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## FISCAL IMPACT REPORT

SPONSOR Ortiz y Pino ORIGINAL DATE 2/28/19  
 LAST UPDATED \_\_\_\_\_ HB \_\_\_\_\_

SHORT TITLE Postgraduate Training For Certain Physicians SB 590

ANALYST Chilton

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY19	FY20	FY21	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>		Indeterminate but Minimal	Indeterminate but Minimal	Indeterminate but Minimal	Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

New Mexico Medical Board (MB)

### SUMMARY

#### Synopsis of Bill

Senate Bill 590 would change the licensure sections of the Medical Practice Act (Section 61-6-11 NMSA 1978) and the Osteopathic Medicine Practice Act (Section 61-10-6 NMSA 1978) to reduce the number of required years of training after the medical doctor (MD) or doctor of osteopathy (DO) degree for graduates of accredited schools of allopathic or osteopathic medicine. In the case of allopathic medicine (MDs), Canadian as well as American schools of medicine are recognized by the bill; in the case of osteopathic medicine (DO), only American - accredited schools of osteopathic medicine would be recognized in this way.

Currently, the statutes state that each applicant must have two years of post-MD or post-DO training to be considered for licensure, with the proviso the boards could consider an applicant's additional experience as a possible substitute for the second year of post-graduate training. This bill would eliminate the section related to considering additional experience, but would, for North American graduates, reduce the number of required years of postgraduate training from two to one.

Those receiving their MD or DO degrees outside the United State, in the case of both MDs and DOs or Canada (in the case of MDs) would have to have had two years of postgraduate training, as at present.

## FISCAL IMPLICATIONS

No appropriation is made. There would be minimal expenses for personnel time to change the regulations.

## SIGNIFICANT ISSUES

MB points out that there has been no discussion with it regarding the proposed changes. Its further comments follow:

The number of years of required ACGME-approved postgraduate medical training [PGT = internship plus residency] is not an arbitrary number, but one which was established initially in 1981, and has increased over time with the specific complexities of the different medical professions and specialties.

Postgraduate training is divided into two segments: Internship and Residency. In addition there are also Fellowships for advanced training in certain “specialties”. Many post-graduate training institutions, because of the training they give, are located in states that have established the required *minimum* length of PGT required for Medical Licensure.

In 2018, the Federation of State Medical Boards’ “U.S. Medical Regulatory Trends and Actions” booklet listed the following statistics regarding national requirements by state:

States requiring three (3) years of PGT (ACGME) = 25 states  
States requiring two (2) years of PGT (ACGME) = 22 states  
States requiring one (1) year of PGT (ACGME) = 4 states

Of note, osteopathic training differs in the United States than in the remainder of the world, where most programs train osteopaths in physical manipulation and therapy rather than in what in the United States is considered osteopathic medicine in a way similar to schools of allopathic medicine.

As noted by MB, “applicants for licensure would likely not be as experienced or knowledgeable as under the present requirement for two (2) years of ACGME accredited PGT. The goal is sufficient training. The Medical Board has effective methodologies for reasonable exceptions in specific situations.”

## ADMINISTRATIVE IMPLICATIONS

The New Mexico Medical Board states, it “would have to make a change in 61-6-11 of the Medical Practice Act, and in Part 2 of the Board rules to alter the qualifications for licensure. Incidentally, the proposed change would not change the time for processing the application for licensure, but could permit some less qualified applicants to be licensed on the basis of only having one year of PGT, possibly not adequate for the practice of most medical or surgical professions.”

## TECHNICAL ISSUES

On page 2, line 19, “and Canada” should be added after “United States” in order to be consistent with other parts of the bill.