

Dear Senator Hoffman,

My name is Aaron Kusano and I am a lifelong Alaskan, product of the Alaska WWAMI medical school program and soon (I hope) to be new addition to the Alaska physician community. I write to you regarding the Alaska medical licensing procedure in order to highlight several areas in dire need of change so that eager physicians, like me, can be licensed in a safe and efficient manner and start to care individuals across our state. Our current system is actually a deterrent to many new graduates. In the face of a practicing physician shortage, we are creating hurdles that will keep physicians from coming to Alaska.

I began my application process for an Alaska medical license in the first week of March 2015, nearly six months ago. Built in inefficiencies and redundancies have created lengthy delays and to this day I still await licensing and cannot care for patients. Having been through the licensing process in California and Washington and researched each of the 50 US Medical Boards websites, I hope to provide some insight and practical suggestions for improvement.

1. Alaska requires a Post Graduate Verification Form to be filled out by hospital programs to verify completion of internship and residency. In addition to this, there is a redundant request that a notarized copy of certificate/diploma is required.
  - a. I have had several delays as an embossed original copy was not acceptable. Graduate medical education hospitals are not like universities where they have staff, resources or experience to have all documents notarized and thus embossed hospital seal is a standard. This was not acceptable to the Board.
  - b. Additional delays have been experienced by other individuals because of this certificate/diploma requirement. A physician, who already had approved verification paperwork, met further delays because of the need to translate his “foreign language diploma”... the diploma is from Harvard and in Latin.
  - c. In lieu of a notarized copy of the certificate/diploma, a letter is requested to the Board stating dates of enrollment, indication of good standing and if any disciplinary action was taken. This is exactly the same information contained on the Post Graduate Verification form.

SOLUTION 1: Only one other state (Indiana) has this same redundant requirement for notarized copy of diploma as all others rely on a simple post graduate verification form which is completed by program officials and suffices to prove completion of post graduate training. The redundant requirement of needing notarized copies of postgraduate certificates/diplomas should be removed.

2. The Alaska medical licensing process does not respond to any inquiries regarding status of an individual’s application and provides no means of an online status check. In addition to this, updates as to missing documents or further information needed are given only on a once per month basis. Individual inquiries by email or phone for status update are not answered.
  - a. This builds in excessive delays as an applicant cannot know in a timely manner if a document was received or if they need to provide additional documentation. If a document is missing, it means one more month to hear if it has been received. If that document needs further information, there is yet another month built in delay. This quickly compounds creating excessive delays.

SOLUTION 2: Thirty-seven state medical boards offer means by which applicants can check on the status of their application, most of them through an online status check. This minimizes the delays, reduces the work-time spent by the medical board staff answering phone calls/responding to emails and allows the applicant to be proactive in making sure all documentation has been received other than waiting one month in between updates. Alaska should use an online status check at a minimum, and as you will see below, should consider moving towards an online application system now that there is a centralized application option.

3. Items 1 and 2 above may be addressed by adjusting documentation requirements and moving towards an online application which is currently being used by 26 US Medical Boards.

a. Online applications allow for reduction in paper clutter and inherent delays in snail mail.

b. These can integrate application status updates as mentioned in item 2

c. Alaska already uses the Federation Credentials Verification Service (FCVS), a means by which the Federation of State Medical Boards (FSMB) serves as a central repository of credential verification. The FSMB also offers a centralized Uniform Application (<http://www.fsmb.org/licensure/uniform-application/>) which is a centralized application service for medical licensing, currently in use by 19 states.

I am honored by the opportunity to return and practice in Alaska and when presented with the opportunity last spring, withdrew from a clinical fellowship at Stanford in order to return to my home which has given me so much. I know that recent graduates like me, facing uncertain start dates and with other predictable options in the lower 48, may not have the same resolve and patience. With our practicing physician shortage, ultimately our patients are affected most.

I hope that this has been informational and urge you to speak with your colleagues about our medical licensing process and ways that we can improve. I am always available to answer any further questions, brainstorm or on my own time conduct any fact finding projects that may be helpful.

Thank you for your time.

Sincerely,

Aaron

Aaron S. Kusano, MD, SM

Alaska WWAMI E'04