

**Support:**

- Increasing patient access to dermatologic care through licensure portability
- Expediting medical licensure processes for qualified physicians who wish to practice in multiple states
- Requiring physicians to be licensed in the state where the patient is located at the time of the physician-patient encounter

**Oppose:**

- Creating unnecessary bureaucratic burdens to physician licensure which impedes patients' access to care
- Removing regulatory oversight of licensure and the practice of medicine from the state of jurisdiction

**Licensure portability increases access to health care, especially for patients in underserved or rural areas.** State regulations regarding licensure reciprocity for physicians licensed in another state can be overly burdensome and limit the ability of a physician to reach patients that need care the most. Potential benefits of licensure portability include easing physician shortages in rural and underserved areas and facilitating specialist consultations for patients with complicated illnesses.<sup>i</sup>

**Established, eligible physicians should have access to a streamlined process to obtain medical licensure in additional states.** Qualified physicians who have no license restrictions, a clean disciplinary history, and no pending investigations should be afforded the opportunity to seek unrestricted licensure in another jurisdiction without having to navigate through the lengthy licensure process. Currently, in many states, physicians who are already licensed in one state will have to go through the entire licensure process for every state that they wish to practice in. Depending on the state, processing an application for medical licensure can take anywhere between 3 months and a year even though there is little variation in the requirements for licensure between states. Model legislation, such as the Federation of State Medical Board's "Interstate Medical Licensure Compact,"<sup>ii</sup> complements the existing licensing and regulatory authority of state medical boards while also implementing a streamlined licensure process. With this system, a physician submits their credentials to the Compact Commission which verifies the physician's eligibility and allows for qualified physicians to apply for an expedited license, foregoing the existing, lengthy licensure process.

**The practice of medicine occurs where the patient is located, rather than where the provider is located.** This patient-centered model is the nationwide standard that ensures that state medical boards have the capacity to regulate physicians treating patients within the borders of their state. Changing the location of care to where the provider is located undermines state boards' ability to protect patients receiving medical care in their state and would make it difficult for patients to quickly identify and report adverse actions to the state medical board of jurisdiction.

*Approved by the ASDSA Board of Directors: October 2016  
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<sup>i</sup> Steinbrook R. Interstate Medical Licensure: Major Reform of Licensing to Encourage Medical Practice in Multiple States. *JAMA*. 2014;312(7):695-696. doi:10.1001/jama.2014.9809.

<sup>ii</sup> Federation of State Medical Boards: [http://licenseportability.org/wp-content/uploads/2016/05/InterstateCompactMay24\\_2016.pdf](http://licenseportability.org/wp-content/uploads/2016/05/InterstateCompactMay24_2016.pdf)  
Additional citation: <https://www.aad.org/Forms/Policies/Uploads/PS/PS-Teledermatology.pdf>