

Most inactive physicians retain licenses, return to practice without competency review

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One in eight physicians have been inactive in the state where they are licensed for at least a year, and most states do not require them to undergo competency tests or retraining when they return to actively practicing medicine.

Because of the lack of regulation, patient safety could be compromised in some instances, say researchers at the University of Michigan Child Health Evaluation and Research (CHEAR) Unit and the American Board of Pediatrics.

"Studies have shown that even once-competent physicians may be at risk of losing diagnostic and procedural skills during a period of inactivity," says Gary L. Freed, M.D., M.P.H., the lead author of a pair of studies in the new issue of the journal *Pediatrics*.

"States must begin to address this issue," says Freed, chief of the Division of General Pediatrics and director of the Child Health Evaluation and Research (CHEAR) Unit at the U-M Health System.

"The public deserves no less."

In one of the new studies, researchers sent a questionnaire by mail to pediatricians. Of the more than 4,600 pediatricians who responded, about 12 percent indicated they had periods of clinical inactivity of at least a year. Women were most likely to cite caring for their children as a reason for an absence, while men most often had made a career change to a non-clinical position.

In the other study, the researchers conducted telephone interviews with all 64 state allopathic and osteopathic medical licensing boards in the United States. They found:

- 34 percent of state licensing boards query physicians about their clinical activity when they first receive their licenses and when they renew.
- Most states allow physicians to hold or renew an active license, even though they may not have cared for a patient in years.
- Only the District of Columbia requires a minimum number of patient visits to maintain an active license.
- Five states allow physicians with inactive licenses to practice medicine, while seven states allow physicians with retired licenses to practice.

In general, Freed notes, "few states have any mechanism to assess the competency of clinically inactive physicians who return to active practice."

What can be done? The Federation of State Medical Boards (FSMB) formed a committee that has developed a model policy for state regulations that would require physicians to demonstrate their continuing competence periodically. This policy, currently in draft form, would include a self-evaluation; demonstration of competence in medical knowledge, patient care and other areas; and demonstration for accountability for performance in practice.

For state licensing boards to implement these recommendations, state legislatures must give the authority to the boards to enact the rules. Still, the researchers note, state medical boards should consider the FSMB recommendations as a way of ensuring that physicians returning to active status are fully competent to treat patients.

Citations: "Protecting the Public: State Medical Board Licensure Policies

for Active and Inactive Physicians," and "Clinical Inactivity Among Pediatricians: Prevalence and Perspectives," *Pediatrics*, Vol. 123, Number 2, Feb. 2009.

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