HB 509: Relative to Graduate Physician Pilot Program

Title/Introduction: HB 509 AN ACT relative to a graduate physician pilot program. This bill establishes a pilot program for the regulation and licensure of graduate physicians each year by the board of medicine. Practice of a graduate physician is limited to medically underserved areas and rural health clinics.

History/Context: The state of NH enjoys extremely high quality medical care, and data about health outcomes in our state are excellent. In 2018 98,000 students graduated from US and Canadian medical schools. 94.5% of them matched into residency training programs. This bill seeks to afford the opportunity for that small percentage who do not match with a training opportunity for practice. A disproportionate number of those medical students who do not match are from medical schools outside of the country. Schools without the controls, standards and accreditation mandated from US medical Schools. The bill sponsors propose this bill would place those medical students who have successfully completed Step 1 and Step 2 of the United States Medical Licensing Examination or the equivalent of such steps of any other board-approved medical licensing examination; and have English language proficiency in a graduate physician collaborative primary practice arrangement in a medically underserved area in NH. A similar bill was proposed last year and was defeated.

Pros:

- Calls for a Graduate Physician Oversight Committee.
- Creates a limited license physician practice to increase access to health care in and only in medically underserved areas.
- Similar legislation (graduate physician or assistant physician) is occurring in GA, VA, AR, UT, KS, OK, WA and has been implemented in MI.

Cons:

- Graduates leaving medical school after 4 years are simply not prepared to provide appropriate, cost effective, and safe medical care.
- To propose this as a solution for only underserved and rural populations is to underestimate and minimize the needs and seriousness of the complex health needs of rural populations, and to place such populations (already at higher risk by virtue of their rurality) at even further risk.


Committee: Health, Human Services and Elderly Affairs
Position of the CGA: Joins in opposition with the NH Primary Care Commission and the New Hampshire Nurse Practitioners Association

Click here to access HB 509 on the NH General Court website.

The House HHS&EA Committee held a hearing on the bill on 01-24-19. NHNA attended this hearing. HHS&EA Committee voted (17:2) Inexpedient to Legislate.