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State of Nevada Assembly

August 14, 2023

Members, Board of Medical Examiners
c/o Edward O. Cousineau, J.D., Executive Director
9600 Gateway Drive
Reno, Nevada 89521
eocnsbme@medboard.nv.gov

Dear Board Members and Mr. Cousineau:

Nevada needs more physicians per capita. Study after study shows us near the bottom rank among states, and matters are even worse for various specialties. According to the 2022 Annual Report of the Board of Medical Examiners (Board), our physician-population ratio has been creeping upward—but still too slowly. We are engaged in an intense competition with other states for every single physician considering where to locate and practice.

In recent meetings with local medical groups, I heard the frustration of administrators trying to work with applicants for licensure as they navigated the licensing process in Nevada. I was given examples of phone calls consistently going to voicemail, slow email responses, delays due to directions conveyed by the United States Postal Service, and lack of acknowledgment that documentation submitted to the Board was received. Applicants were not given guidance on how and where to obtain required documentation and how much this would cost. Uncertainty abounded. In sum, the applications of desperately needed doctors were taking months to process, jeopardizing job contracts and further threatening access to health care for Nevada's residents.

No one is denying that we want appropriately trained and qualified doctors. However, doctors have choices on where to go, and—especially for those just finishing their education and training—they usually are in debt and need to be gainfully employed as soon as possible. Physicians applying for jobs in multiple states quite reasonably will go where they get licensed first.

In my review of online analyses of states' physician licensure processes, I found comments indicating that Nevada has one of the toughest application processes to "wade through." This extremely disappointing commentary made me wonder how many physicians simply bypass Nevada altogether.

I write to challenge and urge the members and staff of the Nevada's Board of Medical Examiners to aggressively analyze the physician licensure process and find ways to shorten the average timeline from

Board of Medical Examiners Members and
Mr. Cousineau
Page 2
August 14, 2023

application to approval. At a minimum, I am confident our physician licensure process can be made much more user-friendly, starting with the clarity, content, and organization of the Board's website. Every applicant error avoided equates to days, weeks, or even months saved.

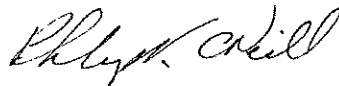
In addition, please respond to the following questions and indicate if any opportunities to modernize and shorten the Board's application process may be involved:

- Subsection 2 of Section 630.180 of the *Nevada Administrative Code* states, "Applications which are not completed within 6 months will be rejected." This appears to be an old requirement and may discourage or eliminate an applicant who has had difficulty collecting the required documentation for any number of reasons. Is this requirement necessary? If the Board wants a time limit to ensure currency of information, might a longer limit have a less chilling effect on some applicants?
- Agenda Item 7 for the Board's June 9, 2023, meeting called for possible action on "Federation of State Medical Boards' Recommendations Related to the Nevada State Board of Medical Examiners' Licensing Processes." Were those recommendations presented? If so, please send me a copy and indicate what actions the Board took or plans to take on them. Would any of these recommendations help shorten or clarify the application process?

I also would welcome the Board members' ideas for legislation to eliminate barriers to modernization and improvement of the licensure process and to shorten the timeline for licensure of successful applicants.

Every physician who avoids applying in Nevada because of the licensure process' negative reputation, every applicant who has trouble finding the right information or guidance on which task to attempt first, and every applicant who cannot reach Board staff in a timely manner is a physician who could end up practicing in another state. Each time this happens is a tragedy. Again, I challenge and urge you to devote your efforts to improving the application process and look forward to your responses.

Sincerely,



Philip "P.K." O'Neill
Minority Floor Leader
Nevada State Assembly

NEVADA STATE BOARD OF MEDICAL EXAMINERS

9600 Gateway Drive
Reno, NV 89521

Aury Nagy, M.D.
Board President

Edward O. Cousineau, J.D.
Executive Director



August 25, 2023

Via U.S. Mail and Electronic Mail

Philip "P.K." O'Neill, Minority Floor Leader
State of Nevada Assembly
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PK.Oneill@asm.state.nv.us

Re: Response to Letter Dated August 14, 2023

Dear Assemblyman O'Neill:

I am writing in response to your August 14, 2023, letter in which you urged the Nevada State Board of Medical Examiners (Board) to re-evaluate its licensing process. This encouragement is especially timely as we have recently appointed a new Chief of Licensing who has a fresh outlook on our processes, and in June, we finished our biennial registration, where we processed over 14,000 license renewals including almost 11,000 physicians, in less than three months.

During registration renewals the Board was also visited by representatives of the Federation of State Board of Medical Examiners (FSMB), who had an opportunity to reflect on our licensing processes and recommend changes to enhance the licensing experience for applicants and current licensees. FSMB presented its recommendation at the June Board meeting where it noted that the Board has empowered, engaged and highly capable senior staff to address operational concerns, and mentioned the Board's proactive leadership in developing a relationship with FSMB and utilizing its services. It identified, like in most states, that the Board is seeing a sharp increase in licensure applications, which reflects your acknowledgment that our physician population ratio has increased. In fact, almost 200 more licenses were issued this year to date compared to the same period last year which is almost a 20% increase year over year.

Following its visit, FSMB provided the following recommendations:

1. Comprehensive review of licensure application (look for requirements that do not add value or can be modified).
2. Rely upon trusted data sources available through FSMB including the National Practitioner Databank (NPDB), the American Medical Association (AMA), and the Physician Data Center (PDC).
3. Implement technological interfaces or automation.

4. Remove redundancies (licensure verification, ABMS data, activities listing).
5. Training to build a continuous staff improvement model.
6. Evaluation of our current licensing vendor well ahead of 2025 renewal.

Based on our own internal analysis and these recommendations, the Board has already made many changes to our licensing process, including the following:

1. The licensing portal requires applicants to have an email address. We are now able to have all initial licensing correspondence sent via email rather than mail. This saves both time and money.
2. Applicants are now sent a sample fingerprint card via email, rather than being mailed a physical card. This allows them to obtain their fingerprints quicker and eliminates issues of fingerprint cards being lost in the mail.
3. We now accept a photocopy of identity documentation, accompanied by a notarized affidavit of identity, rather than requiring applicants to submit original identity documentation.
4. We have streamlined the initial acknowledgement letter. This allows the acknowledgement packet to be sent to the applicant immediately, giving them the needed information to begin ordering verifications necessary for the application.
5. The application addendum is not requested until all verifications are received. This allows the applicant to do one addendum at the end of the process, rather than doing several throughout.
6. Applicants are no longer required to provide direct source state license verifications. For Medical Doctors and Physician Assistants, we now use the PDC report for current license information. For Respiratory Therapists and Perfusionists, the License Specialist obtains the information via state Board websites.
7. We no longer require direct source verification of Clinical Rotations for island/Caribbean schools, nor is an addendum needed speaking to those rotations.
8. We no longer require applicants to submit a copy of their ABMS certifications.
9. We no longer require proof of Observerships/Research positions, nor is an addendum needed speaking to the positions.

10. Questions previously asked of applicants (requiring a response via addendum) were thoroughly reviewed. Unnecessary and redundant questioning have been omitted.
11. Applicants only need to provide their activities for five years preceding the application date, or since graduation from medical, physician assistant, respiratory therapy, or perfusion school (if graduation was less than five years ago). Prior to this change, the applicant was required to submit all activities since graduation regardless of when they graduated.
12. The requirements for malpractice documents related to cases more than 10 years old have been relaxed.
13. Arrest documents are no longer required of applicants unless they are appearing before the Board for consideration of their licensure.
14. We have implemented many License Specialist process changes, allowing staff to work more quickly and efficiently.
15. We have increased Licensure Division staffing by adding three and a half (3.5) License Specialist positions in the last two years.
16. Additional staff have been trained on the final application review process to shorten final review time.

With respect to the other issues raised in your letter, including those addressing the Board's website, please note that the website is designed to direct applicants to establish a portal account. In the portal, there is additional information and instructions to help guide applicants through the application process. Nevertheless, we acknowledge that we can always improve our communication and will re-evaluate the flow of information prior to obtaining access to the portal to determine how we might better serve our applicants and licensees.

Next, you identified the regulation which allows the Board to reject an application as stale after six months. This is not a provision that we apply frequently, and we do not use it punitively. In most cases, applicants are communicating with us and actively engaged in the application process and applications are extended if necessary. Additionally, if an applicant had their application rejected because it appeared they had abandoned it and wanted to continue after six months, we would work with them to use any material they have previously submitted, so the applicant would not have to duplicate their efforts. Accordingly, we have drafted a revision to the language to more accurately reflect how we apply NAC 630.180(2) in practice. This change will be discussed at the September Board meeting.

Philip "P.K." O'Neill
August 25, 2023
Page 2

In closing, I want you to know that we appreciate your interest in how the Board can better serve our applicants and licensees. I hope this response provides you assurance that we are working diligently to make licensing more responsive, accessible, timely, and convenient for the medical professionals of the State of Nevada. Review of your letter and this response will be on the Board's September 15, 2023, Agenda for discussion by the Board.

Respectfully,



Edward O. Cousineau, J.D.
Executive Director
Nevada State Board of Medical Examiners

EOC/mf