



Regulator Perception of the Value of
License Renewal/Recertification
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HRRI REGULATOR PERCEPTION OF THE VALUE OF LICENSE RENEWAL/RECERTIFICATION

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STUDY OVERVIEW

Background

- HRRI protects the public through regulatory research and collaborative exchange with strategic partners to promote evidence-based healthcare regulation.
- The organization has identified a need for information and intelligence related to state healthcare board perceptions towards recertification and license renewal and its importance in providing quality healthcare to patients.

Objectives

- Gauge the value that board administrators and regulators see in recertification and relicensing for practitioners.
- Understand how important recertifications of practitioners is to board administrators and regulators and how often they believe practitioners across various types of therapeutic areas should be recertified.
- Determine the extent to which board administrators and regulators believe the recertification process is arduous and perhaps unnecessary for practitioners in general or those with specific areas of focus.
- Determine what, if anything, board administrators and regulators would change about the practitioner recertification and relicensing process to make it better.
- Gauge the extent to which board administrators and regulators believe the public is familiar with practitioner recertifications and relicensing. Determine how important respondents think practitioner recertifications are to patients as they consider which practitioners they will see for their healthcare.
- Determine whether board administrators and regulators believe recertifications are costly to practitioners and ultimately reduce the number of healthcare practitioners in the marketplace.
- Gauge board administrators' and regulators' opinions about potential changes to the recertification process and the impact they believe it would have on healthcare.

Methodology

- One-on-one phone interviews, up to 45 minutes long.
- Conducted between September 26 and October 18, 2024.



KEY FINDINGS

Many participants are not extremely familiar with the specific certification and recertification process for the boards they oversee because it's not part of their or their board's role. As it relates to their boards, most indicate a mix of utilizing certifications, awarding continuing competency credits, and utilizing ways to award competency beyond completing CEs.

- Boards use education and certification from a national organization for practitioners to obtain a license initially. Some are standardized, but many say it differs slightly among healthcare or counseling areas. Some boards require an extra certification or endorsement, but that is not the norm among those interviewed.
- When asked whether their licensing board awards continuing competency credit for obtaining or renewing certifications, it seems mixed with a few indicating they do not and others saying that there is a way for credits to be counted towards renewal.
- Many indicate that their boards give competency credit beyond just completing continuing education. That is primarily in the form of attending meetings, volunteering, and teaching classes or giving lectures.

Many indicate that license renewals are required every two years, with a few exceptions.

- A two-year license renewal seems fairly standard, with some mentioning annual renewals for some practitioner types.
- None recommended a change when asked if the time period for renewals that they mentioned seems satisfactory or appropriate.

Respondents see great value in license renewal and almost always see the value falling into one of three areas:

- 1) Protecting the public from practitioners who have been charged with criminal or disciplinary activity.
- 2) Meeting boards' own clerical and database needs for ensuring proper contact information for practitioners and to confirm that they are actively practicing.
- 3) Ensuring practitioners stay up-to-date with continuing education.



- A handful of others mention the value of license renewal for helping practitioners communicate with others in their fields and get varying types of assistance if they need it.

While none of the participants mention the revenue stream to their organization as a benefit of license renewal on their own, when asked specifically, most do acknowledge that they are funded, at least in part, through renewal fees.

Participants believe that public awareness of what practitioners do to renew their licenses is very low.

- None of the respondents believe the general public is very aware of license renewals for practitioners and certainly not detailed aspects related to what is required, the timelines, cost, etc.
- A few think only those who might have to renew a license themselves or have a family member who does would be very aware of the license renewal process. One indicates that they wouldn't be knowledgeable if they didn't work in the industry.

Because it is not part of their jobs, most do not comment extensively about the extent to which they think practitioners get recertified. However, many of those who do, believe it's a positive experience for most practitioners.

- Most think the large majority of practitioners go through the recertification process.
- There is sizable mix of those who believe that many practitioners find value in the process and the educational opportunities, but also many who think it is unnecessary or wish the topics covered more closely aligned with how they treat patients.
- They do not think that what is asked of practitioners to recertify is particularly difficult or burdensome.

Likewise, most believe that what is asked of practitioners to renew their licenses is not difficult.

- Virtually none think that the license renewal process is challenging for practitioners or that it should be altered.
- They also do not believe that it is particularly costly for most practitioner types.



Participants read information about potential “unnecessary recertification” as an example of anticompetitive actions.

Unnecessary Healthcare Provider Recertification or Accreditation Requirements



Description:

Certifying bodies or accreditation organizations can impose unnecessary requirements on healthcare providers. Unnecessary requirements can raise the costs of practicing medicine. They can also reduce the number of healthcare practitioners participating in the marketplace. These requirements can harm competition and increase the cost of healthcare services.

Example:

- Certifying bodies or accreditation organizations ask physicians to meet unnecessary requirements to stay certified.

Reactions are generally of concern. Some do admit that there could be room for some changes and that their boards are always open to discussing and considering changes if it helps practitioners and no additional harm is caused to the general public.

- Most report initially that they do not believe that recertifications or costs are particularly burdensome for practitioners.
- In cases where some have views that are consistent with what the stimulus suggests, it tends to be due to their knowledge about what physicians go through, rather than others like physical therapists, occupational therapists, or athletic trainers.
- Many respondents see at least some danger in relaxing continuing education and license renewal timelines, mostly focused on tracking criminal convictions, but also for the lack of education and learning components as well.
- A few do not see it as being quite as dangerous, but that’s also because they don’t see the standards being difficult to begin with. Thus, from their viewpoint, there is no room to make it more lenient, either for recertifications or license renewals.



- While some indicate that it's not their role to get very involved or lobby for regulations or requirements, others indicate that it is, especially if they think it would result in reducing their ability to keep the public safe. Even then, most speak more about "considering all angles" and "keeping open lines of communication" rather than just working to ensure that requirements stay as they are.
- There are also a few who believe that there is room for reducing requirements, especially for some practitioner types.



RESPONDENT PROFILE

The characteristics of those interviewed are shown below.

Region	Organization	Boards Overseen (Full List for Each Not Shown)	Years in Role
Midwest	Department of Health and Human Services	Physical Therapy, Occupational Therapy, Athletic Training, Chiropractic, Massage Therapy, Audiology, Speech, Language Pathology	9
West	Health Professions Bureau	Physicians, Nursing, Dentists, Pharmacists, Physical Therapy	5
Northeast	Department of Health, Division of Healthcare Quality and Safety	Acupuncture, Athletic Training, Dietitians, Massage Therapy, Occupational Therapy, Physical Therapy, Social Work	5
Midwest	Counselor, Social Worker and Marriage & Family Therapist Board	Counselors, Social Work, Marriage and Family Therapy	10
West	Department of Health	Physical Therapy, Physical Therapy Assistants, Recreational Therapy, Athletic Training	3
Midwest	Occupational Therapy, Physical Therapy, Athletic Training Board	Occupational Therapy, Physical Therapy, Athletic Training, Orthotic, Prosthetics	7
Midwest	Department of Inspections, Appeals and Licensing, Division of Professional Licensing	Physical Therapy, Occupational Therapy	9
Midwest	Department of Safety and Professional Service Services	Physical Therapy, Medical Examining Board, Physician Assistants	5
West	Department of Commerce	Acupuncture, Dentists, Athletic Training, Massage Therapy, Occupational Therapy, Physical Therapy, Speech Language Pathology, Hearing Instrument Specialists	11
Northeast	State Board of Physical Therapy	Physical Therapy	17
South	State Board of Health Professions	Physical Therapy, Long Term Care	9
Midwest	State Board of Healing Arts	Physical Therapy, Occupational Therapy, Athletic Trainers, Physician Assistants	3



IMPORTANCE AND VALUE OF RECERTIFICATION

Certification and Recertification Requirements

Boards use education and certification from a national organization for practitioners to obtain a license initially. Some are standardized, but many say it differs slightly among healthcare or counseling areas.

"What we do in [state] is that we have a standard, umbrella set of statutes that all of our professional healthcare licensure fall under. And then the standards for reinstatement or renewal are really generalized across all professions. Then the specifics of those, like number of CE hours, are more specific to each profession."

"We licensed the individual based on their education that they've received from the accredited school. As a PT, PTA, OT, OTA, then they can practice within their scope. As long as they've been properly trained, we don't require any additional certification. So, we don't have anything about specific modalities. We don't issue certificates."

A few mention practitioners' interest or need in staying updated with certifications to allow for easier portability from one state to another.

"So, in occupational therapy, to be initially licensed in the state, you need to have certification from the organization we call NBCOT, and they also administer the exam for occupational therapy. So that applies to occupational therapists and occupational therapy assistants. They have to pass the exam and receive their NBCOT certification and that is submitted as part of their application process in [state] for their initial license. They don't have to maintain that certification, although it's advised because if they want to move around to a different state they may need it again."

A few regulators also indicate that some boards require an extra certification or endorsement, but that is not the norm among those interviewed.

"In general, they don't need to maintain certification or recertify to maintain the [state] license. However, as part of their continuing education, if they choose to maintain that certification, it typically will meet all of the continuing education requirements. So, for like pharmacy technicians, they've got a certification. If they maintain that, then they meet all their CEs, but they have other options to keep as well or if they want to choose different paths instead of maintaining the certification."

"[State] actually does not even track specialty certifications. We license physical therapists, physical therapist assistants, indirect physical therapist assistants, and direct access authorization, which is a kind of an add on to a physical therapist's license. No continuing education is required, and we give continuing education credit for specialty recertification and certification. So, if somebody obtains a specialty certification, that counts as 20 of their 30 hours that are required for renewal, but we don't track which certifications somebody has obtained."



Awarding Continuing Competency Credits

When asked specifically whether their licensing board awards continuing competency credit for obtaining or renewing certifications, it seems mixed with a few indicating they do not.

"We wouldn't be awarding credit for recertifying. There are some boards where we do require certification upon initial licensure but as far as maintaining the certification, that's not one of our requirements and we certainly don't provide any credit for that."

"No, those would be separate. They have their own training and education requirements and actually one of the spinal manipulation endorsements has its own continuing education requirements, but those can be counted towards their general continuing education requirements. They just have to have ten specific hours regarding spinal manipulation."

"We don't provide credit. If someone comes to one of our trainings and then wants to apply to the CE organization to try to get them to recognize that as a credit, I suppose they could do that, but I don't know that anyone does."

While others indicate that they do or that there is a way for the credits to be counted towards renewal.

"So, specifically licensed acupuncturists can maintain their NCAAOM and that takes courses and requirements to maintain or they can go to other accredited bodies and let that national certification lapse. It's usually one or the other. They usually get all their education credits for maintaining the certification or they choose the whole other path."

"As long as it was an accredited certification and it fit within the scope of practice for that license type within [state], then yes, I think we would generally allow that as continuing education hours."

Recent Changes to Certification and Recertification

Only a few respondents mention there being changes to certifications recently, though many admit that this is not something they know much about given their roles and that their board does not manage or oversee certifications.

"I know in the respiratory care world, there have been some changes to some higher-level certifications that were not included and that was upsetting to some people. So, when we open our chapter regulations in that area again, we'll look at those things in an effort to increase providers."



"Yes, for athletic training they have been working on revamping their whole system of continuing education related to maintenance of their certification. They have been trying to make their courses that they require a little more relevant. And they used to have a requirement to have a certain amount of hours and kind of best practices. And now they've moved to a system where they don't require certain hours, but they expect that kind of material to be part of all the coursework."

A couple of participants do mention that changes are potentially coming in the future.

"There is a change that will be coming. It hasn't changed yet, but there's a focus on updating our rules to allow a 50% carryover of continuing education hours. It's for everyone licensed in [state]."

Frequency of License Renewal

Many indicate that license renewals are required every two years, with a few exceptions (annually). None recommended a change when asked if that time period seems satisfactory or appropriate to them.

"Every two years and all of the professions have uniform expiration dates, regardless of when they're issued. All PTs expire on 11/1 of odd number of years and all ASLPs expire on 12/1 of even years. So, it's convenient, but it's a two-year cycle. I think it's sort of the industry standard, so I've never really questioned it. I guess I would say it seems just right to me."

"98% of [state] licenses are a two-year renewal. Every one of that license typed renews on the same date, but the dates are different depending on what the profession is."

"As it stands today, 90% of them are annually, but we passed a bill last legislative session to move them to a biennial licensure renewal process. I think it should be every two years."

Frequency of Recertification and CEs

Many indicate that the continuing education component of license renewal is on the same cycle as renewals, though there are a few exceptions.

"We look at CEs every two years, so they're not required to submit their CEs annually. Recertification is based on what the national organization requires."



"That actually doesn't have to be renewed. Once they obtain their direct access certification, they have that for the duration of when they have their active license in [state]."

"For chemical dependency professionals, to renew for both initial certification and renewal with us, they have to attest to being recertified, having an active certification with the ICRC."

Competency Credit Beyond Completing CEs

Many indicate that their boards give competency credit beyond just completing continuing education. That is primarily in the form of attending meetings, volunteering, and teaching classes or giving lectures.

"For example, research and writing supervising students in the clinical setting, attendance a board meetings and hearings, volunteering hours in a local health department or clinic,

"So our continuing education credits have three categories that they can do. One category is that they're required to have one hour of opioid or pain management. Another category what you think of as a continuing education class like a seminar, a lecture type class. Category two is really kind of a self-taught. It can be reading a medical journal, an article in journal, give a training, give a lecture. We definitely give credit for those kinds of things."

"Skills evaluation would be more important than sitting down and listening to somebody talk about how to do something. There's not as much of that in a classroom setting and there are companies that that really do skills testing more to finetune a practitioner's skills."



PERCEPTIONS OF LICENSE RENEWAL

Primary Value of License Renewal to Regulators/Administrators

Respondents see great value in license renewal and almost always see the value falling into one of three areas:

- 1) Protecting the public from practitioners who have been charged with criminal or disciplinary activity
- 2) Meeting boards' own clerical and database needs for ensuring proper contact information for practitioners and to confirm that they are actively practicing
- 3) Ensuring practitioners are staying up-to-date with continuing education

1) Protecting the public from practitioners who have been charged with criminal charges or disciplinary activity.

"To check in, make sure that nothing has changed with our licensees every couple of years, we ask questions such as, 'have you had any criminal charges?'"

"So as a regulator, the value of renewal is it's an opportunity to ask a series of questions to help me do my primary function of my job, which is to protect the public health and safety. So, it's a series of questions where we ask, 'have you been convicted of any misdemeanors or felonies?'"

"Well, it's a way for us to recertify and verify if they had any criminal charges, any anything like that. So, it's a way for us to help make sure that practitioners are still safe and able to practice."

2) Meeting boards' own clerical and database needs for ensuring proper contact information for practitioners and to confirm they are actively practicing.

"The mission of our board is public protection, and we need current and up-to-date information on who is practicing in the state. License renewal helps us maintain and update that information every two years. We know where people are working and how to find them if we need to."

"It also provides us with a pulse of the of the profession, like our people renewing their licenses or are they letting them lapse. At the moment, we're not doing terribly much with that data, but then we did have a statute passed with the workforce data collection, so I think that's going to change in the future."



3) Ensuring practitioners are staying up-to-date with continuing education.

"It also spurs the requirement that they do continuing education, so it's something that makes them at least attempt to stay current on their practice every two years by requiring them to do a certain amount of continuing education."

"The other thing that I think there's value in is every time we get near a renewal cycle or the end of a renewal cycle, people start to remember that continuing education is a thing. I think that without a renewal and expiration date, a common renewal cycle, they would not be maintaining those continuing education hours. And we all know that things in these industries change consistently so, it just helps keeping up with the changes of science and knowledge."

"I think the renewal and the proof of continuing competency and active practice is important from the public safety perspective for sure, because that way our public and our patients know that these individuals have had essentially a check in every two years that they have completed CE, that they are maintaining some level of requirements in terms of licensure renew."

Other important mentions regarding the value of license renewal focus on the need to help practitioners communicate with others and get assistance if they need it.

"Attestation question that you have to put yourself and your physical mental health before others and so you attest that you will take care of yourself so that you can take care of your patients. We give them resources if they're struggling."

"We need to have our eyes on these folks. We need to know that they need to be trained and they need to be reminded that they are human and that it is OK that they are feeling overwhelmed and stressed and that there is help for them. And that here's where you go for that and you need to have that message over and over and over. And I think our license renewal process helps us do that and the regulatory board helps us do that."

"I also think that when you have a large state with a large rural population it helps those practitioners have access to other practitioners so that they are not so isolated and alone. They know where to go, they they are able to network even if it is virtual because a lot of the trainings now are virtual like this. But it still gives them that opportunity."



Importance of License Renewal as Revenue Stream

While none of the participants mention the revenue stream to their organization as a benefit of license renewal on their own, when asked specifically, most do acknowledge that they are funded, at least in part, through renewal fees.

"I never want to look at money as a reason to be valuable, but we are a business and so that is a revenue stream. We are a dedicated fund agency. We do not get any money from the General Fund, so we don't take taxpayer dollars from the legislator. We are self-funded through licensure fees, so we need that in order to run our business."

"I do think there is an ongoing revenue stream there although legislation continues to be developed and passed that allows for a variety of waivers in that regard. In government, working in regulatory work, it's not really a profit thing, it's bare minimums needed to maintain the administration of the program."

"It's our primary revenue stream. To keep a steady stream of revenue, that's another reason why the two-year time frame is ideal because we run on two-year biannual budgets for the state, and so it allows for more predictability for board operations."

There are a few who indicate that initial licensure and renewal fees do not go directly to funding their operations.

"Unfortunately, we are not able to keep any of the licensing or renewable fees the applicant or the licensee makes. That check or money order, if it's an online renewal, that goes to the [state] General Treasury, so we don't get any direct funds from that."

Perceived Public Awareness of License Renewal

None of the respondents believe the general public is very aware of license renewals for practitioners and certainly not detailed aspects related to what is required, the timelines, cost, etc.

"I think there's a very vast lack of awareness. I'd say maybe people for [state's] dentists where part of their regulation is they have to display their license in a public area, might make those patients a little more aware if they're looking at those and seeing expiration dates. But I think in general, people don't know much about licensing."

"I don't think that the public in general knows very much about the regulation of healthcare providers until they're upset with something and then they want to know how they can complain about it and how they can get action taken against somebody."



A few think only those who might have to renew a license themselves or have a family member who does would be very aware of the license renewal process. One indicates that they wouldn't be knowledgeable if they didn't work in the industry.

"Not very aware, unless they have held a license themselves. I think people who have held the license for their profession, for whatever reason, might be aware but outside of that, probably not very aware."

"Not very aware. I mean, I think it is important, but I wasn't aware of it until I started working here."



PRACTITIONER COMPLIANCE AND ATTITUDES

Frequency of Practitioner Recertification

Because managing or being involved with practitioner recertifications is not part of their roles or even their board's roles, most respondents do not comment extensively about the extent to which they think practitioners get recertified. The few who do seem to think that the large majority of practitioners do go through the recertification process.

"I guess my ultimate answer is, I don't know. States and professions accept certifications for continuing competency because the impression was that practitioners felt overly burdened with having to keep track of all of them, and they wanted to maintain them, and they wanted these certifications to count for their license. I think some associations do a really good job of promoting their certifications and why practitioners should keep them and maybe some don't do as good of a job of advertising the benefits of maintaining those certifications."

"I would say the majority of people choose to maintain or recertify rather than the other avenues to qualify for renewal for two reasons. I think it's just a little bit more consistent ease of access through their certifying body. And the other one is its portability if they maintain that certification, it will be easier if they choose to leave the state."

"It's not really our role. I think by allowing it for their renewals as their full continuing education requirement is as supportive as we get."

Perceived Attitudes of Practitioners Towards Recertification

When asked how they think practitioners perceive the value of recertification, there is sizable mix of those who believe that many practitioners find value in the process and the educational opportunities, but also many who think it is unnecessary or wish the topics covered more closely aligned with how they treat patients.

"I think you probably are going to experience a spectrum of individuals who are very serious and career-minded who try to get as much value out of continuing competency as possible. And then I think you're probably also going to have on that other end of the spectrum, individuals who are like 'This is just mandatory. I got to do this to keep going.' And maybe not be putting in the effort."

"I mean this in the nicest way possible. There are a lot of letter chasers, so we see a lot of professionals who will have not only their degree and the license or licenses they hold, but then maybe other certifications appended to their name. So, I think once people have those provided the renewal requirements as far as the fee to renew the certification, I think most people are getting them renewed after they get it the first time. Because a lot of them want to use that as a way of signaling some level of expertise in their marketing that through their website or it could also be depending on their situation that an employer is required."



"I would say it's probably about 50 / 50. Half of the practitioners seem to really enjoy the learning and learning new things about their area of practice. The other half feel like it's not really necessary that it's, 'I'm going to be a pediatric physical therapist for the rest of my life and then nothing changes and why should I have to do that CE. It's just people making money from me.'"

"All I can speak to is that the inquiries that I get about continuing education, we do not seem to have very many people that are concerned about it. When they contact us, we redirect them to the rules and there are many different ways for them to do their continuing education. It's outlined under specific criteria, so they could take a course, they could supervise students, they can complete something through one of the accredited agencies, then go through a college, university, or graduate school. They can author a research paper, participate in professional organizations. There's are many different ways that they can earn those hours, so I haven't really heard anyone say they don't feel like it's important."

Perceived Difficulty of Practitioner Recertification

Respondents do not think that what is asked of practitioners to recertify is particularly difficult or burdensome.

"No, I don't think so. I mean these are all well educated professionals who should be able to navigate a process of this type to demonstrate that they have the skills and abilities that they are claiming they possess."

"We're not asking them to submit these on renewal, it's an attestation for life, for the renewal, so that if they, in the event that they are audited, they have to provide the documents to the board. If there were a complaint that someone didn't practice properly our licensees understand that they need to have evidence that they were trained in something before they perform that service."

There are a handful who believe that it differs based on practitioner type, where it is more difficult for physicians, and even specific types of physicians, than other practitioner types.

"For physicians being recertified in your specialty. If it's oncology, taking those boards every five to ten years, like that's an arduous process. I don't know for physical therapy."



Perceived Difficulty of Practitioner License Renewal

Respondents are even less likely to feel that license renewal is challenging for practitioners.

"No, it's very easy. In fact, we've tried to make it as easy as possible. It's just a series of questions and a payment and an attestation. They don't have to provide us with documentation unless they're part of the audit. It's just as easy as going online and renewing your driver's license."

They also do not believe that it is particularly costly for most practitioner types.

"So, the state of [state] has not been allowed to alter or change their renewal fee since 2008, so I think we're woefully under. And if we do a cost comparison with some of our neighboring states, we're very low."

"No, I don't get the sense that that these sorts of fees are impacting licensure in any of these professions. I would find it difficult to believe that obtaining a certification of this type that could lead to a job or licensure, and a job is the barrier to pursuing a lot of these professions. I personally think that issues about the work itself, the client served, and so forth are probably bigger barriers than the cost of the education necessary to get some of these certifications. Those are bigger issues than the certification itself."

Recommended Changes to Recertification Process

While recommendations to the recertification process are varied, a consistent theme is to make the coursework more applicable to how practitioners work with and assist patients and to apply a more hands-on approach to learning and testing.

"One thing I've really been beating the drum on is having more ethics education for all of these professions, especially in the area of boundary violations. If you're an older practitioner and you didn't have the ethics and boundary training when you went to school, there's really no other way you're going to get it than through continuing education."


"I just think if you can make it more practice relevant without being too heavy-handed with professionals who are very capable of making up their own mind on what they need retraining on. I think the more practice relevant you can make that, the more useful it's going to be."

"Some states require that a person sit down and actually do a test to evaluate their skills. Skills evaluation would be more important than sitting down and listening to somebody talk about how to do something."



POTENTIAL CHANGES TO RECERTIFICATION AND LICENSE RENEWAL

Unnecessary Recertification Example Read by Respondents



Unnecessary Healthcare Provider Recertification or Accreditation Requirements

Description:

Certifying bodies or accreditation organizations can impose unnecessary requirements on healthcare providers. Unnecessary requirements can raise the costs of practicing medicine. They can also reduce the number of healthcare practitioners participating in the marketplace. These requirements can harm competition and increase the cost of healthcare services.

Example:

- Certifying bodies or accreditation organizations ask physicians to meet unnecessary requirements to stay certified.

Initial Reactions to “Unnecessary Recertification” Description

Most do not believe that for the boards on which they work, that recertifications or costs are particularly burdensome.

“Well, I think we've seen a concentrated effort to deregulate healthcare professions across the board, and there's always been this sort of mantra that is inhibiting people from practicing, as it's limiting access. And I think that's just not true. I think these are buzzwords and they're scare tactics used by very specific political viewpoints to deregulate.”

“Do you want to know that maybe your dentist or doctor or social worker has brushed up on their skills recently? I just don't see these required certifications being a huge barrier or a cost increase. Just because most of the time also the fees are commensurate with the compensation received by the professional.”

In cases where some have views that are consistent with what the stimulus suggests, it tends to be due to their knowledge about what physicians go through, rather than others like physical therapists, occupational therapists, or athletic trainers.

“I think it's about 50% true. Looking at it from [state's] perspective like our certifying body, our licensing board doesn't impose unnecessary requirements, and we've worked tirelessly here in the state to not do that. But I do know that for physicians going through the recertification as an oncologist or a general surgeon or those types of things every couple of years can be extremely stressful. And it's likely very costly too.”



Perceived Danger if Requirements are Relaxed

Many respondents see at least some danger in relaxing continuing education and license renewal timelines, mostly focused on tracking criminal convictions, but also for the lack of education and learning components as well.

"The powers that be that are utilizing these sort of scare tactic headlines and equating that to just regulation in general. And oh, this is so burdensome. The problem is when you get into that kind of mindset you start, for lack of a better phrase, dumbing down the profession in saying that the standards are too high and we don't need them. Well, maybe we do."

"So, the license renewal I think would be more dangerous to stretch out that time, to give them a longer renewal cycle like three or four years compared to two years because of that whole disciplinary action, criminal conviction. We really have no way of knowing if someone has been criminally charged or convicted, or if they have discipline in another state unless it's brought to our attention by the public. So that would be dangerous."

"For the sake of just being more lenient, it doesn't sound like a good idea on the face of it. If you're talking about making targeted changes based on evidence that something is not giving you great bang for the buck well there's a process I would think they would have to go before that. But I think when you broad brush this stuff, you generate a lot more heat than light."

"It becomes a public safety issue if there's a concern about proving continuing education on a repeated basis. How else do you prove or how else do you encourage or perhaps incentivize practitioners to stay up to date in their in their practice areas. I guess my question would be a counter question back of both. What would the impact of public safety be and how else do you propose that we would keep practitioners up to date to ensure public health and safety?"

A few do not see it as being quite as dangerous, but that's also because they don't see the standards being difficult to begin with. Thus, from their viewpoint, there is no room to make it more lenient.

"I don't think you can get much more lenient than what they are. I think they're reasonable for occupational therapists and athletic trainers because it's very similar to license renewal. So, in some ways, the danger with occupational therapists and athletic trainers is that it's duplicative. Of license renewal requirements there's not a lot of additional meat to the bone in in that space, so I think they're kind of where they need to be if that is what you're looking for. I feel like that certification is in a good space. It's not too onerous, it's not too lenient."



Others point out that so much thought is given to the requirements at that state level already that so many parties and constituents have already weighed in on what is appropriate, necessary, and needed for license renewal requirements.

"I would be disappointed if the federal government would try to come in and regulate this for all professions. I mean, certifying bodies can impose unnecessary requirements but everything we do has to go through our legislature. We can't just decide with my management team and my board to make changes."

Concerns on Implications for License Renewal

Most do not seem overly concerned about changes being made to license renewal based on the "unnecessary recertification" example that they read. However, as noted previously, this seems more related to the notion that they don't feel license renewal requirements, timelines, and costs are particularly burdensome now.

"I haven't heard a lot about the renewal being a burden. I think people when they get their license, they realize right from the beginning that they're going to have to renew it because the expiration date is listed right on there."

"We did discuss at our board meeting last week about the cross profession minimum data set and my board did give me permission to pursue that. It adds like 18 questions to the renewal process. That's not going to raise the cost of practicing medicine. It's going to help us because we're going to have better data. It just adds about five minutes to the renewal process. I think our healthcare providers need oversight. I think regulatory boards do as well and I think that's what our legislature does. If I can't go in and say, 'This is why this is a necessary requirement' then maybe it's not. But I think as long as we're looking at things through the lens of public protection then maybe something is necessary and maybe it's not. That's how the whole checks and balance process comes in."

"Yeah, they are utilizing those arguments for sure right now to justify pushing a lot of this legislation that we're seeing."



Board's Role in Ensuring Requirements Stay the Same

While some indicate that it's not their role to get very involved or lobby for regulations or requirements, others indicate that it is, especially if they think it would result in reducing their ability to keep the public safe. Even then, most speak more about "considering all angles" and "keeping open lines of communication" rather than just working to ensure that requirements stay as they are.

"I think just maintaining transparency and open communication with our stakeholders is an important thing to continue to protect public safety and then just educating individuals in general on why we are asking what we ask for and helping people understand."

"We do a pretty good job of reviewing this on a routine basis. We have requirements that we go through regulatory reviews every through a periodic regulatory reviews every four years from the completion of the previous review. I think this is something that's pretty consistently on the radar for discussion. Is this the appropriate number of hours? Are we seeing any issues? Are we seeing any disciplinary cases or any practice areas where there are issues? Are we seeing ethical issues among our practitioners? Is this continuing education appropriate? So I think it is kind of constantly on the radar and constantly part of discussion."

There are also a few who believe that there is room for reducing requirements, especially for some practitioner types.

"My personal reaction would be to welcome it. We shouldn't make rules for the one bad actor, but often we do. We have one scenario and so we put all these restrictions in place because of the one bad actor. So, I think we need to build the laws and rules for the many and then react to the one offs as needed. I wouldn't eliminate it, but I would definitely make it easier."

"I think that you can encourage learning without making it a pressure filled, high stakes situation. And I think that is appropriate. If you want to 'lessen the requirements' that is. The perspective that I would have on how they could be lessened, changes could be made, but I wouldn't eliminate it."

