

ADMINISTRATIVE RULES

Fiscal Estimate & Economic Impact Analysis

1. Type of Estimate and Analysis <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	2. Date 06/24/25								
3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable) Med 1									
4. Subject Licensure Requirements									
5. Fund Sources Affected <input type="checkbox"/> GPR <input type="checkbox"/> FED <input checked="" type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	6. Chapter 20, Stats. Appropriations Affected s. 20.165 (1) (hg)								
7. Fiscal Effect of Implementing the Rule <table style="width: 100%;"><tr><td><input type="checkbox"/> No Fiscal Effect</td><td><input type="checkbox"/> Increase Existing Revenues</td><td><input checked="" type="checkbox"/> Increase Costs</td><td><input type="checkbox"/> Decrease Costs</td></tr><tr><td><input type="checkbox"/> Indeterminate</td><td><input type="checkbox"/> Decrease Existing Revenues</td><td colspan="2"><input type="checkbox"/> Could Absorb Within Agency's Budget</td></tr></table>		<input type="checkbox"/> No Fiscal Effect	<input type="checkbox"/> Increase Existing Revenues	<input checked="" type="checkbox"/> Increase Costs	<input type="checkbox"/> Decrease Costs	<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Decrease Existing Revenues	<input type="checkbox"/> Could Absorb Within Agency's Budget	
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<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Decrease Existing Revenues	<input type="checkbox"/> Could Absorb Within Agency's Budget							
8. The Rule Will Impact the Following (Check All That Apply) <table style="width: 100%;"><tr><td><input type="checkbox"/> State's Economy</td><td><input type="checkbox"/> Specific Businesses/Sectors</td></tr><tr><td><input type="checkbox"/> Local Government Units</td><td><input type="checkbox"/> Public Utility Rate Payers</td></tr><tr><td colspan="2"><input type="checkbox"/> Small Businesses (if checked, complete Attachment A)</td></tr></table>		<input type="checkbox"/> State's Economy	<input type="checkbox"/> Specific Businesses/Sectors	<input type="checkbox"/> Local Government Units	<input type="checkbox"/> Public Utility Rate Payers	<input type="checkbox"/> Small Businesses (if checked, complete Attachment A)			
<input type="checkbox"/> State's Economy	<input type="checkbox"/> Specific Businesses/Sectors								
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<input type="checkbox"/> Small Businesses (if checked, complete Attachment A)									
9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1). \$0									
10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
11. Policy Problem Addressed by the Rule The objective of the proposed rules is to update the initial licensure requirements for physicians by adding specific requirements for what is to be submitted as proof of previous medical employment and updating the oral examination to be scored either pass or fail.									
12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments. The rule was posted on the Department's website for 14 days to solicit public comment on economic impact, including how the proposed rules may affect businesses, local government units, and individuals. No comments were received.									
13. Identify the Local Governmental Units that Participated in the Development of this EIA. None.									
14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred) DSPS estimates a total of \$5,655.00 in one-time costs to implement the rule. The estimated need for 0.1 limited term employee (LTE) is for updating forms and website, training LPPAs on requirement updates, promulgating rules, as well as legal review and consultation with CLC and OOS. The one-time costs cannot be absorbed in the currently appropriated agency budget.									
15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule The benefits of implementing the rule are clearer application requirements and more efficient processing of License to Practice Medicine and Surgery applications by DSPS staff. The alternatives to implementing the rule are that the application process for this license type will continue without any changes.									
16. Long Range Implications of Implementing the Rule The long range implications of implementing the rule faster application processing times.									
17. Compare With Approaches Being Used by Federal Government									

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None.

18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Illinois: The Illinois Department of Financial and Professional Regulation is responsible for the licensure and regulation of the practice of medicine in Illinois, with input from the Illinois State Medical Board. The Illinois Department is also responsible for the promulgation of rules to implement certain sections of the Illinois Medical Practice Act of 1987. This Act contains requirements for applications, licensure, and discipline for physicians. As outlined in Section 9, each applicant for a license needs to submit evidence that they are professionally capable of practicing medicine with reasonable skill and safety, among other requirements. Professional capacity may be determined through additional testing or training and the Illinois Medical Board may consider medical research, specialized training, publication in medical journals, and other professional activities when making a determination on professional capacity [225 Illinois Compiled Statutes ch. 60 s. 9]. Additionally, the Illinois Administrative Code outlines requirements for determining professional capacity for those applicants who have graduated more than two years prior to submitting an application. Those requirements include that the Illinois Board may consider experience in human clinical research, specialized clinical training or education, and publication of original clinical medical work in a medical or scientific journal, among other activities [Illinois Administrative Code Title 68 Chapter VII Part 1285 Section 1285.95].

Iowa: The Iowa Board of Medicine is responsible for the licensure and regulation of medicine and surgery in Iowa. Chapter 148 of the Iowa Code includes statutory requirements for licensure, composition and powers of the Iowa Board, and discipline for physicians. An applicant for an Iowa license to practice medicine and surgery needs to submit evidence of a diploma issued by a medical college, of having passed an examination required by the Iowa Board, and of successful completion of one year of post graduate resident training in an Iowa board approved hospital [Iowa Code ch. 148 s. 148.3]. The Iowa Administrative Code includes further requirements for medical licensure including verification of an applicant's professional experience for the past five years if requested by the Iowa Board [Iowa Administrative Code 653 Ch. 9 s. 953.9.4].

Michigan: The Michigan Board of Medicine is responsible for the licensure and regulation of medical practice in Michigan. Act 368 Article 15 Part 170 of the Michigan Compiled Laws includes the regulations for medicine in Michigan, among several other occupations. Some of the requirements in this part include those for licensure, informed consent, and duties of the Michigan Board [Michigan Compiled Laws ss. 333.17001-333.17097]. Together with the Michigan Department of Licensing and Regulatory Affairs, the Michigan Board also promulgates rules regarding certain aspects of medical practice. According to those rules, an applicant for medical licensure in Michigan who is a United States or Canadian medical school graduate needs to submit proof of completion of a degree from a medical school that satisfies the standards under Michigan statutes, proof of passing scores for all steps of the USMLE, and proof of at least 1 year of postgraduate clinical training that satisfies the requirements under Michigan statutes. An applicant with a medical degree from outside of the United States or Canada must submit proof of certification from ECFMG that the applicant's medical school is included in the World Directory of Medical Schools [Michigan Administrative Rules R 338.2421-338.2437].

Minnesota: The Minnesota Board of Medical Practice is responsible for the licensure and regulation of medicine in Minnesota. Part 5600 of the Minnesota Administrative Code includes requirements for licensure, continuing education, and hearings before the Minnesota Board. According to those rules and requirements, an applicant for licensure needs to submit an original or certified copy of their diploma from the medical school the graduated from or if the applicant is enrolled in their final year at an approved medical school, a transcript of their credits and evidence that the applicant has completed the course of study in medicine prior to the final year. Applicants must also submit a "certificate of good moral character" signed by two licensed physicians and an unmounted recent photograph. [Minnesota Administrative Rules part 5600 section 5600.0200]. Chapter 147 of the Minnesota Statutes, or the Minnesota Medical Practice Act, also includes requirements for licensure. According to this chapter, in addition to the items described above, applicants must

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also have passed a comprehensive examination for initial licensure, such as the all three steps of the USMLE or COMLEX-USA. Applicants must also submit evidence of completion of one year of graduate clinical medical training [Minnesota Statutes chapter 147 section 147.02].

19. Contact Name Nilajah Hardin, Administrative Rules Coordinator	20. Contact Phone Number 608-267-7139
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ATTACHMENT A

1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

2. Summary of the data sources used to measure the Rule's impact on Small Businesses

3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- ☐ Less Stringent Compliance or Reporting Requirements
☐ Less Stringent Schedules or Deadlines for Compliance or Reporting
☐ Consolidation or Simplification of Reporting Requirements
☐ Establishment of performance standards in lieu of Design or Operational Standards
☐ Exemption of Small Businesses from some or all requirements
☐ Other, describe:

4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

5. Describe the Rule's Enforcement Provisions

6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

☐ Yes ☐ No
