

**PROMOTING THE HIGHEST STANDARDS FOR  
MEDICAL LICENSURE AND PRACTICE**



*Regulating the Physician in the  
New Healthcare Marketplace*

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Protecting  
Advocating  
Serving

# Outline

- **Introductory Remarks**
- **FSMB's 2012 Physician Census**
- **Physician Minimum Data Set (MDS)**
- **Maintenance of Licensure (MOL)**
- **Interstate Compact for Medical Licensure**
- **Q&A**

# Greetings from the FSMB Board of Directors



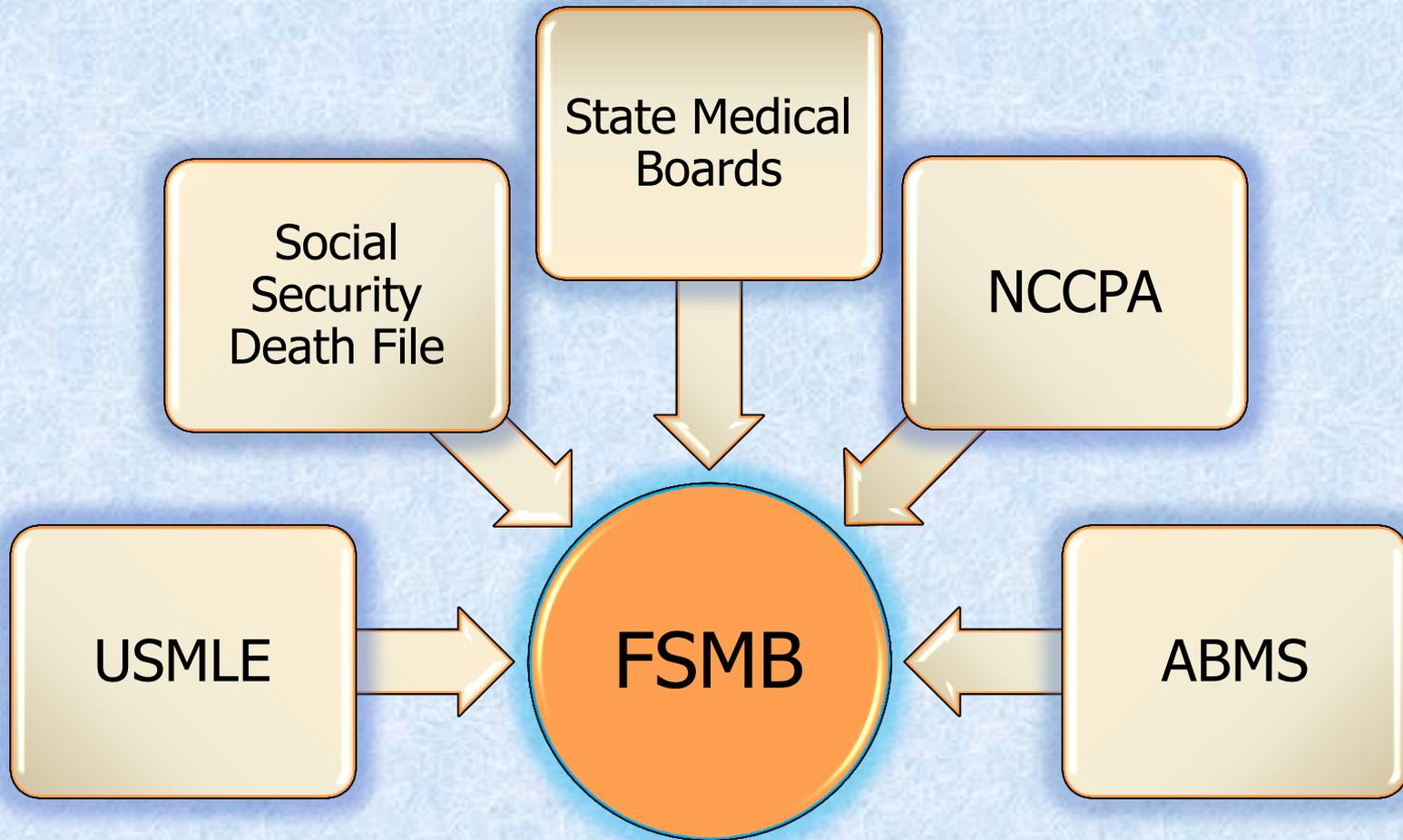
# Federation of State Medical Boards (FSMB)

- Non-profit organization, founded in 1912, offices in Texas and Washington, D.C. (185 employees)
- Represent all 70 state medical and osteopathic boards in the U.S. and its territories
- Co-manage, with the NBME, the **USMLE** program
- Secretariat, International Association of Medical Regulatory Authorities (IAMRA)
- *Journal of Medical Regulation*, since 1915
- Federation Credentials Verification Service (FCVS)
- Uniform Application (UA) for Licensure
- Board Chair: **Jon Thomas, MD, MBA**

# Importance of Physician Supply

- **Growth of the U.S. population**
  - Population will grow by 60 million, to a total of 373 million, by 2030
- **Aging of the population**
  - “Baby Boomers” started turning 65 in 2011
  - Each day for the next 18 years 10,000 boomers will reach age 65
  - Individuals 65 and older typically utilize more health care services
- **The Patient Protection and Affordable Care Act (2010)**
  - By 2019 an additional 32 million Americans may become insured
- **Evolving Models of Health Care Delivery**
  - Physician-Led Team Based Care (PCMHs, ACOs, etc.)
  - Telemedicine and Telehealth

# FSMB Data Sources



# Topline Findings

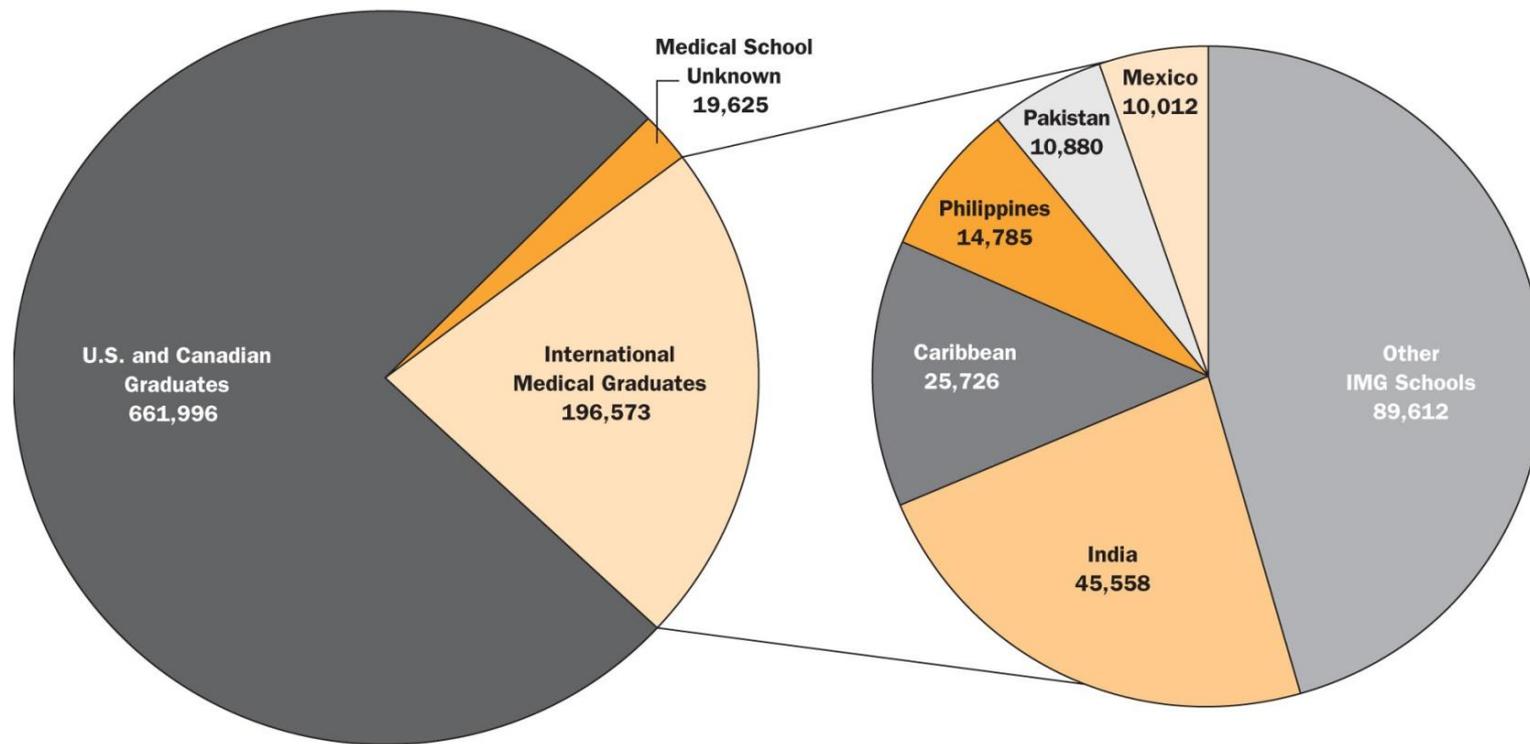
- There are **878,194 physicians** with an active license to practice medicine in the U.S. and D.C. (2012)
  - Net increase of 28,109 (3%) from 2010
- State boards issued a total of 134,456 “new” medical licenses to physicians since 2010
  - First licenses
  - Additional licenses
  - A new license after moving
- 48,219 physicians received their first medical license between 2010 and 2012
- Graduated from 1,881 medical schools located in 166 countries

# South Atlantic

| State                | Licensed Physicians | Population | Physicians Per 100,000 |
|----------------------|---------------------|------------|------------------------|
| District of Columbia | 9,966               | 632,323    | 1,576                  |
| Delaware             | 4,838               | 917,092    | 528                    |
| Maryland             | 28,596              | 5,884,563  | 486                    |
| Virginia             | 31,949              | 8,185,867  | 390                    |
| West Virginia        | 7,057               | 1,855,413  | 380                    |
| North Carolina       | 33,213              | 9,752,073  | 341                    |
| Florida              | 64,977              | 19,317,568 | 336                    |
| Georgia              | 31,782              | 9,919,945  | 320                    |
| South Carolina       | 14,824              | 4,723,723  | 314                    |

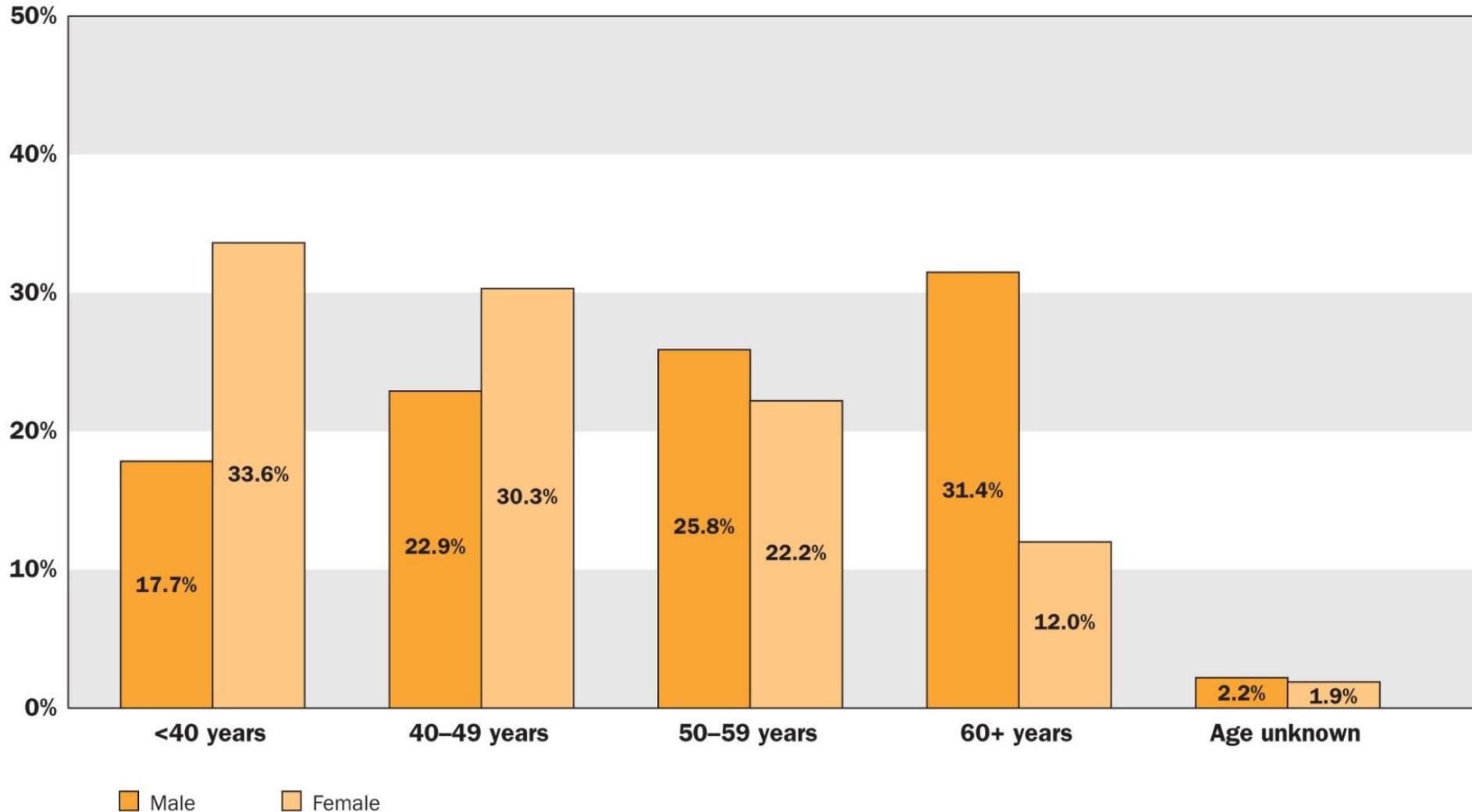


## Physicians with Active Licenses in the United States and the District of Columbia by Country of Medical School Graduation, 2012

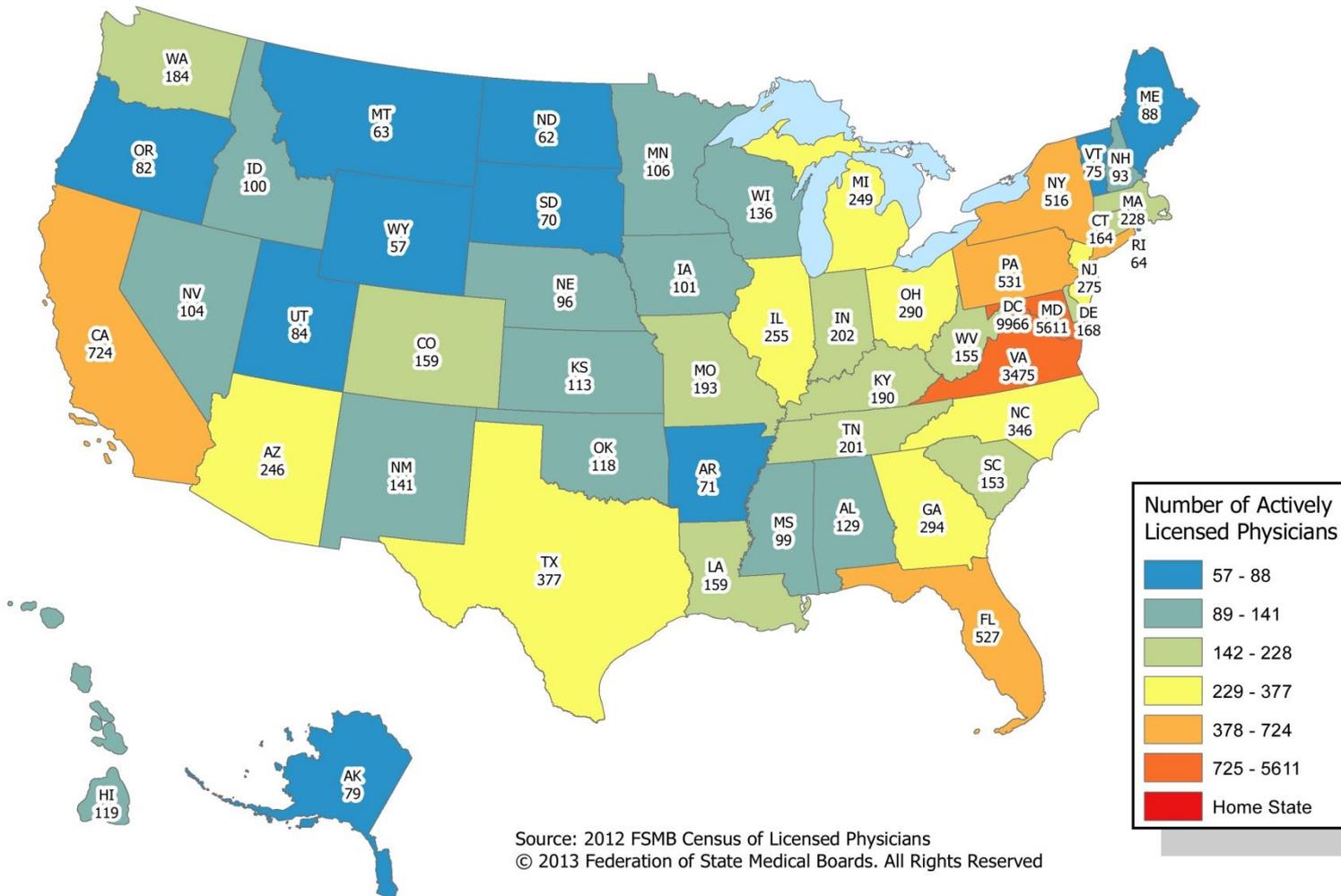


Source: 2012 FSMB Census of Licensed Physicians

## Physicians with an Active License in the United States and the District of Columbia by Gender and Age, 2012

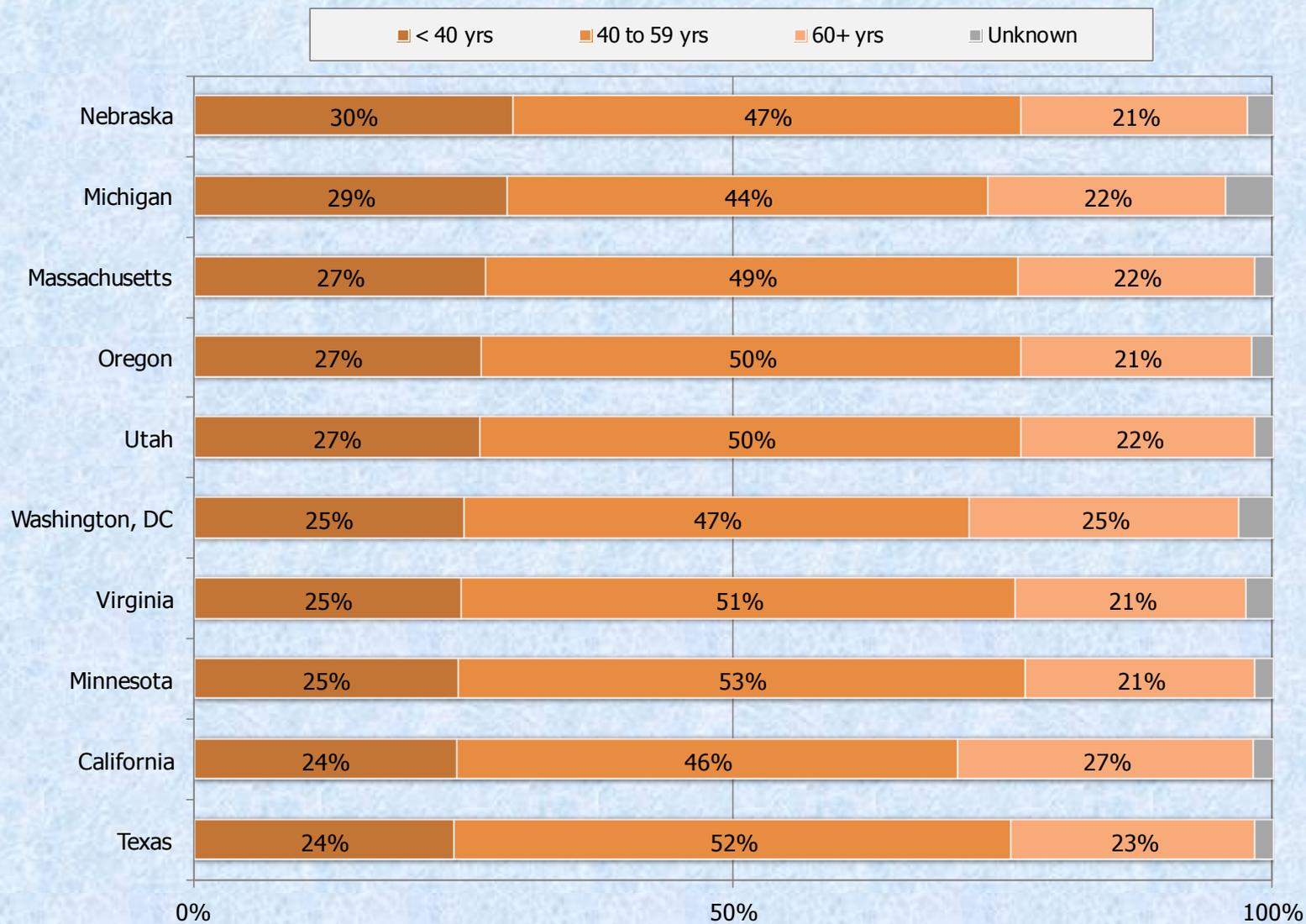


## District of Columbia Board of Medicine Actively Licensed Physicians with Multi-State Licenses

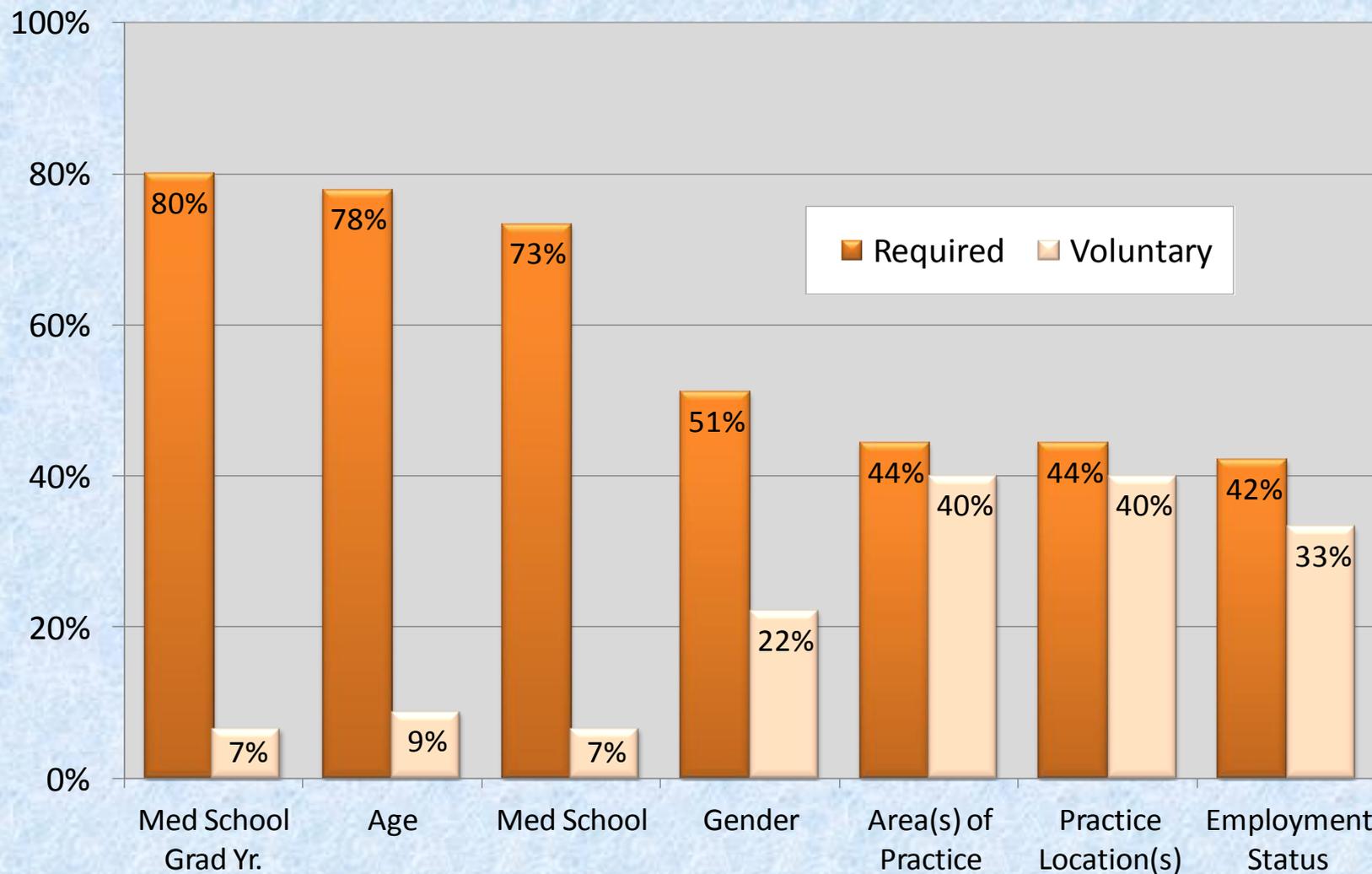


Source: 2012 FSMB Census of Licensed Physicians  
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## Top 10 States w/ Highest Percentage of Physicians Younger than 40 yrs



## Types of Workforce Data Collected



# **Elements of a Physician Minimum Data Set**

- Licensure status
- Date of birth
- Gender
- Race
- Ethnicity
- Medical school graduated
- Medical school grad year
- Specialty board certification
- MOC, OCC, and MOL
- **Employment status (e.g., retired)**
- **Areas of practice (e.g., primary care)**
- **Practice settings (e.g., clinic or hospital)**
- **Hours worked per week**
- **Clinical locations**
- **Hours per week providing patient care**
- Languages spoken (optional)

# Maintenance of Licensure (MOL)

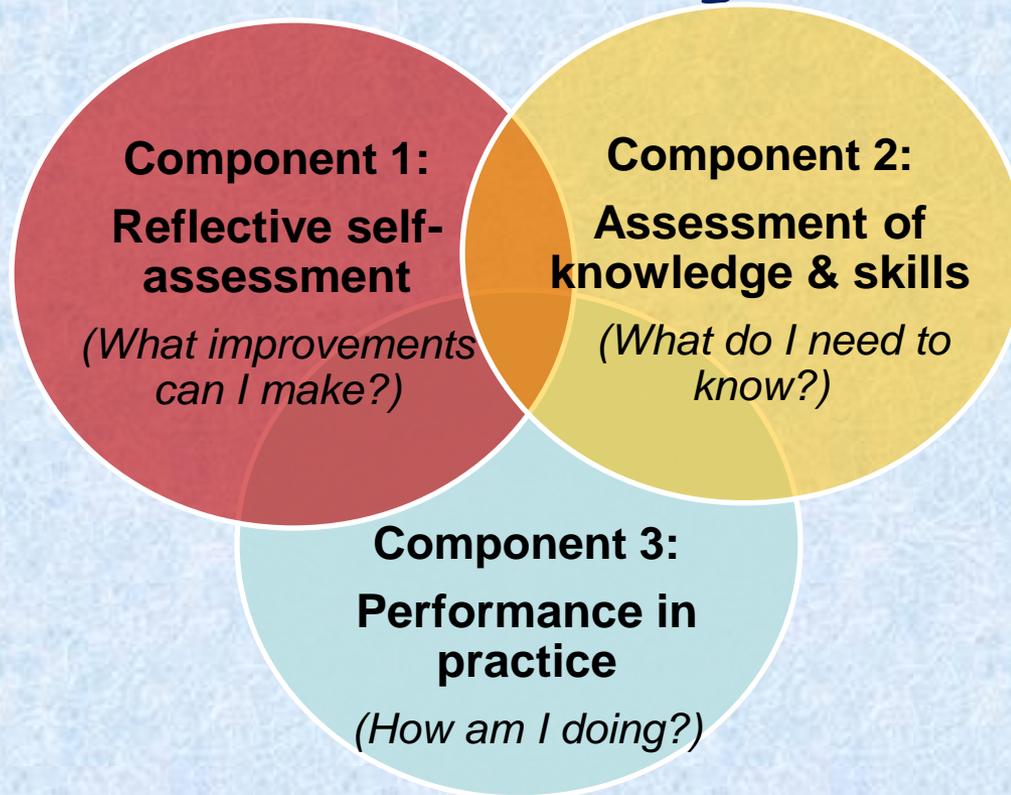
A process by which a licensed physician provides, as a condition of license renewal, evidence of participation in **continuous professional development** that:

- Is practice-relevant
- Is informed by objective data sources
- Includes activities aimed at improving performance in practice

# MOL Framework

(adopted by FSMB HOD in 2010)

## 3 major components of effective lifelong learning



# MOL Framework / Recommended Tools

|   |  |
|---|--|
| <p>COMPONENT 1:<br/><i>Reflective self-assessment</i></p>         | <ul style="list-style-type: none"> <li>• MOC/OCC</li> <li>• Self-review tests</li> <li>• Simulations</li> <li>• CME in practice area</li> <li>• Literature review</li> </ul>   |
| <p>COMPONENT 2:<br/><i>Assessment of knowledge and skills</i></p> | <ul style="list-style-type: none"> <li>• Practice-relevant exams (MOC/OCC)</li> <li>• Procedural hospital privileging</li> <li>• Standardized patients</li> <li>• Computer-based case simulations</li> <li>• Patient/peer surveys</li> <li>• Observation of procedures</li> </ul>  |
| <p>COMPONENT 3:<br/><i>Performance in practice</i></p>            | <ul style="list-style-type: none"> <li>• Performance improvement CME &amp; projects (Surgical Care Improvement Project, Institute for Healthcare Improvement, Improving Performance in Practice, Healthcare Effectiveness Data and Information Set)</li> <li>• MOC/OCC</li> <li>• AOA Bureau of Osteopathic Specialists' Clinical Assessment Program</li> <li>• 360° evaluations</li> <li>• Analysis of practice data</li> <li>• CMS measures</li> </ul> |

# Four Important Points about MOL

- There will not be a mandatory, secure, high stakes examination for MOL
- State medical boards will not require specialty board certification, nor MOC or OCC, as a condition for medical licensure
- MOL is not the same as MOC or OCC, though all value the concept of physician accountability and continued professional development
- Participation in MOC or OCC should substantially count, however, for any state's MOL requirements

# Medical Licensure and Specialty Certification

## Licensure

- **Mandatory**
- **Minimal standard**
- **Aligns state board's mission of public protection and safety**
- **Competency in the general, undifferentiated practice of medicine**

## Specialty Certification

- **Voluntary**
- **High standard**
- **Implies expertise within a specific specialty or subspecialty of medicine or surgery**

# Ongoing Communication

- **Peer-Reviewed Articles**
  - *Journal of Medical Regulation*
    - Vol. 99, No. 1 - MOL Evidence and Rationale article
  - *Annals of Internal Medicine*
    - Vol. 157, No. 4, August 21, 2012
  - *New England Journal of Medicine*
    - Vol. 367, No. 26, December 27, 2012
- **MOL Information Packet**
  - Distributed October-November 2012
    - State Medical Boards, Medical/Osteopathic Schools, State Medical/Osteopathic Associations, AOA, AOA BOS,
- **MOL eUpdate**



# FSMB's House of Delegates Vote to Support Exploration of an Interstate Compact (2013)



# Thank you, Dr. Orlowski, for your Service to the Nation and the Nation's Capitol



# Questions & Discussion