



Mark Bowden

Interstate Medical Licensure Compact Commission - Bylaws and Rules Committee

In Care Of: Iowa Board of Medicine

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Mr. Bowden,

I am writing today on behalf American Well, a telehealth solution provider whose technology is widely deployed by the nation's largest healthcare delivery organizations spanning payers, delivery systems, governments, and national employers. We partner with physicians from across all of these organizations to bridge gaps in care and open much needed access to specialty clinicians and after hours capacity.

American Well appreciates being included in the ongoing stakeholder discussions regarding the Interstate Medical Licensure Compact, including the recent contemplation of the administrative rule Chapter 5, "Expedited Licensure."

We would like to convey our formal support for the Compact, as well as offer some recommendations on how to maximize its impact on the delivery of quality healthcare. As more physicians embrace multi-state practice, and technologies like telehealth as a way to increase access to quality care, it is imperative to modernize policies which support efforts to address the health care needs of patients across the nation. The Interstate Medical Licensure Compact is one such piece of vital policy.

The concept that physicians can only provide care in the state where they are physically located has lingered in the current licensure environment. Dealing with 50 varied licensure application processes is onerous and time consuming, creating a barrier that stops many from projecting their clinical expertise across state lines. The Interstate Medical Licensure Compact will reverse this paradigm, by creating a new pathway to expedite multi-state licensing for physicians seeking to practice medicine in multiple states.

We are greatly encouraged that seventeen states across the country are participating in the Compact and have agreed legislatively to share information with each other and work together to significantly streamline the licensing process.

However, given the major gaps in care, rural healthcare challenges, and increasing wait times that leave patients without the care they need, we encourage the Commission to consider opening up the Compact by increasing the number of physicians who can participate.

Whereas the administrative rule Chapter 5, “Expedited Licensure” defines the state of principal license as “*a member state where a physician holds a license to practice medicine and which has been designated as such by the physician for purposes of registration and participation in the Compact*”, the Model Policy states that said state of Principal Licensure must be:

- (1) the state of primary residence for the physician, or
- (2) the state where at least 25% of the practice of medicine occurs, or
- (3) the location of the physician's employer, or
- (4) if no state qualifies under subsection (1), subsection (2), or subsection (3), the state designated as state of residence for purpose of federal income tax

These restrictions do not allow for physicians, legitimately licensed and overseen by member states, who may not work or reside in a member state, to participate in the Compact. These physicians are still beholden to member state Medical Practice Acts, licensure requirements, fees, and rules, and can play a vital role in creating access to care.

We encourage the Commission to create a path forward for these physicians.

In summary, we believe the Compact is a tremendous step forward for healthcare delivery, and offer our ongoing collaboration and support. Thank you for your consideration of our comments and dedication to implementing this critical piece of policy.

With appreciation,

A handwritten signature in black ink, appearing to read 'Kofi Jones', with a stylized flourish at the end.

Kofi Jones  
VP of Government Affairs  
American Well