# LICENSURE

## What basic qualifications must a physician meet to be eligible to obtain a medical license in Washington?

The basic eligibility requirements for obtaining a medical license in Washington differ depending upon whether the physician is a graduate of a medical school in the United States or Canada or is a foreign medical graduate.

Physicians who are graduates of a medical school in the United States or Canada must meet at least the following basic requirements:[[1]](#footnote-1)

* Graduation from a school of medicine approved by the Medical Quality Assurance Commission (MQAC).
* Completion of two years of postgraduate medical training in a program acceptable to the MQAC. (Physicians graduating before July 28, 1985 need only one year of postgraduate training.)
* Proof of good moral character.
* Proof of physical and mental capability to safely practice medicine. (The MQAC may require a physician to submit to one or more examinations to determine that this requirement is met.)
* Successful completion of the national licensure examination of the United States Licensing Examination (USMLE),[[2]](#footnote-2) or by examinations accepted by the MQAC for reciprocity or waiver from other states or Canada (National Board of Medical Examiners (NBME), Federation of States Medical Boards Examination (FLEX), , or the Licentiate of the Medical Council of Canada (LMCC) (provided the licensee holds a valid LMCC certification obtained after 1969)).[[3]](#footnote-3)

Physicians who are foreign medical graduates must meet at least the following basic requirements:[[4]](#footnote-4)

* Successfully completed a resident course of professional instruction in a medical school equivalent to that required for applicants generally.
* Meet all of the requirements which must be met by graduates of the United States and Canadian schools of medicine (see above). However, if the foreign medical graduate provides proof satisfactory to the MQAC that he or she meets the following requirements, completion of two years of postgraduate training in a program acceptable to the MQAC is not required if the applicant:
* Has been admitted as a permanent immigrant to the United States as a person of exceptional ability in sciences pursuant to the rules of the United States Department of Labor, or has been issued a permanent immigration visa, and
* Has received multiple sclerosis certified specialist status from the Consortium of Multiple Sclerosis Centers, and
* Successfully completed at least 24 months of training in multiple sclerosis at an educational institution in the United States with an accredited residency program in either neurology or rehabilitation.
* Successfully passed the examination given by the Educational Commission for Foreign Medical Graduates (ECFMG), or meets requirements in lieu thereof established by the MQAC.
* Be able to read, write, speak, understand and be understood in English.

Physicians wishing to obtain a medical license in Washington must file a completed application with the MQAC on a form approved by the MQAC,[[5]](#footnote-5) submit all required fees,[[6]](#footnote-6) furnish proof of all of the basic eligibility requirements for a license,[[7]](#footnote-7) and provide such other information as the MQAC may require.[[8]](#footnote-8)

A license will not be granted if the applicant has been prohibited from practicing medicine in another state because of an act of unprofessional conduct that is substantially equivalent to an act of unprofessional conduct as defined in Washington State until such time as the Medical Quality Assurance Commission has completed its own investigation into the matter.[[9]](#footnote-9)

For more information on licensure eligibility requirements, see the MQAC website at <http://www.doh.wa.gov/LicensesPermitsandCertificates/MedicalCommission/MedicalLicensing/Requirements.aspx#1>

## Are there licensing requirements for physicians regarding AIDS education?

## Yes. Prior to obtaining a license, a physician must have at least four hours of education and training on the prevention, transmission, and treatment of AIDS.[[10]](#footnote-10) The AIDS education and training must include—but is not limited to—etiology and epidemiology; testing and counseling; infection control guidelines; clinical manifestations and treatment; legal and ethical issues, including confidentiality; and psychosocial issues, including special population considerations.[[11]](#footnote-11) Upon licensing, a physician must provide a written declaration that he or she has completed the minimum AIDS education and training.[[12]](#footnote-12) Physicians must keep records documenting their AIDS training and describing what they learned for two years.[[13]](#footnote-13)

## May a physician who has already been licensed in another state or passed the National Board of Medical Examiners (NBME) examination have the examination requirement waived?

Yes. The MQAC has the discretion to waive the examination requirement for a physician who has previously been licensed in another state or Canada. The physician must submit certified copies of the license and show that the standards, eligibility requirements and examination of the issuing state are at least equal to those in Washington.[[14]](#footnote-14) The MQAC also has discretion to waive the examination for a physician who has successfully passed the NBME, FLEX, USMLE, or examinations given by the other states or territories of the United States.[[15]](#footnote-15) Physicians who have taken the Licentiate of the Medical Council of Canada (LMCC) and hold a valid LMCC certification obtained after 1969 may be granted a license without examination.[[16]](#footnote-16)

## May a physician who has already been licensed in another state receive a temporary permit to practice medicine in Washington after his or her application is submitted but before it is processed?

Yes, in some circumstances.[[17]](#footnote-17) Such a physician must file a completed license application form, indicate on the form the desire to obtain a temporary permit, and pay the application fee and the temporary practice permit fee.[[18]](#footnote-18) If the physician is licensed in another state with licensing standards substantially equivalent to Washington’s licensing standards, the MQAC then may issue that physician a temporary permit upon receipt of the AMA profile verifying the states in which the physician is or was licensed, receipt of the disciplinary action data bank report form, and receipt of verification from all states in which the physician is or was licensed that the physician has a license in good standing and is not subject to charges or disciplinary action for unprofessional conduct or impairment.[[19]](#footnote-19) A physician who receives a temporary practice permit may then practice medicine pending completion of the application process. The temporary permit, however, is good only for 90 days, or upon issuance of license or upon initiation of an investigation by the MQAC, whichever occurs first.[[20]](#footnote-20)

**Will the MQAC issue a temporary practice permit if there is a delay in obtaining results of a background check?**

Yes, provided certain conditions are met.[[21]](#footnote-21) The MQAC will issue a temporary practice permit if there is a delay in receiving the results of a national criminal background check, providing that the applicant for a medical license has met all other licensure requirements.[[22]](#footnote-22) The MQAC conducts background checks on all applicants for a medical license to assure safe patient care.[[23]](#footnote-23) The temporary practice permit is valid for six months.[[24]](#footnote-24) The temporary practice permit is no longer valid after a license is issued or action is taken on the application because of the background check.[[25]](#footnote-25)

## When must a physician’s license be renewed?

Physicians must renew their medical licenses every two years.[[26]](#footnote-26) The renewal date is the physician’s birth date.[[27]](#footnote-27) At the time of renewal the MQAC requests licensees to submit information about their current professional practice, which may include practice setting, medical specialty, board certification, or other relevant data.[[28]](#footnote-28)

## What happens if a physician fails to renew his or her medical license?

Failure to renew a license renders the license invalid. A physician who continues to practice medicine with an invalid license is engaged in the unauthorized practice of medicine, which is both a crime and unprofessional conduct which may subject the physician to disciplinary action.[[29]](#footnote-29)

If a license has expired because of failure to renew for one renewal cycle or less, a physician must pay the late renewal penalty fee, the current renewal fee, and the required substance abuse monitoring surcharge (to support the Washington Physicians Health Program (WPHP)), provide any required documentation or declaration, and comply with the MQAC continuing medical education (CME) requirements.[[30]](#footnote-30)

If a physician’s license has been expired for more than one renewal cycle, but less than three years or less, a physician must also file an abbreviated application form and pay all outstanding fees and penalty fees and comply with the other requirements listed above, pay an expired credential reissuance fee. In addition, the physician must provide written declarations that (i) no action has been taken by any state, the federal government, or hospital to restrict the physician’s practice of medicine, (ii) the physician has not voluntarily given up any credential or privilege, or has not had his or her practice restricted, in oreder to avoid formal action, and (iii) the CME and competency requirements of the past two years have been met.[[31]](#footnote-31)

If a physician’s license has been expired for more than three years the physician must satisfy all of the requirements above (for a licensed expired more than one renewal cylcle but less than three years) but must also satisfy other competency requirements set forth by the MQAC, and provide proof of AIDS education, if not previously provided.[[32]](#footnote-32) In addition, the physician must furnish proof that the physician has completed two years of postgraduate training in a program acceptable to the MQAC.[[33]](#footnote-33)

## Are there continuing education requirements for renewal of a license?

Yes. See **CONTINUING MEDICAL EDUCATION**.

## Does Washington issue any limited licenses?

The MQAC may, without examination, issue a limited license to the following:[[34]](#footnote-34)

* Physicians who are licensed in another state or Canada, who have been accepted for employment by DSHS, the Department of Corrections (DOC), or any county or city health department, and who meet all of the basic qualifications for licensure. Such a license shall permit the physician to practice medicine only in connection with patients, residents, or inmates under the supervision and control of DSHS or the DOC, or in conjunction with the physician’s duties in employment with a city or county health department.
* Physicians who have submitted a completed application showing that they meet all of the basic requirements except for completion of two years of postgraduate medical training and who have been appointed as a resident physician in a program of postgraduate clinical training in this state approved by the MQAC.
* Physicians who have graduated from a recognized medical school, who have been licensed or otherwise privileged to practice medicine at their location of origin, and who have been invited to serve as a teaching-research member of the University of Washington School of Medicine or of a hospital or health care facility licensed in this state.
* Physicians who have graduated from a recognized medical school, who have been granted a license or other appropriate certificate to practice medicine in their location of origin, and who have been selected by the University of Washington School of Medicine or a hospital or health care facility licensed in this state to be enrolled in one of its designated fellowship programs.

Special rules and restrictions apply to the granting and scope of these limited licenses.

## Are there any physicians who are exempt from the licensure requirements?

Yes. The following physicians are exempt from the licensure requirements:

* Commissioned medical officers serving in the United States armed forces or public health service and medical officers on duty with the Veterans Administration while engaged in their official duties.[[35]](#footnote-35)
* A physician licensed to practice medicine in Canada while practicing in any part of this state which shares a common border with Canada and is surrounded on three sides by water.[[36]](#footnote-36)

## Do medical students in Washington need to be licensed to practice medicine?

No, as long as the person is a regular student in a school of medicine approved and accredited by the MQAC and only performs services pursuant to a regular course of instruction or assignments from his or her instructor or under the supervision and control of a licensed physician.

## What is a retired active physician license?

A retired active physician license permits a physician who is already licensed to retire and continue to practice in emergent or intermittent circumstances provided that the physician provides services without compensation.[[37]](#footnote-37)

To obtain a retired active physician license, a physician must submit a letter to the MQAC with the license renewal declaring the physician’s intent to practice only on an intermittent or emergency basis as described above.[[38]](#footnote-38) Retired active licenses must be renewed every two years, but are renewed at a reduced rate.[[39]](#footnote-39) A retired active status licensee must report one hundred hours of continuing medical education at every renewal.[[40]](#footnote-40)

A physician with a retired active physician license who wishes to return to a full active license must notify the MQAC in writing of the change, pay all required fees, and meet the current requirements for licensure.[[41]](#footnote-41)

## Is a physician required to maintain professional liability insurance to obtain a license or for a license to remain effective?

No. Insurance is not a requirement to obtain a license or for a license to remain effective.[[42]](#footnote-42) Some hospitals and clinics, however, may require that a physician have professional liability insurance as a condition of obtaining privileges.

**May retired physicians provide medical assistance during an emergency or a disaster?**

Yes. In 2006, the Washington State legislature authorized the Secretary of Health to issue a retired volunteer medical worker license to any person who:[[43]](#footnote-43)

* Held an active health care license within 10 years prior to his or her initial application for the retired volunteer medical worker license.
* Does not have any restrictions to practice due to violations of the Uniform Disciplinary Act.
* Registers with a local emergency services or management organization affiliated with the Emergency Management Division of the Military Department.

Retired volunteer medical workers may only practice when there is a declared emergency, disaster, or authorized training event that has been given a mission number by the Department of Emergency Management, and the local organization for emergency services or management has activated the retired volunteer medical worker.[[44]](#footnote-44) The retired volunteer medical worker may only work the duties assigned, must be supervised, and may only perform the duties that were associated with their previous medical practice.[[45]](#footnote-45) In order to apply for a retired volunteer medical worker license a physician must meet the requirements listed above, submit an application to the Department of Health, and submit proof of current registration as a volunteer emergency worker with a local organization for emergency services or management.[[46]](#footnote-46) Retired volunteer medical workers will be required to maintain competency requirements that are established by the Secretary of Health. A retired volunteer physician must complete a basic first-aid course, a bloodborne pathogens course and a CPR course every three years in order to renew his or her license.[[47]](#footnote-47) A physician who holds a retired volunteer medical license, and is registered as an emergency worker, is immune from liability for his or her actions while providing assistance in an emergency or disaster, or while participating in an approved training exercise or preparation for an emergency or disaster.[[48]](#footnote-48) This immunity does not apply to acts of gross negligence or willful or wanton misconduct. See **EMERGENCY MEDICAL SERVICES; and GOOD SAMARITAN LAW.**

1. RCW 18.71.050. [↑](#footnote-ref-1)
2. WAC 246-919-355. [↑](#footnote-ref-2)
3. WAC 246-919-360. [↑](#footnote-ref-3)
4. RCW 18.71.051 [↑](#footnote-ref-4)
5. RCW 18.71.050(1). [↑](#footnote-ref-5)
6. WAC 246-919-990. [↑](#footnote-ref-6)
7. RCW 18.71.050; RCW 18.71.055. [↑](#footnote-ref-7)
8. RCW 18.71.050(2). [↑](#footnote-ref-8)
9. RCW 18.130.370. [↑](#footnote-ref-9)
10. WAC 246-919-380; WAC 246-12-260. [↑](#footnote-ref-10)
11. WAC 246-12-270(2). [↑](#footnote-ref-11)
12. WAC 246-12-280(1). [↑](#footnote-ref-12)
13. WAC 246-12-280(2). [↑](#footnote-ref-13)
14. RCW 18.71.090. [↑](#footnote-ref-14)
15. WAC 246-919-360. [↑](#footnote-ref-15)
16. *Id*. [↑](#footnote-ref-16)
17. RCW 18.130.075. [↑](#footnote-ref-17)
18. WAC 246-919-395(1). [↑](#footnote-ref-18)
19. *Id*. [↑](#footnote-ref-19)
20. WAC 246-919-395(2). [↑](#footnote-ref-20)
21. WAC 246-919-396. [↑](#footnote-ref-21)
22. *Id*. [↑](#footnote-ref-22)
23. RCW 18.130.064; WAC 246-919-396. [↑](#footnote-ref-23)
24. WAC 246-919-396(1). [↑](#footnote-ref-24)
25. WAC 246-919-396(4). [↑](#footnote-ref-25)
26. WAC 246-919-421. [↑](#footnote-ref-26)
27. WAC 246-12-020(3). [↑](#footnote-ref-27)
28. RCW 18.71.080. [↑](#footnote-ref-28)
29. 18.71.021; RCW 18.130.190. [↑](#footnote-ref-29)
30. WAC 246-12-040(a). [↑](#footnote-ref-30)
31. WAC 246-12-040(b). [↑](#footnote-ref-31)
32. WAC 246-12-040(c). [↑](#footnote-ref-32)
33. WAC 246-919-475(2). [↑](#footnote-ref-33)
34. RCW 18.71.095. [↑](#footnote-ref-34)
35. RCW 18.71.030(5). [↑](#footnote-ref-35)
36. RCW 18.71.030(11). [↑](#footnote-ref-36)
37. WAC 246-919-480. [↑](#footnote-ref-37)
38. WAC 246-12-120(1). [↑](#footnote-ref-38)
39. WAC 246-919-990(4). [↑](#footnote-ref-39)
40. WAC 246-919-480(4). [↑](#footnote-ref-40)
41. 246-12-140. [↑](#footnote-ref-41)
42. RCW 18.71.050. [↑](#footnote-ref-42)
43. RCW 18.130.360; WAC 246-12-400. [↑](#footnote-ref-43)
44. WAC 246-12-420(1). [↑](#footnote-ref-44)
45. WAC 246-12-420(2). [↑](#footnote-ref-45)
46. WAC 246-12-410. [↑](#footnote-ref-46)
47. WAC 246-12-440. [↑](#footnote-ref-47)
48. RCW 38.52.180. [↑](#footnote-ref-48)