

**2019 SENATE HUMAN SERVICES COMMITTEE**

**SB 2059**

# 2019 SENATE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Red River Room, State Capitol

SB2059  
1/7/2019  
Job number 30463

☐ Subcommittee  
☐ Conference Committee

Committee Clerk: Mary Jo Wocken for Justin Velez
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## **Explanation or reason for introduction of bill/resolution:**

Relating to licensure exemption for certain physicians

## **Minutes:**

Written testimony #1 Courtney Koebele Written testimony #2 Dr. Darin Leetum,MD
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**Chair Judy Lee:** Opened the hearing on SB2059. All senators are present.

**Senator Clemens:** Introduced SB2059 and then referred those who were testifying to follow.

**Courtney Koebele:** Executive Director, North Dakota Medical Association (1:12- 5:06) spoke in favor of this bill. Written testimony #1.

**Sen. Anderson:** The compact that is coming up does it cover this issue adequately or?

**Ms. Koebele:** No it doesn't because what the Interstate Medical Licensure compact does is expedited way for licensure, it's not a reciprocity bill and so, the people that are taking advantage under the Interstate Medical licensing compact, they would still have to do an application to get their license in North Dakota.

**Sen. Anderson:** What about athletic training or physical therapist or the other people that travel with the team?

**Ms. Koebele:** I am not sure if they have exact implications as a physician does as far as medical malpractice liability. They may have other provisions in their laws or there is a National Sports Clarity Licensure Act that may cover them, but this just covers physicians that you pointed out.

**Chair Lee:** I suppose this bill's possession to see if there is an issue that they might choose to introduce a bill or come in and ask for an amendment for this one.

**Dr. Darin Leetun, MD:** Spoke in support of SB2059. (7:09-10:19) Written testimony #2.

**Sen. Anderson:** Since you can't practice under this exemption in a health care facility and obviously if somebody is going to be credentialed that takes time to practice in the health

care facility, but, you still would have to really just send the athlete to the emergency room and somebody there would have to admit them since you can't. You wouldn't have any lending privileges at the Health care facility? Is that correct?

**Dr. Darin Leetum, MD:** If there were a circumstance that was emergent, yes. But this really addresses is the circumstance that happens every day in athletic competition where an injured athlete, say for example has a dislocated shoulder, you go into the training room and you reduce it, render care in a medical decision in conjunction with being with that athlete as an adult, and start a care plan that from the circumstance at that point an x-ray is necessary or obligated at that point in time to make any decision making or treatment. So you've already started a care plan in a circumstance where you didn't need to go to the emergency room, so now that's where the risk comes in to an individual like myself. The alternative is there are some things that certainly from a standpoint of a finger fracture, or something like that which they need an x-ray but at the time of competition between you and the discussion with the athlete, you determine that it's now an open fracture, it's not an injury that would be something that requires immediate medical attention at an acute care facility. We can tape it, you can play but if that would render then a circumstance where they were negatively or significantly impacted in the long term, I was practicing without a license. Never going to an emergency department or having any other immediate x-ray or anything else, and that's why I mentioned the medical gentleman's agreement that we have. We would get the x-rays in a certain circumstance when I was in Colorado, with the team against Colorado College. (Example given.)

**Sen. Anderson:** Doctor, tell me a little bit how this practically works and if you feel like its necessary that you notify the local board that your coming there or is the exemption usually automatic in the state for the 10 days that you mentioned here. One of the things here says the board, "shall" adopt rules which means you're putting the burden on the local board who will cost the doctors and so forth, if that's not necessary I don't know why we have that in here at all. Tell me how it works practically when you go to another state and if the exemptions automatically have to notify the local board or what?

**Dr. Darin Leetum, MD:** The mindset by would be that if they in a practical application there is no specific form or something that is required to be filled out, as a reciprocity agreement you participate in this understanding that you have the appropriate jurisdiction through the college that you're dealing with or university you're dealing with, and that as you fulfill the requirements of this law, that this is what you come under without having a specifically add an extra burden onto the governing board, the Board of Medicine to have forms and other things that are going to come into play to then, pre-approve in 60-90 days are not in there to get prior approval from the board through a certain process. That would be the mindset behind it as far as the practicability.

**Chair Lee:** It would seem to me appropriate that the North Dakota Medical Board, Board of Medicine would have to adopt rules because there's got to be some detail otherwise their rules, if their rules don't correspond to this new statute this may fail.

**Sen. Anderson:** As long as you brought that discussion up again, I would suggest that we choose that line to say in the board may, because I really don't think that the Board needs rules relative to this. I think the exemption can be automatic and they can look at it that

way. So I would say they may adopt rules. I don't know you need a whole bunch of rules about this because then there going to get into where someone will say they should notify us and whatever. What other states maybe have done, I don't know.

**Courtney Koebele:** That's a good point. I think that the medical board did anticipate minimal work for them, that it would be automatic so to speak that they receive this waiver just because it's in statute. We would certainly have no objection to changing this to "may" at all, then on the other hand I thought that when Sen. Lee said they have may be have some sort of reference in the rules that it is automatic or something, I don't know. It's up to them obviously.

**Sen. Anderson:** In North Dakota right now, the medical board thinks somebody is practicing without a license, they write up a complaint and it goes to the local state's attorney. I don't see that issue ever coming up with the local state's attorney is going to prosecute somebody who came here with a hockey team from some other state. It could happen that you say it could cause additional injury by a decision that you made, that person's family might bring something up, but it's unlikely to happen. I think the exemption can be automatic and it doesn't have to require additional rules, unless the medical board wants to and they can always do that, if we say "may".

**Chair Lee:** Asked any further testimony in favor of this bill. There was none. Asked for testimony in opposition or neutral.

**Chair Lee:** Closed the hearing on SB2059. Do you want to offer that amendment?

**Sen. Anderson** Moved that on Line 11, page 2 to say "the board may adopt rules to implement this section". Use the word may instead of shall.

**Sen. Roers:** Seconded that we replace shall with may.

**Discussion:**

**Sen. Anderson:** There are a number of lines, look on same page 2, line 3 "a physician may apply, same page line 4 and 5, "A physician may apply to the board to receive an exemption of twenty additional days per sporting event. The board may not issue a physician an exemption of more than thirty additional days in a calendar year". I would strike that sentence altogether because if the board decides they want to give this guy an exemption they ought to be able to do that. We don't need to say that you have to limit it to thirty days. That is my opinion.

**Sen. Clemens:** Maybe we could just refer that to the testimony here and see how what they feel about striking that line.

**Ms. Courtney Koebele:** I have no objection to striking that language.

**Chair Lee:** You don't think the Board of Medicine would either? They are here to defend themselves. It is not your job to do that either.

**Ms. Courtney Koebele:** I would say they would have no objection to that. It is like Sen. Anderson said it's up to them to grant whatever they would want. I think the language was originally included in that to offer the most protections.

**Sen. Anderson:** I will restate my motion. I will start of the page. I move that on line 4 and 5 on page 2 we strike the sentence that says the board may not issue a physician an exemption of more than thirty additional days in a calendar year. Then on line 11, we change, "shall" to "may" adopt rules to implement this section.

**Sen. Roers: Seconded.**

**Ms. Courtney Koebele:** As I read then the next line, after we just struck, it talks about the thirty days again, I just want to make sure that we stay consistent within the language. So an exemption under Subdivision B, subsection 1 is valid during the time certified but may not exceed thirty days in a calendar year.

**Sen. Anderson:** I think that is really a separate. That thirty days I think is where it talks about. I don't think that 6 and 7 impacts what the board can do then.

**Chair Lee:** You just struck out that fact that they can't have more than thirty days and then down here it says it may not exceed thirty days, I understand the question. Alright Ms. Koebele what do you think?

**Ms. Courtney Koebele:** I see where Sen. Roers is coming from, and what I see on 3 and 4 there on page 2, is that they wanted the thirty-day limit for both. Nobody would be able to be here for more than thirty days under either waiver. I have no objection to taking that out either, however, I don't see any harm because they are two separate ways that you come into the state. The Division A is the one where their coming with the team and have their agreement and then B is where they are invited to like be at an event.

**Sen. Roers:** I just wonder if we can strike "but may not exceed and allow the board to address that through their rules rather than being in Century Code".

**Chair Lee:** We are not trying to make this more complicated we are trying to make it simpler.

**Dr. Darin Leetum, MD:** From the standpoint of the exemption certainly I think some of the intent as I read this was that we are trying to give control to the board to be able to manage this and not make them feel as if we're trying to take it out of their hands, per say, but as far as what we're looking for in those circumstances that would exceed I don't see that one it's going to be a very rare event, that that is going to happen, and then two I don't see that having those specific requirements in there makes a large difference into the original intent of what we were looking for. So striking it seems reasonable to me from that standpoint as far as a physician looking to do. It gives that opportunity to truly impact and do what you need to do, for the time required.

**Chair Lee:** Do you think subdivision A subdivision B being different enough that we would eliminate the thirty maximum and I am on page 2, relating to section A and then leave it in in section B.

**Sen. Hogan:** One of the questions I was thinking is this standard language that your organization is using across all states? If it is and we make all these variances is that going to be confusing to other people coming into the state?

**Dr. Darin Leetum, MD:** This is not a specific standard language that is submitted by the ALSSM. No, I would have mentioned that from the get-go. Sometimes we have standard language on these kinds of situations.

**Sen. Clemens:** My opinion on this is four, five, six, seven, just strike all of those just to avoid confusion because people when they read things might start looking a little differently and at one point we're saying may, then the next batch we're saying may not, so, I guess that would be my comment that both of those 30 days would be removed out of there.

**Chair Lee:** It would leave though, all of line six and half of line seven, but delete but may not exceed thirty days in the calendar under line seven.

**Sen. Clemens:** Yes,

**Chair Lee:** So that would still regulate by the post governing body. That would be appropriate, we don't want to mess that up.

**Chair Lee:** If you need more thinking about this we can delay it. I thought this was an easy one and this is a demonstration of how we actually discuss bills. So never mind. Anyway there is a concrete level of proceeding. Senator Anderson are you interested in.

**Sen. Anderson:** I think that Sen. Clemens was probably right, If you leave in Subsection 3 starting with the top of the page 2, A physician may apply to the board to receive an additional exemption of twenty additional days for sporting events, and throw away thirty. Then in the next sentence, the board may not issue a physician an exemption of more than thirty additional days in a calendar year. So in the next sentence, I am looking for a little consistency so I agree with Sen. Clemens that the motion should just strike out on 4, 5, 6, 7 as far as the may, and put the may in number 11.

**Chair Lee:** So the final amendment, would mean that we would be removing on line four beginning with the board, and all of line five and on line seven we would be removing the phrase "which begins but may not exceed 30 days", and on line eleven, we'll be saying "may" instead of "shall" for the board may adopt rules. So would you like to make a motion.

**Sen. Anderson:** That's what the motion said.

**Sen. Roers:** Seconded the motion.

**Sen. Larsen:** On line 23 on the first page, are there any other states that allow hospital privileges? The thought in my head if a person comes in there and they are getting stitches

and something you can't do the stitches and it generates physician bill to that team member, right? There is no other states that are allowing hospital privileges?

**Chair Lee:** I think you are opening another can of worms.

**Dr. Darin Leetum, MD:** Sen. Larson from the standpoint of your guess athlete needing stitches, typically that would be something that is done at the arena. I would stitch them up at the arena and the student athlete would never go to the hospital. In answer to your being going to a care facility my understanding is that in none of the states is the intent that I would ever gain several days or authority to practice at all in any facility. But I would put a cast on somebody at the arena, as part of their care plan.

**Roll call vote: 6 Yeas, 0 Nay, 0 Absent.**

**Chair Lee:** The amendments pass with a 6-0. Now we have an amended bill before us, anyone for a motion?

**Sen. Hogan: Moved a Do Pass on SB2059 As Amended.**

**Sen. O. Larsen: Seconded.**

**Roll call vote: 6 Yeas, 0 Nay, 0 Absent.**

**Carrier: Sen. Anderson**

8/25/19  
1001

January 7, 2019

PROPOSED AMENDMENTS TO SENATE BILL NO. 2059

Page 2, line 4, remove "The board may not issue a physician an exemption"

Page 2, remove lines 5 through 7

Page 2, line 8, replace "5." with "4."

Page 2, line 11, replace "6." with "5."

Page 2, line 11, replace "shall" with "may"

Renumber accordingly



2019 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
BILL/RESOLUTION NO. 2059

Senate Human Services Committee

☐ Subcommittee

Amendment LC# or Description: See below

Recommendation: ☒ Adopt Amendment  
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☐ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
 Other Actions: ☐ Reconsider ☐

Motion Made By Sen. Anderson Seconded By Sen. Roers

Senators	Yes	No	Senators	Yes	No
Chair Lee	X		Senator Hogan	X	
Vice Chair Larsen	X				
Senator Anderson	X				
Senator Clemens	X				
Senator Roers	X				

Total (Yes) 6 No 0

Absent 0

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:

Page 2, line 4, remove "The board may not issue a physician an exemption"  
 Page 2, remove lines 5 through 7  
 Page 2, Line 8, replace "5" with "4"  
 Page 2, Line 11, replace "6" with "5"  
 Page 2, Line 11, replace "shall" with "may"

2019 SENATE STANDING COMMITTEE  
ROLL CALL VOTES  
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Senate Human Services Committee

☐ Subcommittee

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Recommendation: ☐ Adopt Amendment  
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☒ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
 Other Actions: ☐ Reconsider ☐ \_\_\_\_\_

Motion Made By Sen. Hogan Seconded By Sen. O. Larsen

Senators	Yes	No	Senators	Yes	No
Chair Lee	X		Senator Hogan	X	
Vice Chair Larsen	X				
Senator Anderson	X				
Senator Clemens	X				
Senator Roers	X				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Sen. Anderson

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE**

**SB 2059: Human Services Committee (Sen. J. Lee, Chairman)** recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2059 was placed on the Sixth order on the calendar.

Page 2, line 4, remove "The board may not issue a physician an exemption"

Page 2, remove lines 5 through 7

Page 2, line 8, replace "5." with "4."

Page 2, line 11, replace "6." with "5."

Page 2, line 11, replace "shall" with "may"

Renumber accordingly

**2019 HOUSE HUMAN SERVICES**

**SB 2059**

# 2019 HOUSE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Union Room, State Capitol

SB 2059  
3/11/2019  
33512

☐ Subcommittee  
☐ Conference Committee

Committee Clerk: Nicole Klamann by Caitlin Fleck
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## **Explanation or reason for introduction of bill/resolution:**

Relating to licensure exemption for certain physicians.

## **Minutes:**

3
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**Chairman Weisz:** Opened the Meeting on SB 2059. Took roll. Read name and number of bill.

**Senator Clemens: (read attachment 1)**

**Courtney Koebele, ND Medical Association: (see attachment 2)**

**5.41 Rep. Rohr:** What is the need to have "certain physicians" in the bill when you have it defined in the body of it, on line 6 on page 1?

**Ms. Koebele:** I believe that was put in there by Legislative Council, but I can check on that.

**Rep. Rohr:** How would ND know that we gave a physician coming in to the state, and is there a way that they let the medical board know?

**Ms. Koebele:** I thought that too, and one of the amendments was that the board may adopts amendments instead of shall because they don't care to know all of the physicians that are coming in. They thought that if there were to be a problem, then they would have some rules in place there.

**8.05 Darin Leetun, MD: (See attachment 3)**

**Chairman Weisz:** Are you familiar with the surrounding states laws on this?

**Dr. Leetun:** Currently Minnesota has a reciprocity law with us for this kind of care. When I traveled with Michigan tech, I was one of the few physicians that traveled with their team. I don't see it being a very common practice, but it does seem that at national complexes the teams are bringing their own physicians to care for their teams.

**Rep Tveit:** On page 2, lines 3 and 4, talk about extended the exemption up to additional 20 days, where do you see that happening?

**Dr. Leetun:** That would have in Olympic size events, such as special Olympics. Typically, it would be a weekend event so it would be a couple of days.

**Rep Skroch:** Can you walk me through that process, and what you would have to go through to request that exemption?

**Dr. Leetun:** As the bill is written, the process is that the idea of exemption would be in place and then you are known that you have a license, and the board can then determine how they would like that documentation to be. They wrote it in a way so that it wouldn't force the board to do it in one particular way.

**Rep Skroch:** Is this in response to issues that have happened in other states already, or do you anticipate this happening, and what would be the consequence?

**Dr. Leetun:** The governing body for sports orthopedics is trying to cut off an event from happening, and we are trying to cover it. We are anticipating that this could be a problem, and we want to be preventative and proactive in this kind of care, instead of reactive. We are trying to protect the physicians that are doing the care for those individuals that would be injured.

**No further questions or testimony, hearing closed.**

# 2019 HOUSE STANDING COMMITTEE MINUTES

**Human Services Committee**  
Fort Union Room, State Capitol

SB 2059  
3/11/2019  
33526 (0:00-1:02)

☐ Subcommittee  
☐ Conference Committee

Committee Clerk: Nicole Klamann by Caitlin Fleck
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**Explanation or reason for introduction of bill/resolution:**  
Voting on the bill.

**Minutes:**

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**Chairman Weisz:** Opened the Meeting on SB 2059.

**Rep Tveit:** Motion for a do pass.

**Rep Skroch:** Seconded.

**Roll Call Vote:** 14 Yes, 0 No, 0 Absent. Motion carries.

Floor assignment: **Rep. Schneider**

Meeting concluded.

Date: 3/11/2019  
Roll Call Vote #: 1

**2019 HOUSE STANDING COMMITTEE**  
**ROLL CALL VOTES**  
**BILL SB 2059**

House Human Services Committee

☐ Subcommittee

Amendment LC# or Description: \_\_\_\_\_

Recommendation: ☐ Adopt Amendment  
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation  
☐ As Amended ☐ Rerefer to Appropriations  
☐ Place on Consent Calendar  
Other Actions: ☐ Reconsider ☐ \_\_\_\_\_

Motion Made By Rep. Tveit Seconded By Rep. Skroch

Representatives	Yes	No	Representatives	Yes	No
Robin Weisz - Chairman	X		Gretchen Dobervich	X	
Karen M. Rohr - Vice Chairman	X		Mary Schneider	X	
Dick Anderson	X				
Chuck Damschen	X				
Bill Devlin	X				
Clayton Fegley	X				
Dwight Kiefert	X				
Todd Porter	X				
Matthew Ruby	X				
Bill Tveit	X				
Greg Westlind	X				
Kathy Skroch	X				

Total (Yes) 14 No 0

Absent 0

Floor Assignment Rep. Schneider

If the vote is on an amendment, briefly indicate intent:

Motion Passes



**REPORT OF STANDING COMMITTEE**

**SB 2059, as engrossed: Human Services Committee (Rep. Weisz, Chairman)**  
recommends **DO PASS** (14 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING).  
Engrossed SB 2059 was placed on the Fourteenth order on the calendar.

**2019 TESTIMONY**

**SB 2059**



SB 2059  
#1  
1.7.2019

**Senate Human Services Committee**

**SB 2059**

**January 7, 2019**

Chair Lee and Committee Members, I am Courtney Koebele and represent the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students. SB 2059 was proposed as a result of a House of Delegates Resolution adopted by NDMA in 2017.

SB 2059 gives a waiver from licensure for sports team physicians when they are in North Dakota. More than 40 states around the country have similar provisions in their law, and the Federation of State Medical Board has policy which supports the waiver. It is my understanding that only 5 states other than North Dakota do not have some sort of a waiver in place. Those five states: South Dakota, Nebraska, Kansas, Oklahoma, and New Mexico.

- Currently, out-of-state athletic team physicians cannot treat players and others because they lack a North Dakota license.
- The legislation states any visiting team physician must be licensed in their home state and must have an agreement with a sports team to provide care for the team while traveling in that state.
- The bill bans a visiting physician from practicing at a healthcare clinic or healthcare facility including an acute care facility in the visiting state. A visiting team physician can administer sideline evaluations, triage and diagnostic services. However, they must defer to a North Dakota licensed physician if an athlete or staff member needs to be transported to a facility.
- The bill does not give prescriptive rights to out-of-physicians.

Thank you for the opportunity to testify today. I would like to introduce Darin Leetun, MD, an orthopedic surgeon and sports medicine physician from Grand Forks to speak more about the bill and answer any questions.

Chair Lee and committee members, I am Darin Leetun MD. I would like to speak to SB 2059. I currently come to you with 20 years of orthopedics and sports medical coverage experience. I serve as the delegate to the council of chairs for the American Orthopedic Society of Sports Medicine. As a sports body, AOSSM has been acutely aware of the deficiency of state licensing as it relates to athlete coverage by the team physician during traveling of sports teams to other states. The increase of interstate athletic competition has outpaced the current licensing laws. I believe that if this isn't respectfully addressed that it will negatively impact care for injured athletes.

What SB 2059 addresses is allowing the physician that best knows the athlete and athlete support staff as well as the physician that is most trusted by those same individuals to safely care for the patient athlete. The current state of licensure has put me at significant medicolegal and person risk in the past. Having served as team physician for Michigan Tech University, I traveled to the Ralph for hockey coverage of MTU's division I hockey team. In traveling to North Dakota to care for the athletes while they competed in Grand Forks, I was at risk of the violation of practicing without a license if one of those athletes required medical care.

Although the sports community has had a gentleman's agreement that we would support each other in rendering care for athletes as we traveled to competitors out of state schools, nothing in the century code gave us legal protection from prosecution either from the state board or risk related to law suits initiated from the care of those athletes while we were out of state. The concern is that current circumstances will negatively impact athletes getting the best care possible by discouraging physicians from continuing to be willing to serves as athlete patient advocates and care givers for sports teams during out of state events due to the adverse medicolegal and personal risks.

SB 2059 addresses this issue I believe in a thoughtful and respectful way to maintain the integrity of medical practice supervision in North Dakota while allowing the physician that is best positioned to care for the athletes to participate in their care while athletes compete out of state. I appreciate your time and the opportunity to testify.

Thank you!

19.0511.02000

FIRST ENGROSSMENT

Sixty-sixth  
Legislative Assembly  
of North Dakota

ENGROSSED SENATE BILL NO. 2059

Introduced by

Senators Clemens, Oehlke, Holmberg

Representatives Damschen, B. Koppelman, Paur

1 A BILL for an Act to create and enact section 43-17-02.4 of the North Dakota Century Code,  
2 ~~relating to licensure exemption for certain physicians.~~

3 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

4 SECTION 1. Section 43-17-02.4 of the North Dakota Century Code is created and enacted  
5 as follows:

6 **43-17-02.4. Licensure exemption for certain physicians.**

7 1. A physician licensed in good standing to practice in another state is exempt from the  
8 licensure requirements of this chapter if the physician:

9 a. Has a written or oral agreement with a sports team to provide care to team  
10 members and coaching staff traveling with the team for a specific sporting event  
11 in this state; or

12 b. Has been invited by a national sport governing body to provide services to team  
13 members and coaching staff at a national sport training center in this state or to  
14 provide services at an event or competition in this state which is sanctioned by  
15 the national sport governing body if:

16 (1) The physician's practice in this state is limited to the practice required by the  
17 national sport governing body; and

18 (2) The services provided by the physician are within the physician's scope of  
19 practice.

20 2. A physician exempt under this section may not:

21 a. Provide care or consultation to an individual residing in this state, other than an  
22 individual specified in subsection 1; or

23 b. Practice at a licensed health care facility in this state.

- 1        3. An exemption under subdivision a of subsection 1 is valid while the physician is  
2        traveling with the sports team. This exemption may not exceed ten days for each  
3        sporting event. A physician may apply to the board to receive an exemption of twenty  
4        additional days per sporting event.
- 5        4. The board may enter an agreement with a medical and osteopathic licensing board of  
6        another state to implement this section. An agreement may include a procedure for  
7        reporting a potential medical license violation.
- 8        5. The board may adopt rules to implement this section.



**House Human Services Committee**

**SB 2059**

**March 11, 2019**

Chairman Weisz and Committee Members, I am Courtney Koebele and represent the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students.

SB 2059 was proposed as a result of a House of Delegates Resolution adopted by NDMA in 2017.

SB 2059 gives a waiver from licensure for sports team physicians when they are in North Dakota. More than 40 states around the country have similar provisions in their law, and the Federation of State Medical Board has policy which supports the waiver. It is my understanding that only 5 states other than North Dakota do not have some sort of a waiver in place. Those five states: South Dakota, Nebraska, Kansas, Oklahoma, and New Mexico.

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- The bill bans a visiting physician from practicing at a healthcare clinic or healthcare facility including an acute care facility in the visiting state. A visiting team physician can administer sideline evaluations, triage and diagnostic services. However, they must defer to a North Dakota licensed physician if an athlete or staff member needs to be transported to a facility.
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Chair Weisz and committee members, I am Darin Leetun MD. I would like to speak to SB 2059. I currently come to you with 20 years of orthopedics and sports medical coverage experience. I serve as the delegate to the council of chairs for the American Orthopedic Society of Sports Medicine. As a sports body, AOSSM has been acutely aware of the deficiency of state licensing as it relates to athlete coverage by the team physician during traveling of sports teams to other states. The increase of interstate athletic competition has outpaced the current licensing laws. I believe that if this isn't respectfully addressed that it will negatively impact care for injured athletes.

What SB 2059 addresses is allowing the physician that best knows the athlete and athlete support staff as well as the physician that is most trusted by those same individuals to safely care for the patient athlete. The current state of licensure has put me at significant medicolegal and person risk in the past. Having served as team physician for Michigan Tech University, I traveled to the Ralph for hockey coverage of MTU's division I hockey team. In traveling to North Dakota to care for the athletes while they competed in Grand Forks, I was at risk of the violation of practicing without a license if one of those athletes required medical care. Although the sports community has had a gentleman's agreement that we would support each other in rendering care for athletes as we traveled to competitors out of state schools, nothing in the century code gave us legal protection from prosecution either from the state board or risk related to law suits initiated from the care of those athletes while we were out of state. The concern is that current circumstances will negatively impact athletes getting the best care possible by discouraging physicians from continuing to be willing to serves as athlete patient advocates and care givers for sports teams during out of state events due to the adverse medicolegal and personal risks.

SB 2059 addresses this issue I believe in a thoughtful and respectful way to maintain the integrity of medical practice supervision in North Dakota while allowing the physician that is best positioned to care for the athletes to participate in their care while athletes compete out of state. I appreciate your time and the opportunity to testify.

Thank you!