I Mina'trentai Ocho Na Liheslaturan Guåhan
BILL STATUS

BILL NO.	SPONSOR	TITLE	DATE INTRODUCED	DATE REFERRED	CMTE REFERRED	FISCAL NOTES	PUBLIC HEARING DATE	DATE COMMITTEE REPORT FILED	NOTES
206-38 (COR) As amended by the Committee on Health and Veterans Affairs; and substituted and amended on the Floor.	Telo T. Taitague V. Anthony Ada Chris Barnett Frank F. Blas, Jr. Shelly V. Calvo Christopher M. Dueñas Jesse A. Lujan Tina Rose Muña-Barnes William A. Parkinson Sabrina Salas Matanane Joe S. San Agustin Therese M. Terlaje	AN ACT TO *ADD* A NEW § 12202 (c), *AMEND* § 12205 (c), AND § 12206, *ADD* A NEW 12206.1 AND *AMEND* § 12207, ALL OF ARTICLE 2, CHAPTER 12, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO BUILDING A MORE DIVERSE AND SUSTAINABLE HEALTHCARE WORKFORCE ON GUAM BY EXPANDING LICENSURE PATHWAYS FOR FOREIGN MEDICAL GRADUATES AND ESTABLISHING A LOCAL CONRAD 30 J-1 PHYSICIAN WAIVER PROGRAM.	10/10/25 4:04 p.m. 10/22/25 3:59 p.m.	10/24/25	Committee on Health and Veterans Affairs.	Request: 10/24/25 11/4/25	2/11/26 2:00 p.m.	3/3/26 As Amended.	

SESSION DATE	TITLE	DATE PASSED	TRANSMITTED	DUE DATE	NOTES
3/23/26	AN ACT TO *ADD* A NEW § 12202(c), *AMEND* §§ 12205(c), 12206, 12207, AND *ADD* NEW §§ 12206.1 THROUGH 12206.7, ALL OF ARTICLE 2, CHAPTER 12, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO BUILDING A MORE DIVERSE AND SUSTAINABLE HEALTHCARE WORKFORCE ON GUAM BY EXPANDING LICENSURE PATHWAYS FOR FOREIGN MEDICAL GRADUATES, ESTABLISHING A LIMITED LICENSURE PATHWAY FOR INTERNATIONALLY TRAINED PHYSICIANS IN GOVERNMENT HEALTHCARE FACILITIES, AND CODIFYING GUAM'S PARTICIPATION IN THE CONRAD 30 J-1 PHYSICIAN WAIVER PROGRAM.	3/27/26	3/27/26	4/8/26	

COPY

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
Thirty-Eighth Guam Legislature

March 27, 2026

The Honorable Lourdes A. Leon Guerrero
I Maga'hågan Guåhan
Ufisinan I Maga'håga
Hagåtña, Guam 96910

Dear *Maga'håga* Leon Guerrero:

Transmitted herewith are Bill Nos. 65-38 (COR), 131-38 (COR), 141-38 (COR), 142-38 (COR), 205-38 (COR), 214-38 (COR), 218-38 (COR), 228-38 (COR), 231-38 (COR), 233-38 (COR), 234-38 (COR), 237-38 (COR), 245-38 (COR), 254-38 (COR), 262-38 (LS), 263-38 (LS), and 279-38 (COR), and Substitute Bill Nos. 206-38 (COR) and 246-38 (COR) which were passed by *I Mina'trentai Ocho Na Liheslaturan Guahan* on March 27, 2026.

Sincerely,

Senator Sabrina Salas Matanane
Legislative Secretary

POTII Jesse J. Castro

8:24pm, 3.27.26

Enclosure (19)

COPY

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
2026 (SECOND) Regular Session

CERTIFICATION OF PASSAGE OF AN ACT TO *I MAGA'HÅGAN GUÅHAN*

This is to certify that **Substitute Bill No. 206-38 (COR), "AN ACT TO *ADD* A NEW § 12202(c), *AMEND* §§ 12205(c), 12206, 12207, AND *ADD* NEW §§ 12206.1 THROUGH 12206.7, ALL OF ARTICLE 2, CHAPTER 12, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO BUILDING A MORE DIVERSE AND SUSTAINABLE HEALTHCARE WORKFORCE ON GUAM BY EXPANDING LICENSURE PATHWAYS FOR FOREIGN MEDICAL GRADUATES, ESTABLISHING A LIMITED LICENSURE PATHWAY FOR INTERNATIONALLY TRAINED PHYSICIANS IN GOVERNMENT HEALTHCARE FACILITIES, AND CODIFYING GUAM'S PARTICIPATION IN THE CONRAD 30 J-1 PHYSICIAN WAIVER PROGRAM,"** was on the 27th day of March 2026, duly and regularly passed.

Frank F. Blas, Jr
Speaker

Attested:

Sabrina Salas Matanane
Legislative Secretary

This Act was received by *I Maga'hågan Guåhan* this 27 day of March 2026, at 8:24 o'clock P.M.

For Assistant Staff Officer
Maga'håga's Office
Executive Security
PO III Jesse J Castro

APPROVED:

Lourdes A. Leon Guerrero
I Maga'hågan Guåhan

Date:_____

Public Law No._____

I MINA'TRENTAI OCHO NA LIHESLATURAN GUÅHAN
20256 (SECOND) Regular Session

Bill No. 206-38 (COR)
As amended by the Committee on Health
and Veterans Affairs; and substituted and amended on the Floor.

Introduced by:

Telo T. Taitague
V. Anthony Ada
Chris Barnett
Frank F. Blas, Jr.
Shelly V. Calvo
Christopher M. Dueñas
Jesse A. Lujan
Tina Rose Muña-Barnes
William A. Parkinson
Sabrina Salas Matanane
Joe S. San Agustin
Therese M. Terlaje
Vincent A.V. Borja
Eulogio Shawn Gumataotao
Sabina Flores Perez

AN ACT TO *ADD* A NEW § 12202(c), *AMEND* §§ 12205(c), 12206, 12207, AND *ADD* NEW §§ 12206.1 THROUGH 12206.7, ALL OF ARTICLE 2, CHAPTER 12, TITLE 10, GUAM CODE ANNOTATED, RELATIVE TO BUILDING A MORE DIVERSE AND SUSTAINABLE HEALTHCARE WORKFORCE ON GUAM BY EXPANDING LICENSURE PATHWAYS FOR FOREIGN MEDICAL GRADUATES, ESTABLISHING A LIMITED LICENSURE PATHWAY FOR INTERNATIONALLY TRAINED PHYSICIANS IN GOVERNMENT HEALTHCARE FACILITIES, AND CODIFYING GUAM'S PARTICIPATION IN THE CONRAD 30 J-1 PHYSICIAN WAIVER PROGRAM.

BE IT ENACTED BY THE PEOPLE OF GUAM:

Section 1. Legislative Findings and Intent. *I Liheslaturan Guåhan* finds that Guam continues to experience severe shortages of licensed physicians, particularly in specialty fields. These shortages have negatively impacted access to timely, high-quality healthcare services for the people of Guam. *I Liheslaturan Guåhan* further finds that foreign medical graduates (FMGs), many of whom are U.S. trained or have completed rigorous postgraduate medical education consistent with or substantially equivalent to Accreditation Council for Graduate Medical Education (ACGME) standards and have obtained certification through recognized credentialing bodies such as the Educational Commission for Foreign Medical Graduates (ECFMG), represent a critical and underutilized pool of qualified medical professionals.

I Liheslaturan Guåhan finds that despite the availability of these qualified physicians, the current licensure pathway in Guam does not provide sufficient flexibility to recognize FMGs who have completed appropriate postgraduate training, who are licensed in other U.S. jurisdictions, or have passed comparable international medical examinations. As a result, otherwise qualified physicians may face unnecessary barriers to practice on Guam.

Furthermore, *I Liheslaturan Guåhan* finds that Guam is already eligible to participate in the federal Conrad 30 J-1 Waiver Program, which permits U.S.-trained FMGs in J-1 visa status to remain in the United States by serving in designated shortage areas for three (3) years. However, this program has not been fully utilized as a recruitment tool to address physician shortages on Guam. This Act does not create or expand the program or alter federal eligibility requirements. Rather, it codifies into Guam law the designation of the Department of Public Health and Social Services as the state-equivalent health agency responsible for administering the program in accordance with federal law and establishes reporting requirements

to promote transparency and more effective utilization of available waiver opportunities.

I Liheslaturan Guåhan therefore finds that amending current law to clarify recognition of substantially equivalent training, expand licensure by endorsement where appropriate, and ensure that qualified FMGs are not excluded solely due to differences in jurisdictional training pathways will modernize Guam's medical licensing system, harmonize it with national best practices, and strengthen the Guam Board of Medical Examiners' authority to apply rigorous, internationally recognized credentialing standards. This Act further clarifies Guam's participation in the federal Conrad 30 J-1 Physician Waiver Program by codifying the designation of the Department of Public Health and Social Services as the state-equivalent health agency responsible for administering the program in accordance with federal law.

I Liheslaturan Guåhan finds that Guam continues to face a critical shortage of physicians, particularly within government of Guam-funded healthcare facilities, including the Guam Memorial Hospital Authority, the Department of Public Health and Social Services, and other public and federally-supported providers. These shortages contribute to reduced access to care, increased wait times, and strain on the existing healthcare workforce.

It is the intent of this Act to establish a targeted and controlled pathway to allow qualified internationally-trained physicians to provide medical services within government healthcare systems, while maintaining rigorous standards for education, licensure, competency verification, and professional conduct to ensure patient safety and quality of care.

This pathway is not intended to displace locally licensed physicians or reduce opportunities for domestically trained providers, but to supplement the healthcare workforce in areas where shortages exist.

This Act further establishes two distinct licensure pathways: (1) a general licensure pathway for foreign medical graduates; and (2) a limited, service-based pathway for internationally-trained physicians, which is time-limited and conditioned on continued service within government of Guam-funded healthcare facilities.

Section 2. A new § 12202(c) is hereby *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"(c) For the purposes of this article, the definition of "Graduates of Foreign Medical Schools" means individuals who obtained a degree in medicine, osteopathy, or podiatry outside the United States or Canada, which would qualify the individual to practice medicine, osteopathy, or podiatry in the jurisdiction in which the degree was obtained."

Section 3. § 12205(c) of Chapter 12, Title 10, Guam Code Annotated, is hereby *amended,* to read:

"(c) The applicant shall have satisfactorily completed at least thirty-six (36) months of progressive postgraduate medical training approved by the Board or by a private nonprofit accrediting body approved by the Board in an institution in the United States, its territories or possessions, or Canada approved by the Board or by a private nonprofit accrediting body approved by the Board. Provided, however, that this subsection shall not apply to applicants who are graduates of foreign medical schools governed by § 12206 of this Chapter. Such applicants shall be subject to the postgraduate training requirements, credentialing standards, and licensure conditions set forth in § 12206 and any regulations promulgated thereunder."

Section 4. § 12206 of Chapter 12, Title 10, Guam Code Annotated, is *amended*, to read:

"**§ 12206. Graduates of Foreign Medical Schools.**

(a) Applicants who are graduates of foreign medical schools shall possess the degree of Doctor of Medicine or Osteopathy, Bachelor of Medicine or Osteopathy, or a Board-approved equivalent based on satisfactory completion of educational programs acceptable to the Board.

(b) Applicants who are graduates of foreign medical schools shall be eligible by virtue of their medical education and training for unrestricted licensure or authorization to practice medicine in the country in which they received that education and training.

(c) Applicants who are graduates of foreign medical schools shall have passed an examination acceptable to the Board that adequately assesses the applicants' basic medical knowledge.

(d) Applicants who are graduates of foreign medical schools shall be certified by the Educational Commission for Foreign Medical Graduates or its Board approved successor(s), or by an equivalent Board approved entity.

(e) Applicants who are graduates of foreign medical schools shall have a demonstrated command of the English or Chamorro language satisfactory to the Board.

(f) The Board shall be authorized to establish regulations requiring all Applicants who are graduates of foreign medical schools to satisfactorily complete at least thirty-six (36) months of Board approved, progressive postgraduate medical training. Applicants shall complete no less than thirty-six (36) months of postgraduate training, which may include training completed outside the United States if the Board determines such training to be substantially equivalent to Accreditation Council for Graduate Medical Education (ACGME) standards. For the purposes of this Chapter, "substantially equivalent" means postgraduate training that includes supervised, progressively responsible clinical experience with structured

assessment of competency, and that is recognized by an accrediting authority or governmental medical education regulator deemed acceptable by the Board.

(g) The Board shall adopt a rule related to recognizing and authenticating educational credentials for applicants who are graduates of foreign medical schools. Such rule shall include a requirement that the graduate's education be recognized by one or more medical education credentialing bodies, such as, but not limited to the Education Commission of Foreign Medical Graduates. Such rule may include consideration of whether the applicant's medical school is listed in the World Directory of Medical Schools (WDMS). All credentials, diplomas and other required documentation in a foreign language submitted to the Board by or on behalf of applicants who are graduates of foreign medical schools shall be accompanied by notarized English translations acceptable to the Board.

(h) Applicants who are graduates of foreign medical schools shall have satisfied all of the applicable requirements of the United States Immigration and Naturalization Service, including the U.S. Department of Homeland Security and U.S. Citizenship and Immigration Services regulations governing J-1 and H-1B physician waivers.

(i) Competency Standards. In evaluating an applicant who is a graduate of a foreign medical school for licensure under this Chapter, the Board shall require evidence of competency in the following domains, consistent with U.S. graduate medical education standards: Patient Care; Medical Knowledge; Practice-Based Learning and Improvement; Interpersonal and Communication Skills; Professionalism; and Systems-Based Practice. The Board shall promulgate rules establishing acceptable methods of documentation and evaluation of such competencies.

(j) Specialty Practice Experience. In addition to the requirements of this Section, an applicant who is a graduate of a foreign medical school shall demonstrate not less than three (3) years of independent clinical practice experience in the applicant's area of specialty, completed after the completion of postgraduate medical training. Such experience shall be verified in a manner prescribed by the Board. Experience obtained solely as a medical officer, intern, or house officer shall not satisfy this requirement unless the Board determines that such experience involved independent clinical responsibility consistent with specialty practice standards. This Subsection shall not apply to applicants for, or licenses issued under, §§ 12206.2 through 12206.7.

(k) Offer of Employment. An applicant who is a graduate of a foreign medical school seeking licensure under this Section shall provide proof of a bona fide offer of employment from a healthcare facility, clinic, or medical practice located on Guam. Such offer shall be verified in a manner prescribed by the Board and shall identify the intended practice setting and scope of services to be provided. This Subsection shall not apply to applicants for, or licenses issued under, §§ 12206.2 through 12206.7.

(l) Recent Clinical Practice Requirement. An applicant who is a graduate of a foreign medical school shall demonstrate active clinical practice within the five (5) years immediately preceding the date of application. The Board may, for good cause shown, waive or modify this requirement if the applicant demonstrates continued clinical competency through additional training, education, or assessment acceptable to the Board. This Subsection shall not apply to applicants for, or licenses issued under, §§ 12206.2 through 12206.7."

Section 5. A new § 12206.1 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.1 Guam Conrad 30 J-1 Physician Waiver Program.**

(a) The Department of Public Health and Social Services (DPHSS) is designated as the state-equivalent health agency for Guam for purposes of administering the Conrad 30 J-1 Physician Waiver Program pursuant to federal law.

(b) DPHSS shall administer the program in accordance with applicable federal statutes, regulations, and United States Department of State guidance governing the Conrad 30 J-1 Physician Waiver Program.

(c) DPSS shall submit an annual report to *I Liheslaturan Guåhan* detailing the number of waiver applications received, recommended, approved, and any compliance issues identified during the reporting period."

Section 6. A new § 12206.2 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.2. Internationally-Trained Physicians (ITPs) Interim Provisional License.**

(a) The Guam Board of Medical Examiners (GBME) may issue an Interim Provisional License, a limited licensed, to Internationally-Trained Physicians (ITPs) to practice medicine to a physician when the Board has received satisfactory verification of all of the following requirements:

(1) The applicant has been offered employment as a physician at a government of Guam-funded healthcare facility, such as but not limited to Guam Memorial Hospital Authority (GMHA), Department of Public Health Social Services (DPHSS), Federally Qualified Health Centers (FQHCs), or the Guam Behavioral Health and Wellness Center (GBHWC);

(2) The applicant has a current and active license in good standing to practice medicine in a foreign country.

(3) The applicant previously completed at least one hundred thirty (130) weeks of medical education at a medical school listed in the World Directory of Medical Schools and is certified by the Educational Commission for Foreign Medical Graduates or its Board-approved successor(s), or by an equivalent Board-approved entity, and meets one of the following requirements:

(A) The applicant has completed three (3) years of progressive postgraduate training in a graduate medical education program approved by the applicant's country of licensure; or

(4) The applicant has demonstrated competency to practice medicine in one of the following ways:

(A) Successfully passed each part of the United States Medical Licensing Examination (USMLE) or an equivalent examination recognized by the Board; or

(B) Successfully passed each part of a nationally recognized standard medical licensing examination from a country that is Board-approved and that meets all of the following requirements:

(i) Tests for the ability to practice medicine;

(ii) Tests for medical knowledge, skills, and understanding of clinical science essential for providing patient care;

(iii) Tests for communication and interpersonal skills; and

(iv) Includes an interactive testing component; or

(C) Received specialty board certification as approved by any of the following:

(i) The American Board of Medical Specialties;

(ii) The Bureau of Osteopathic Specialists of the American Osteopathic Association;

(iii) The Royal College of Physicians and Surgeons of Canada; or

(iv) Any other specialty board recognized pursuant to rules adopted by the Board; or

(D) Submits to a comprehensive assessment demonstrating clinical competence by a program approved by the Board. Alternatively, the Board may waive this requirement and issue a temporary license, requiring the applicant to successfully pass a Post-Licensure Assessment System, such as the Special Purpose Examination (SPEX), within one (1) year from the date of Board approval.

(5) The applicant has not had a license revoked, suspended, restricted, denied, or otherwise acted against in any jurisdiction and is not the subject of any pending investigations, in whole or in part.

(6) The applicant does not have any convictions involving violations of medical practice law or a conviction substantially equivalent to a felony. The applicant shall submit to a background check from both the jurisdiction of prior licensure and the Federal Bureau of Investigation (FBI).

(7) The applicant has demonstrated proficiency in English through a standardized assessment, documentation of medical

education completed entirely in English, or other evidence accepted by the Board.

(8) The applicant is legally authorized to work in the United States. An applicant may apply for an ITP License before receiving federal work authorization, but may not begin employment at government of Guam-funded healthcare facilities until receiving legal work authorization and is issued a License by the Board.

(9) The applicant must submit an application and pay a fee in accordance with rules adopted by the Board.

(A) If an applicant has not engaged in clinical practice for a period of twenty-four (24) or more consecutive months at the time the Board receives the application, the applicant shall complete a physical reentry program approved by the Board in the United States prior to being eligible for an Interim Provisional License under this Article."

Section 7. A new § 12206.3 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.3. Interim Provisional License to Permanent Limited License.**

(a) An Interim Provisional License holder shall be eligible for a Permanent Limited License after completing at least three (3) years of practice under the Interim Provisional License, if the licensee:

(1) Has successfully completed the assessment and evaluation requirements of § 12256;

(2) Has received an attestation from the participating healthcare facility that the licensee has demonstrated competence to

practice independently in all the current areas of the general competency domains;

(3) Has achieved a passing score on Step 3 of the USMLE within three (3) attempts;

(4) Has maintained the Interim Provisional License in good standing with no disciplinary actions;

(5) Has complied with all terms and conditions of the Interim Provisional License; and

(6) Has submitted a complete application and paid the applicable fee.

(b) A Permanent Limited License issued pursuant to this Section shall authorize the holder to practice medicine with full clinical autonomy, without direct supervision, but only at government of Guam-funded healthcare facilities approved by the Board.

(c) A Permanent Limited License holder shall not be eligible for:

(1) Conversion to a full and unrestricted license to practice medicine;

(2) Practice at private hospitals, private clinics, or private healthcare facilities;

(3) Participation in the Interstate Medical Licensure Compact; or

(4) Any other license category that would permit practice outside of government of Guam-funded healthcare facilities.

(d) The Board may, in its discretion, require additional supervised practice or remediation if the Board determines that the applicant has not demonstrated competence in one or more of the current general competency domains.

(e) A Permanent Limited License shall be subject to renewal in accordance with the same schedule and requirements applicable to full and unrestricted licenses, provided that the restriction to government of Guam-funded healthcare facilities shall remain in effect permanently and shall not be removed or modified."

Section 8. A new § 12206.4 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.4. Enforcement and Disciplinary Authority.**

(a) Holders of an Interim Provisional or Permanent Limited License issued pursuant to this Article shall be subject to the same disciplinary authority of the Board as holders of full and unrestricted licenses, including but not limited to suspension, revocation, and imposition of conditions.

(b) An Interim Provisional or Permanent Limited License shall be automatically suspended if the licensee ceases to be employed by a government of Guam-funded healthcare facility approved by the Board.

(c) The Board may immediately suspend an Interim Provisional License or Permanent Limited License if the Board determines that continued practice poses an imminent risk to patient safety.

(d) The holder of the Interim Provisional License or Permanent Limited License shall not practice medicine outside the confines of government of Guam-funded healthcare facilities. A violation of this provision is subject to penalties under Guam law, including fines not to exceed Five Hundred Dollars ($500.00) per offense, and may result in revocation of the License by the Board. The Board may, at its discretion, revoke the License at any time.

(e) An Interim Provisional License or Permanent Limited License shall become inactive if its holder ceases employment with the government of Guam-funded healthcare facilities.

(f) The Board shall retain jurisdiction over the holder of inactive Licenses.

(g) The Board, in coordination with the DPHSS' Health Professional Licensing Office (HPLO), shall collect and evaluate data on the implementation and success of this pathway to licensure, including, at a minimum:

(1) The number of applicants for licensure under this Section;

(2) The number of licenses issued and denied;

(3) Reasons for denial of applications;

(4) The applicant's licensing country and medical education background;

(5) The number of Interim Provisional and Permanent Limited Licenses granted following completion of each pathway;

(6) The number of complaints or disciplinary actions involving ITP License holders;

(7) The specialties and practice settings of applicants; and

(8) The geographic distribution of licensees practicing in Guam.

(h) On or before December 1 of each year, the Board shall report the information collected pursuant to (g) to *I Maga'håga/I Maga'låhi* and the Speaker of *I Liheslaturan Guåhan*."

Section 9. A new § 12206.5 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.5. Determination of Need Requirement.**

As part of offering employment to an ITP, the hiring authority of the government of Guam funded healthcare facility such as the CEO/Administrator of GMH, the Director of the DPHSS, the Chief Executive Officer of the FQHCs as applicable, or the Director of GBHWC upon receiving approval, as applicable, from their respective board or council, shall demonstrate the need to hire an ITP to provide adequate coverage in the provision of medical care at their healthcare agency to the Board by filing a Determination of Need statement that includes the following attestations:

(a) There are not sufficient individuals able, willing, qualified, and available at the location of employment with the government of Guam-funded healthcare agency at the time of the offer; and

(b) The employment of the ITP will not adversely affect the wages and working conditions of individuals similarly employed at the qualifying location.

A copy of the job offer for employment with the government of Guam-funded healthcare agency must be submitted to the Board, along with the filing of the Determination of Need statement."

Section 10. A new § 12206.6 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§ 12206.6. Rulemaking.**

(a) The Board shall adopt rules necessary to issue an ITP License. The Board is authorized to develop the Internationally-Trained Physicians Interim Provisional Licence and Permanent Limited Licence pathway, to include, but not limited to, the rules and regulations governing the application, supervision, management, and execution of the Internationally-Trained Physicians program. The Board shall be guided, at a minimum, by the latest

Federation of State Medical Boards general competencies endorsed by the Coalition of Physician Accountability.

(b) The Board shall provide for the issuance of an ITP Interim Provisional License for a term not to exceed four (4) years from the date of issuance. An ITP may apply for a Permanent Limited License during the third year of the ITP's service. If granted, the Permanent Limited License shall be valid for the remainder of the initial four (4)-year term. It may be extended for one (1) additional term not to exceed two (2) years, for a total period not to exceed six (6) years.

(c) The Board shall work with government of Guam-funded healthcare facilities, starting with GMH and the HPLO of DPHSS, for the first eighteen (18) months following the enactment of this provision, to offer employment to an ITP at GMH. After the eighteen (18)-month period has elapsed, the Board shall accept applications from other government of Guam-funded healthcare facilities.

(d) The Board shall issue an Interim Provisional License or Permanent Limited License to ITPs who meet the requirements. The Board shall approve and grant exceptions to countries on a case-by-case basis, provided all other requirements are met, and it is evident that the employment of the ITP is to the benefit of the public."

Section 11. A new § 12206.7 is *added* to Chapter 12, Title 10, Guam Code Annotated, to read:

"**§12206.7. Construction; Separate Licensure Pathways.**

(a) Licensure under §§ 12206.6 through 12206.10 shall constitute a distinct, limited, and service-based pathway separate from licensure under § 12206.

(b) The requirements of §§ 12206 and 12207 shall not apply to applicants for, or licenses issued under, §§ 12206.6 through 12206.10, unless expressly provided in this Chapter.

(c) No license issued under §§ 12206.6 through 12206.10 shall serve as a basis for endorsement, reciprocity, or conversion to a full and unrestricted license under this Chapter."

Section 12. § 12207 of Chapter 12, Title 10, Guam Code Annotated, is hereby *amended*, to read:

"**§ 12207. Licensure by Endorsement and Temporary and Special Licensure.**

(a) Licensure Without Examination. The Board is authorized, at its discretion, to issue a license by endorsement to an applicant who:

(1) has complied with all current medical licensing requirements save that for examination;

(2) has passed a medical licensing examination given in English in another state, the District of Columbia, a territory or possession of the United States or Canada, provided the Board determines that examination was equivalent to its own current examination;

(3) has a valid current medical license in another state, the District of Columbia, a territory or possession of the United States or Canada; and

(4) Required to take SPEX if last examination was taken more than ten (10) years ago.

(5) holds a valid certification issued by the Educational Commission for Foreign Medical Graduates (ECFMG) or its Board approved successor(s), or by an equivalent Board approved entity; and

has passed a medical licensing examination comparable to the United States Medical Licensing Examination (USMLE), or another examination approved by the Board.

(b) Endorsement for Certified Applicants: The Board is authorized, at its discretion, to issue a license by endorsement to an applicant who:

(1) has complied with all current medical licensing requirements save that for examination; and

(2) has passed the examination of and been certified by a certifying agency recognized by the Board (e.g., the National Board of Medical Examiners or the National Board of Examiners for Osteopathic Physicians and Surgeons), provided the Board determines that examination was equivalent to its own current examination and was not a specialty board examination.

(3) has passed an international medical licensing examination comparable to the USMLE, as determined by the Board, and is verified by the ECFMG or its Board approved successor(s), or by an equivalent Board approved entity.

(c) Endorsement Examination: Notwithstanding any other provisions of the act, the Board is authorized to require applicants for full and unrestricted medical licensure by endorsement who have not been formally tested by a United States or Canadian medical licensing jurisdiction, or a comparable international medical licensing exam, a Board-approved medical certifying agency or a Board-approved medical specialty board within a specific period of time before application (e.g. eight (8) or ten (10) years to pass a written and/or oral medical examination approved by the Board for that purpose.)

(d) Provisional License- Foreign Medical Graduates. Notwithstanding subsections (a) and (b), the Board may require an applicant who completed postgraduate training outside an Accreditation Council for Graduate Medical Education (ACGME)- accredited program, to complete a period of supervised provisional licensure prior to issuance of unrestricted licensure.

(1) A provisional license issued pursuant to this subsection shall be limited to practice under supervision in an approved facility;

(2) During the provisional licensure period, the applicant shall not engage in independent practice and shall practice only within the scope approved by the Board and supervising physician. The Board may impose reasonable limitations on clinical privileges, procedural authority, prescribing authority, on-call responsibilities, and other practice activities as necessary to ensure patient safety;

(3) The applicant shall submit a Board-approved supervision plan identifying the supervising physician(s), scope of practice, and evaluation schedule, a method of oversight, including frequency of review and documentation requirements;

(4) The provisional period shall not exceed twelve (12) months, renewable once for good cause; and

(5) Conversion to unrestricted licensure shall require documented competency-based evaluations.

(6) The applicant shall demonstrate not less than three (3) years of independent clinical practice experience in the applicant's area of specialty, completed after the completion of postgraduate medical training. Such experience shall be verified in a manner prescribed by the Board. Experience obtained solely as a medical officer, intern, or

house officer shall not satisfy this requirement unless the Board determines that such experience involved independent clinical responsibility consistent with specialty practice standards. This subsection shall not apply to applicants for, or licenses issued under, §§ 12206.2 through 12206.7.

(7) The applicant shall demonstrate active clinical practice within the five (5) years immediately preceding the date of application. The Board may, for good cause shown, waive or modify this requirement if the applicant demonstrates continued clinical competency through additional training, education, or assessment acceptable to the Board. This subsection shall not apply to applicants for, or licenses issued under, §§ 12206.2 through 12206.7."

(e) Temporary Licensure. The Board is authorized to establish regulations for issuance of a temporary medical license for the intervals between Board meetings. Such a license should:

(1) be granted only to an applicant demonstrably qualified for a full and unrestricted medical license under the requirements set by the Medical Practice Act and the regulations of the Board; and

(2) automatically terminate on the date of the next Board meeting at which the holder could be considered for a full and unrestricted medical license.

(f) Special Purpose License to Practice Medicine Across Guam/State Lines. The Board is authorized, at its discretion, to issue a special purpose license to practice medicine across Guam lines to an applicant who:

(1) holds a full and unrestricted license to practice in at least one (1) other state or United States jurisdiction;

(2) has not had previous disciplinary or other action taken against him or her by any state or jurisdiction; and

(3) must be at least qualified to be licensed in Guam. Exceptions to the special purpose license to practice medicine across Guam lines include the following:

(A) the practice of medicine across state lines by a licensed physician on an irregular or infrequent basis, provided such practice occurs less than once a week or involves less than one percent (1%) of the physician's diagnostic or therapeutic practice;

(B) the informal practice of medicine by a licensed physician is without compensation or expectation of compensation. (The practice of medicine conducted within the parameters of a contractual relationship shall not be considered informal and shall be subject to regulation by the Guam Board of Medical Examiners.);

(C) physician specialist, or field of authority is not available locally; and

(D) the practice of medicine in terms of diagnosis and treatment of a patient is under the responsibility of a locally licensed physician.

(g) Special Licensure. The Board is authorized to issue conditional, restricted or otherwise circumscribed licenses as it determines necessary.

(h) Military Limited Volunteer Medical License.

(1) A physician who practices medicine on Guam under a license issued pursuant to this Subsection may only practice at the Department of Public Health and Social Services, the Guam Memorial

Hospital Authority, the Community Health Centers, or a clinic or outreach event that primarily provides services for indigent populations, and the physician shall not receive direct or indirect compensation or payment of anything of monetary value in exchange for the medical services rendered by the physician to the indigent patients.

(2) The Board is authorized to issue a Military Limited Volunteer Medical License to an applicant who:

(A) is licensed and in good standing as a physician in another state;

(B) maintains credentials within the military credentialing system and authorizes the Guam based Military Credentialing Office to provide to the Guam Board of Medical Examiners the required verification documents and military commander's approval; and

(C) agrees to be subject to Board rules and regulations, including those regarding disciplinary action, license registration and renewal, and continuing medical education, throughout the duration of the Military Limited Volunteer Medical licensure.

(3) A Military Limited Volunteer Medical License shall be issued

(A) at no charge to the applicant,

(B) be valid for a period of two (2) years, and

(C) may be renewed and maintained according to registration requirements as prescribed by the Board.

(4) The license shall be in effect upon receipt of the application packet by the Guam Board of Medical Examiners subject

to final review. This presumptive eligibility for licensure is contingent upon

(A) the appropriate military commander's authorization allowing the physician to practice in the community, and

(B) the appropriate collaborative sharing of information between the Military Credentialing Office and the Guam Board of Medical Examiners."

Section 13. Severability. If any provision of this Act or its application to any person or circumstance is found to be invalid or inorganic, such invalidity shall not affect other provisions or applications of this Act that can be given effect without the invalid provision or application, and to this end the provisions of this Act are severable.

Section 14. Effective Date. This Act shall be effective upon enactment.