurred within the scope of Interstate Commission employment,	963
duties or responsibilities, or that the defendant had a	964
reasonable basis for believing occurred within the scope of	965
Interstate Commission employment, duties, or responsibilities,	966
provided that the actual or alleged act, error, or omission did	967
not result from intentional or willful and wanton misconduct on	968
the part of such person.	969
(q) To the extent not covered by the state involved,	970
member state, or the Interstate Commission, the representatives	971
or employees of the Interstate Commission shall be held harmless	972
in the amount of a settlement or judgement, including attorney's	973
fees and costs, obtained against such persons arising out of an	974
actual or alleged act, error, or omission that occurred within	975
the scope of the Interstate Commission employment, duties, or	976
responsibilities, or that such persons had a reasonable basis	977
for believing occurred within the scope of Interstate Commission	978
employment, duties, or responsibilities, provided that the	979
actual or alleged act, error, or omission did not result from	980
intentional or willful and wanton misconduct on the part of such	981
person.	982
SECTION 15. RULEMAKING FUNCTIONS OF THE INTERSTATE	983
COMMISSION	984
(a) The Interstate Commission shall promulgate reasonable	985
rules in order to effectively and efficiently achieve the	986
purpose of the Compact. Notwithstanding the foregoing, in the	987
event the Interstate Commission exercises its rulemaking	988
authority in a manner that is beyond the scope of the purposes	989
of the Compact, or the powers granted hereunder, then such an	990

<u>action by the Interstate Commission shall be invalid and have no</u>	991
<pre>force or effect.</pre>	992
(b) Rules deemed appropriate for the operations of the	993
Interstate Commission shall be made pursuant to a rulemaking	994
process that substantially conforms to the "Model State	995
Administrative Procedure Act" of 2010, and subsequent amendments	996
thereto.	997
(c) Not later than thirty (30) days after a rule is	998
promulgated, any person may file a petition for judicial review	999
of the rule in the United States District Court for the District	1000
of Columbia or the federal district where the Interstate	1001
Commission has its principal offices, provided that the filing	1002
of such a petition shall not stay or otherwise prevent the rule	1003
from becoming effective unless the court finds that the	1004
petitioner has a substantial likelihood of success. The court	1005
shall give deference to the actions of the Interstate Commission	1006
consistent with applicable law and shall not find the rule to be	1007
unlawful if the rule represents a reasonable exercise of the	1008
authority granted to the Interstate Commission.	1009
SECTION 16. OVERSIGHT OF INTERSTATE COMPACT	1010
(a) The executive, legislative, and judicial branches of	1011
state government in each member state shall enforce the Compact	1012
and shall take all actions necessary and appropriate to	1013
effectuate the Compact's purposes and intent. The provisions of	1014
the Compact and the rules promulgated hereunder shall have	1015
standing as statutory law but shall not override existing state	1016
authority to regulate the practice of medicine.	1017
(b) All courts shall take judicial notice of the Compact	1018
and the rules in any judicial or administrative proceeding in a	1019

member state pertaining to the subject matter of the Compact	1020
which may affect the powers, responsibilities or actions of the	1021
<u>Interstate Commission.</u>	1022
(a) The Interestate Commission shall be entitled to receive	1023
(c) The Interstate Commission shall be entitled to receive	
all services of process in any such proceeding, and shall have	1024
standing to intervene in the proceeding for all purposes.	1025
Failure to provide service of process to the Interstate	1026
Commission shall render a judgment or order void as to the	1027
Interstate Commission, the Compact, or promulgated rules.	1028
SECTION 17. ENFORCEMENT OF INTERSTATE COMPACT	1029
(a) The Interstate Commission, in the reasonable exercise	1030
of its discretion, shall enforce the provisions and rules of the	1031
Compact.	1032
(b) The Interstate Commission may, by majority vote of the	1033
Commissioners, initiate legal action in the United States Court	1034
for the District of Columbia, or, at the discretion of the	1035
Interstate Commission, in the federal district where the	1036
Interstate Commission has its principal offices, to enforce	1037
compliance with the provisions of the Compact, and its	1038
promulgated rules and bylaws, against a member state in default.	1039
The relief sought may including both injunctive relief and	1040
damages. In the event judicial enforcement is necessary, the	1041
prevailing party shall be awarded all costs of such litigation	1042
<pre>including reasonable attorney's fees.</pre>	1043
(c) The remedies herein shall not be the exclusive	1044
remedies of the Interstate Commission. The Interstate Commission	1045
may avail itself of any other remedies available under state law	1046
or regulation of a profession.	1047
SECTION 18. DEFAULT PROCEDURES	1048

(a) The grounds for default include, but are not limited	1049
to, failure of a member state to perform such obligations or	1050
responsibilities imposed upon it by the Compact, or the rules	1051
and bylaws of the Interstate Commission promulgated under the	1052
Compact.	1053
(b) If the Interstate Commission determines that a member	1054
state has defaulted in the performance of its obligations or	1055
responsibilities under the Compact, or the bylaws or promulgated	1056
rules, the Interstate Commission shall:	1057
1) Provide written notice to the defaulting state and_	1058
other member states, of the nature of the default, the means of	1059
curing the default, and any action taken by the Interstate	1060
Commission. The Interstate Commission shall specify the	1061
conditions by which the defaulting state must cure its default;	1062
<u>and</u>	1063
2) Provide remedial training and specific technical_	1064
assistance regarding the default.	1065
(c) If the defaulting state fails to cure the default, the	1066
defaulting state shall be terminated from the Compact upon an	1067
affirmative vote of a majority of the Commissioners and all	1068
rights, privileges, and benefits conferred by the Compact shall	1069
terminate on the effective date of termination. A cure of the	1070
default does not relieve the offending state of obligations or	1071
liabilities incurred during the period of the default.	1072
(d) Termination of membership in the Compact shall be	1073
imposed only after all other means of securing compliance have	1074
been exhausted. Notice of intent to terminate shall be given by	1075
the Interstate Commission to the governor, the majority and	1076
minority leaders of the defaulting state's legislature, and each	1077

of the member states.	1078
(e) The Interstate Commission shall establish rules and	1079
procedures to address licenses and physicians that are	1080
materially impacted by the termination of a member state, or the	1081
withdrawal of a member state.	1082
(f) The member state which has been terminated is	1083
responsible for all due, obligations, and liabilities incurred	1084
through the effective date of termination including obligations,	1085
the performance of which extends beyond the effective date of	1086
termination.	1087
(q) The Interstate Commission shall not bear any costs	1088
relating to any state that has been found to be in default or	1089
which has been terminated from the Compact, unless otherwise	1090
mutually agreed upon in writing between the Interstate	1091
Commission and the defaulting state.	1092
(h) The defaulting state may appeal the action of the	1093
Interstate Commission by petitioning the United States District	1094
Court for the District of Columbia or the federal district where	1095
the Interstate Commission has its principal offices. The	1096
prevailing party shall be awarded all costs of such litigation	1097
<pre>including reasonable attorney's fees.</pre>	1098
SECTION 19. DISPUTE RESOLUTION	1099
(a) The Interstate Commission shall attempt, upon the	1100
request of a member state, to resolve disputes which are subject	1101
to the Compact and which may arise among member states or member	1102
boards.	1103
(b) The Interstate Commission shall promulgate rules	1104
providing for both mediation and binding dispute resolution as	1105
appropriate.	1106

SECTION 20. MEMBER STATES, EFFECTIVE DATE AND AMENDMENT	1107
(a) Any state is eligible to become a member of the	1108
Compact.	1109
(b) The Compact shall become effective and binding upon	1110
legislative enactment of the Compact into law by no less than	1111
seven (7) states. Thereafter, it shall become effective and	1112
binding on a state upon enactment of the Compact into law by	1113
that state.	1114
(c) The governors of non-member states, or their	1115
designees, shall be invited to participate in the activities of	1116
the Interstate Commission on a non-voting basis prior to	1117
adoption of the Compact by all states.	1118
(d) The Interstate Commission may propose amendments to	1119
the Compact for enactment by the member states. No amendment	1120
shall become effective and binding upon the Interstate	1121
Commission and the member states unless and until it is enacted	1122
into law by unanimous consent of the member states.	1123
SECTION 21. WITHDRAWAL	1124
(a) Once effective, the Compact shall continue in force	1125
and remain binding upon each and every member state; provided	1126
that a member state may withdraw from the Compact by	1127
specifically repealing the statute which enacted the Compact	1128
into law.	1129
(b) Withdrawal from the Compact shall be by the enactment	1130
of a statute repealing the same, but shall not take effect until	1131
one (1) year after the effective date of such statute and until	1132
written notice of the withdrawal has been given by the	1133
withdrawing state to the governor of each other member state	1134

(c) The withdrawing state shall immediately notify the	1135
chairperson of the Interstate Commission in writing upon the	1136
introduction of legislation repealing the Compact in the	1137
withdrawing state.	1138
(d) The Interstate Commission shall notify the other	1139
member states of the withdrawing state's intent to withdraw	1140
within sixty (60) days of its receipt of notice provided under	1141
subsection (c).	1142
(e) The withdrawing state is responsible for all dues,	1143
obligations and liabilities incurred through the effective date	1144
of withdrawal, including obligations, the performance of which	1145
extend beyond the effective date of withdrawal.	1146
(f) Reinstatement following withdrawal of a member state	1147
shall occur upon the withdrawing date reenacting the Compact or	1148
upon such later date as determined by the Interstate Commission.	1149
(g) The Interstate Commission is authorized to develop	1150
rules to address the impact of the withdrawal of a member state	1151
on licenses granted in other member states to physicians who	1152
designated the withdrawing member state as the state of	1153
<pre>principal license.</pre>	1154
SECTION 22. DISSOLUTION	1155
(a) The Compact shall dissolve effective upon the date of	1156
the withdrawal or default of the member state which reduces the	1157
membership of the Compact to one (1) member state.	1158
(b) Upon the dissolution of the Compact, the Compact	1159
becomes null and void and shall be of no further force or	1160
effect, and the business and affairs of the Interstate	1161
Commission shall be concluded, and surplus funds shall be	1162
distributed in accordance with the bylaws.	1163

SECTION 23. SEVERABILITY AND CONSTRUCTION	1164
(a) The provisions of the Compact shall be severable, and	1165
if any phrase, clause, sentence, or provision is deemed	1166
unenforceable, the remaining provisions of the Compact shall be	1167
enforceable.	1168
(b) The provisions of the Compact shall be liberally	1169
construed to effectuate its purposes.	1170
(c) Nothing in the Compact shall be construed to prohibit	1171
the applicability of other interstate compacts to which the	1172
member states are members.	1173
SECTION 24. BINDING EFFECT OF COMPACT AND OTHER LAWS	1174
(a) Nothing herein prevents the enforcement of any other	1175
law of a member state that is not inconsistent with the Compact.	1176
(b) All laws in a member state in conflict with the	1177
Compact are superseded to the extent of the conflict.	1178
(c) All lawful actions of the Interstate Commission,	1179
including all rules and bylaws promulgated by the Commission,	1180
are binding upon the member states.	1181
(d) All agreements between the Interstate Commission and	1182
the member states are binding in accordance with their terms.	1183
(e) In the event any provision of the Compact exceeds the	1184
constitutional limits imposed on the legislature of any member	1185
state, such provision shall be ineffective to the extent of the	1186
conflict with the constitutional provision in question in that	1187
member state.	1188
Sec. 4731.111. Not later than thirty days after the	1189
"Interstate Medical Licensure Compact" is entered into under_	1190

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section 4731.11 of the Revised Code, the state medical board, in	1191
accordance with section 11 of the compact, shall select two	1192
individuals to serve as commissioners to the interstate medical	1193
licensure compact commission created under the compact. The	1194
board shall fill any vacancy in either or both of the positions	1195
not later than thirty days after such a vacancy occurs.	1196
Sec. 4731.112. As part of performing a criminal background	1197
check of an applicant as set forth in section 5(b)(2) of the	1198
"Interstate Medical Licensure Compact" entered into under	1199
section 4731.11 of the Revised Code, the state medical board may	1200
require the applicant to comply with sections 4776.01 to 4776.04	1201
of the Revised Code.	1202
Section 2. That existing sections 3721.28, 3721.31, and	1203
3721.32 of the Revised Code are hereby repealed.	1204
Section 3. All items in this act are hereby appropriated	1205
as designated out of any moneys in the state treasury to the	1206
credit of the designated fund. For all operating appropriations	1207
made in this act, those in the first column are for fiscal year	1208
2022 and those in the second column are for fiscal year 2023.	1209
The operating appropriations made in this act are in addition to	1210
any other operating appropriations made for the FY 2022-FY 2023	1211
biennium.	1212
Section 4.	1213

1 2 3 4 5

В	Dedicated	Purpose Fur	nd Group			
С	5C60	883609	Operating Expenses	\$140,000	\$0	
D	TOTAL DPF	\$140,000	\$0			
E	TOTAL ALL	BUDGET FUNI	O GROUPS	\$140,000	\$0	
Sec	tion 5. Wit	thin the lim	its set forth in this	act, the		1215
Director	of Budget	and Manageme	ent shall establish acc	counts		1216
indicatin	g the sour	ce and amour	nt of funds for each ap	ppropriation		1217
made in t	his act, a	nd shall det	termine the form and ma	anner in		1218
which appropriation accounts shall be maintained. Expenditures						1219
from oper	ating appr	opriations o	contained in this act	shall be		1220
accounted for as though made in the main operating						1221
appropria	tions act	of the 134th	General Assembly. The	e operating		1222
appropria	tions made	in this act	are subject to all pa	rovisions of		1223
the main operating appropriations act of the 134th General					1224	
Assembly	that are g	enerally app	olicable to such approp	priations.		1225
Sec	tion 6. Not	t later than	one year after the ef	fective		1226
date of t	his section	n, the State	e Medical Board shall	pegin		1227
accepting and evaluating applications for expedited licenses and						1228
issuing expedited licenses in accordance with the "Interstate						1229
Medical Licensure Compact" entered into under section 4731.11 of						1230
the Revised Code.						