



HOUSE BILL 67: Healthcare Workforce Reforms, Part I: Interstate Medical Licensure Compact

2025-2026 General Assembly

Analysis of: S.L. 2025-37, Part I

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Part I of S.L. 2025-37 (House Bill 67) makes North Carolina a member of the Interstate Medical Licensure Compact (Compact), which creates a voluntary, expedited pathway to state licensure for physicians who want to practice medicine in multiple states. Licenses issued under the Compact would be full and unlimited licenses to practice medicine in any state that is a member of the Compact.

In order to receive a license under the Compact, a physician must meet the following criteria: (i) graduation from an accredited medical school, (ii) passing each component of United States Medical Licensing Examination within three attempts, (iii) successfully completing graduate medical education, (iv) holding a specialty certification, (v) possessing an unrestricted license to practice medicine, (vi) not having criminal convictions, (vii) not having been professionally disciplined, (viii) not having had a controlled substance license or permit suspended, and (ix) not being under active investigation.

The application process requires the physician seeking Compact licensure to do the following: (i) file an application with member board of the state of principal license, (ii) undergo a criminal background check, (iii) have the application evaluated by the medical board of the primary state of licensure, and (iv) pay any fees and complete the registration process outlined by the Interstate Medical Licensure Compact Commission.

Physicians licensed under the Compact must designate a state of principal license in the application process. The state of principal license is the state where the physician possesses a license to practice medicine and is either (i) the principal residence of the physician, (ii) where the physician conducts 25% of their practice in the state, or (iii) the location of the physician's employer.

If a license issued by a medical board in the state of principal license is revoked, then all licenses issued to the physician by medical boards in other member states will automatically be revoked. If a license is revoked by a medical board not in the state of principal licensure, then any Compact licenses granted to the physician would be revoked for 90 days to allow the medical boards in other member states time to investigate. Any disciplinary action taken against a physician would be deemed unprofessional conduct subject to discipline by medical boards in other member states.

The Interstate Medical Licensure Compact Commission (Commission) is the body charged with administering the Compact. It is composed of two voting representatives from each member state. The Interstate Commission must meet at least once a year, provide public notice of all meetings, make its official records available, and establish an executive committee. Its powers include (i) promulgating rules, (ii) issuing advisory opinions, (iii) enforcing compliance with the Compact, (iv) establishing a budget, (v) reporting annually to the legislatures of member states, (vi) maintaining records, and (vii) performing such functions necessary to achieve the purposes of the Compact, some of those functions include creating application and renewal licensure processes. The Commission will also establish a database of all physicians who are either licensed or have applied for licensure. Medical boards of each Compact member

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state must report to the Commission any public action, complaint, or disciplinary information against a physician with a Compact license. Member boards would be able to share information with other member boards upon request.

The North Carolina Medical Board has the authority to implement a fee for licensing physicians through the Compact.

This Part becomes effective January 1, 2026.