

The House Committee on Health offers the following substitute to SB 427:

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated,
2 relating to medical practice relative to physicians, so as to provide for limited provisional
3 licenses and a pathway to licensure for certain internationally trained physicians; to provide
4 for definitions; to provide for qualifications and conditions; to provide for penalties, license
5 sanctions, and enforcement; to provide for one or more medical directors; to provide for
6 annual reports; to provide for rules, regulations and procedures; to provide for conditional
7 automatic repeal; to provide for related matters; to provide for a contingent effective date;
8 to repeal conflicting laws; and for other purposes.

9 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

10 **SECTION 1.**

11 Article 2 of Chapter 34 of Title 43 of the Official Code of Georgia Annotated, relating to
12 medical practice relative to physicians, is amended by adding a new Code section to read as
13 follows:

14 "43-34-34.1.

15 (a) As used in this Code section, the term:

16 (1) 'Foreign jurisdiction' means any jurisdiction other than a state of the United States.

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17 (2) 'Internationally trained physician' means an individual who received a degree of
18 doctor of medicine or its equivalent, as approved by the board or provided by rule, from
19 a medical school in a foreign jurisdiction.

20 (3) 'Limited provisional license' means a license to practice medicine issued to an
21 internationally trained physician and permitting supervised medical practice as provided
22 in this Code section.

23 (4) 'Medical director' means a physician with a full, unrestricted license in this state who
24 oversees the development, establishment, and implementation of the limited provisional
25 license and pathway to licensure, as provided for in this Code section.

26 (5) 'Pathway to licensure' means the requirements an internationally trained physician
27 holding a current, valid limited provisional license shall complete in order to obtain a full
28 license to practice medicine in this state.

29 (6) 'Rural county' means a county in this state having a population of less than 50,000
30 according to the United States decennial census of 2020 or any future such census;
31 provided, however, that, for counties which contain a military base or installation, the
32 military personnel and their dependents living in such county shall be excluded from the
33 total population of such county for purposes of this definition.

34 (7) 'Supervising physician' means a physician with a full, unrestricted license in this state
35 who physically practices at a medical practice located in a rural county, a licensed
36 hospital, a federally qualified health center, or an accredited medical school where an
37 internationally trained physician is employed, provides on-site clinical supervision of a
38 limited provisional licensee, and attests to the competence of such licensee in accordance
39 with board rules. Such physician's specialty shall be comparable to that of the
40 internationally trained physician applying for a limited provisional license as determined
41 by a medical director.

42 (b) The board may issue a limited provisional license to practice medicine in this state to
43 an internationally trained physician when the board receives satisfactory verification that
44 the applicant:

45 (1) Has been offered full-time employment under a supervising physician either at a
46 medical practice located in a rural county, a hospital licensed pursuant to Chapter 7 of
47 Title 31, a federally qualified health center, or an accredited medical school;

48 (2) Has a current and active license in good standing to practice medicine in a foreign
49 jurisdiction or had such a license that expired no more than three years prior to the
50 submission of an application for a limited provisional license to the board;

51 (3) Has not had a license to practice medicine revoked, suspended, restricted, denied, or
52 otherwise acted against in any state, federal, or foreign jurisdiction, including, but not
53 limited to, the voluntary relinquishment of a license or relinquishment of a license by
54 stipulation, consent order, or other settlement in response to or in anticipation of the filing
55 of administrative charges or disciplinary action against a license, and is not the subject
56 of any pending investigations by a licensing authority;

57 (4) Completed 130 weeks of medical education at a medical school listed in the World
58 Directory of Medical Schools or its successor organization; is certified or eligible for
59 certification by the Educational Commission for Foreign Medical Graduates or other
60 credential evaluation service approved by the board; and actively practiced medicine
61 either:

62 (A) For at least five years after completing two years of postgraduate training in a
63 graduate medical education program approved by the applicant's foreign jurisdiction
64 of licensure; provided that such practice is in the same specialty as such training; or

65 (B) For at least ten years after graduating from medical school in a foreign jurisdiction;

66 (5) Demonstrated competency to practice medicine by:

67 (A) Successfully passing each part of an examination approved by the board;

68 (B) Successfully passing each part of a nationally recognized standard medical
69 licensing examination from a foreign jurisdiction that is a member of the International
70 Association of Medical Regulatory Authorities that includes an interactive testing
71 component and tests for the ability to practice medicine; medical knowledge, skills and
72 understanding of clinical science essential for providing patient care, as prescribed by
73 the board in rules; and communication and interpersonal skills; provided, however, that
74 the examining body shall provide verification in English directly to the board that the
75 applicant has successfully passed an examination that satisfies each of the requirements
76 of this subparagraph;

77 (C) Receiving specialty board certification approved by the American Board of
78 Medical Specialties, the Bureau of Osteopathic Specialist of the American Osteopathic
79 Association, the Royal College of Physicians and Surgeons of Canada, or any other
80 specialty board prescribed by board rules; or

81 (D) Submitting to a comprehensive assessment demonstrating clinical competence by
82 a program prescribed by board rules;

83 (6) Has not been convicted in any state, federal, or foreign jurisdiction of any felony, any
84 criminal offense involving moral turpitude, or a violation of law relative to the practice
85 of medicine; provided, however, that the applicant shall submit to the board a background
86 screening in English from the foreign jurisdiction in which such applicant is licensed;

87 (7) Has successfully passed an English proficiency examination that includes the
88 components of reading, speaking, writing, and listening, as prescribed by board rules;

89 (8) Is legally authorized to work in the United States; provided, however, that an
90 applicant may apply for a limited proficiency license prior to receiving federal work
91 authorization but shall not begin employment in a medical practice located in a rural
92 county, a licensed hospital, a federally qualified health center, or an accredited medical
93 school as provided for in paragraph (1) of this subsection until the applicant receives legal

94 work authorization from the relevant federal agency and an approved license from the
95 board;
96 (9) Submits an application and pays any application fees to the board; and
97 (10) Participates in an interview at the discretion of the board prior to consideration of
98 the application.
99 (c) Any documents required in subsection (b) of this Code section shall be submitted in
100 English or translated by a certified professional translation service, provided that any such
101 translation includes a certification statement and notarized signature.
102 (d) The holder of a limited provisional license issued under this Code section shall not
103 practice medicine outside of a medical practice located in a rural county, a licensed
104 hospital, a federally qualified health center, or an accredited medical school as provided
105 for in paragraph (1) of subsection (b) of this Code section. A person who violates this
106 subsection shall be subject to disciplinary action by the board and shall be guilty of a
107 misdemeanor, and, upon conviction, shall be fined not more than \$500.00 for each offense.
108 (e) A limited provisional licensee shall be subject to the provisions of this article and the
109 rules of the board in the same manner as a person holding full licensure under this article.
110 Such licensee shall update and maintain a complete public physician profile in compliance
111 with the provisions of Code Section 43-34A-3. The board shall have the authority to issue,
112 deny, renew, revoke, suspend, issue terms and conditions, place on probation, limit, fine,
113 or otherwise sanction the limited provisional licensee for any violation of the provisions
114 of this Code section, this article, or board rules after notice and opportunity for a hearing.
115 (f)(1) A limited provisional license shall become inactive when the holder of such
116 license:
117 (A) Ceases to be employed in a full-time capacity at a medical practice located in a
118 rural county, a licensed hospital, a federally qualified health center, or an accredited
119 medical school as provided for in paragraph (1) of subsection (b) of this Code section;

120 (B) Ceases to be employed under a supervising physician who is physically practicing
121 onsite at a medical practice located in a rural county, a licensed hospital, a federally
122 qualified health center, or an accredited medical school as provided for in paragraph (1)
123 of subsection (b) of this Code section; provided, however, that any supervising
124 physician shall immediately notify the board in writing of any change to the
125 employment status or hours of such physician or the limited provisional licensee at such
126 medical practice, licensed hospital, or accredited medical school; or

127 (C) Obtains any other license to practice medicine issued by the board.

128 (2) The board shall retain jurisdiction over the holder of an inactive license for
129 disciplinary purposes.

130 (g) An internationally trained physician who holds a current, valid limited provisional
131 license pursuant to this Code section shall be eligible to apply for a full license to practice
132 medicine after four years of active practice at a medical practice located in a rural county,
133 a licensed hospital, a federally qualified health center, or an accredited medical school in
134 this state. The board may grant a full license to practice medicine in this state if such
135 applicant has no disciplinary actions or pending investigations by any state, federal, or
136 foreign regulatory agency against a license held by the applicant; no misdemeanor
137 convictions, excluding minor traffic violations, in any state, federal, or foreign jurisdiction
138 in the two years preceding the application for a full license; no felony convictions or
139 convictions for criminal offenses involving moral turpitude in any state, federal, or foreign
140 jurisdiction; and no adverse actions affecting the applicant's privileges or ability to practice
141 medicine. As a condition of license issuance, the board shall require the licensee to provide
142 two additional years of medical practice in an underserved area as defined by board rules.

143 (h) The board shall employ additional administrative, professional, investigative, and legal
144 staff necessary to implement the provisions of this Code section. The board shall employ
145 one or more medical directors who shall oversee the development, establishment, and
146 implementation of the limited provisional license and the pathway to licensure, as provided

147 for in this Code section. Such medical director or directors shall evaluate medical practice,
148 hospital, or medical school site readiness, audit supervision, review performance, analyze
149 data, recommend disciplinary actions, advise on rule-making, and coordinate with public
150 health partners and other state agencies.

151 (i) No later than December 1, 2027, and annually thereafter, the board shall submit a report
152 on the implementation of this Code section to the chairpersons of the House Committee on
153 Health and the Senate Health and Human Services Committee. Such report shall include,
154 but shall not be limited to:

155 (A) The number of applicants for a limited provisional license;

156 (B) The applicant's licensing foreign jurisdiction and the foreign jurisdiction where the
157 applicant attained his or her education and training;

158 (C) The number of limited provisional licenses granted and denied and the reasons for
159 such denials;

160 (D) The counties where limited provisional licensees practice and whether the practice
161 is in a medical practice located in a rural county, a licensed hospital, a federally qualified
162 health center, or an accredited medical school;

163 (E) The number of limited provisional licensees applying for a full license through the
164 pathway to licensure;

165 (F) The number of full licenses granted to limited provisional licensees applying through
166 the pathway to licensure, the number of denials to such licensees, and the reasons for
167 such denials;

168 (G) The number and nature of complaints received by the board or the employing
169 medical practice, hospital, or medical school regarding a limited provisional licensee and
170 any disciplinary actions taken; and

171 (H) The practice setting and specialty of applicants:

172 (i) In their licensing foreign jurisdiction;

173 (ii) When they were employed under their limited provisional license; and

174 (iii) During the first two years under their full license to practice medicine in an
175 underserved area as provided under subsection (g) of this Code section.
176 (j) The board shall promulgate rules and regulations necessary to implement and
177 administer the provisions of this Code section.
178 (k) The board shall implement this Code section upon the effective date of a specific
179 appropriation of funds for purposes of this Code section as expressed in a line item making
180 specific reference to the full funding of this Code section in an appropriations Act enacted
181 by the General Assembly. This Code section shall stand repealed on the effective date of
182 the appropriations Act for the fiscal year that fails to make specific reference to the full
183 funding of this Code section. The House Budget and Research Office and the Senate
184 Budget and Evaluation Office shall certify any such lack of appropriation to the Code
185 Revision Commission for purposes of updating the Code in accordance with this
186 subsection."

187 **SECTION 2.**

188 This Act shall become effective only if the Code section provided for in this Act is funded
189 in an appropriations Act making specific reference to such Code section.

190 **SECTION 3.**

191 All laws and parts of laws in conflict with this Act are repealed.