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Task force recommends tapping state's foreign-trained physicians

Addressing barriers is a key strategy for meeting primary care needs in rural and underserved areas. Minnesota's immigrant physicians are an underused resource that could provide primary care where it's needed most, according to the 2015 report of the Task Force on Foreign-Trained Physicians. Created by the 2014 Legislature, the Task Force report calls for Minnesota to become a national leader in addressing barriers that prevent hundreds of experienced physicians from practicing. The task force found that creating pathways for these doctors to practice would enhance Minnesota's primary care workforce and help with important policy issues such as a physician shortage, an aging population, persistent health disparities, the needs of a diversifying population, and mounting health costs.

In the most thorough state-level study yet, the 15-member task force issued the following findings and recommendations:

- Minnesota is currently home to an estimated 250 to 400 unlicensed immigrant physicians.
- Minnesota's largest immigrant and refugee communities are underrepresented among the state's physicians.
- Integrating more immigrant physicians could result in significant cost savings to the state, including expenses associated with preventable hospitalizations and chronic disease. One study suggests Minnesota savings of over \$63 million by tapping foreign-trained physicians for medically underserved areas.
- Immigrant physicians face significant barriers such as securing a medical residency, a necessary licensing step.
- These obstacles could be addressed with strategic, coordinated, public-private action.

The task force included representatives from health systems, higher education, nonprofits, government, and foreign-trained physicians themselves.

Legislation to Bolster Minnesota's Immigrant Physician Workforce

Task Force leaders support legislation to implement the Report's recommendations and expand the number of qualified immigrant physicians working in Minnesota. The legislation will:

1. Create a statewide Council on International Medical Graduates

New relationships were forged in the Task Force, and the Council will guide future efforts. Membership will include the U of M, Mayo, Minnesota Medical Association, organizations serving immigrant, refugee and foreign physician communities, employers, Board of Medical Practice, MDH, DEED and others

2. Provide support services to prepare immigrant physicians to navigate the steps to licensure

Services will include career guidance and assessment of readiness for clinical practice or residency, licensing test preparation, a clinical preparation program, encouraging residency programs to look beyond the date of medical school graduation; dedicated residency positions, and apprenticeships in rural and underserved areas. The Council will also develop a streamlined physician assistant pathway open to immigrant physicians.

3. Explore new licensure options for immigrant physicians and make recommendations to the legislature.

The Council and the Board of Medical Practice will develop licensing options for apprenticeship status, more direct licensure options for immigrant physicians, and permanent limited licensure. The bill envisions bringing consensus stakeholder recommendations to the 2017 Legislature.

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