## MEDICINE BOARD[653]

### **Adopted and Filed Emergency**

Rule making related to
The Medicine Board hereby amends Chapter 20, "Licensure Of Genetic Counselors," Iowa Administrative Code.
Legal Authority for Rule Making
This rule making is adopted under the authority provided in Iowa Code chapters 147, 148, 148H and 272C.
State or Federal Law Implemented

This rule making implements, in whole or in part, Iowa Code chapter 148H.

Purpose and Summary

This rule making establishes the requirements for licensure of genetic counselors. This rule making defines the types of informal and nonpublic actions an applicant must report of the board as part of the license application process. This rule making indicates the board will accept a letter sent directly from ABGC and ABMGG to the board as proof that an applicant has been granted active candidate status for provisional licensure. This rule making indicates the licensure committee shall consult with an Iowa licensed genetic counselor if the committee is unable to eliminate questions or concerns about an applicant. This rule making defines the practice of genetic counseling to include precision medicine and indicates the board shall consult with an Iowa licensed genetic counselor if an applicant has not engaged in active practice in the last three years in the United States to determine whether there is another option to demonstrate current clinical competency. This rule making creates an option for an employer-based pathway for an applicant to demonstrate current clinical competency if an applicant has not engaged in active practice in the past three years in the United States. This rule making indicates the board shall consult with an Iowa licensed genetic counselor prior to denying a license.

Reason for Adoption of Rule Making Without Prior Notice and Opportunity for Public Participation

Pursuant to Iowa Code section 17A.4(3), the Medicine Board finds that notice and public participation are unnecessary or impractical because emergency adoption approved by Administrative Rules Review Committee. The Iowa Board of Medicine recently adopted ARC 4339C regarding the licensure of genetic counselors. After the Board adopted the rules, a representative for the genetic counselors requested several minor amendments. At the last ARRC meeting, the Board requested and was granted a 70-delay. The rules are necessary to implement Iowa Code chapter 148H which became effective on January 1, 2019, and are necessary to begin licensing genetic counselors. The rules are administrative in nature and have not been controversial. The rules are scheduled for review at the next ARRC meeting on May 14, 2019. The Board would like to request emergency rule making.

In compliance with Iowa Code section 17A.4(3)"a," the Administrative Rules Review Committee at its May 14, 2019, meeting reviewed the Medicine Board's determination and this rule making and approved the emergency adoption.

#### Reason for Waiver of Normal Effective Date

Pursuant to Iowa Code section 17A.5(2)"b"(1)(b) the Medicine Board also finds that the normal effective date of this rule making, 35 days after publication, should be waived and the rule making made effective on May 14, 2019, because The Iowa Board of Medicine recently adopted ARC 4339C regarding the licensure of genetic counselors. After the Board adopted the rules, a representative for the genetic counselors requested several minor amendments. At the last ARRC meeting, the Board requested and was granted a 70-delay. The rules are necessary to implement Iowa Code chapter 148H which became effective on January 1, 2019, and are necessary to begin licensing genetic counselors. The rules are administrative in nature and have not been controversial. The rules are scheduled for review at the next ARRC meeting on May 14, 2019. The Board would like to request emergency rule making..

This rule making was adopted by the Medicine Board on April 12, 2019.

Fiscal Impact

This rule making has no fiscal impact to the State of Iowa.

Jobs Impact

This rule making will likely increase the pool of genetic counselors and increase access to genetic counseling services in Iowa. It will likely have a positive jobs impact, which is difficult to measure at this time.

Waivers

Any person who believes that the application of the discretionary provisions of this rule making would result in hardship or injustice to that person may petition the Medicine Board for a waiver of the discretionary provisions, if any.

Review by Administrative Rules Review Committee

The Administrative Rules Review Committee, a bipartisan legislative committee which oversees rule making by executive branch agencies, may, on its own motion or on written request by any individual or group, review this rule making at its <u>regular monthly meeting</u> or at a special meeting. The Committee's meetings are open to the public, and interested persons may be heard as provided in Iowa Code section 17A.8(6).

Effective Date

This rule making will become effective on May 14, 2019.

The following rule-making action is adopted:

The following rule-making actions are proposed:

### ITEM 1. Amend paragraphs **20.8(2)"f" and "h"** as follows:

f. A statement disclosing and explaining any informal or nonpublic actions, such as letters of warning, letters of education, any confidential retraining, or any kind of confidential action taken toward a genetic counselor's certification or license which is not public discipline; warnings issued, investigations conducted, or disciplinary actions taken, whether by voluntary agreement or formal action, by a medical, genetic counseling or professional regulatory authority; an educational institution; a training or research program; or a health facility in any jurisdiction;

# This amendment defines the types of informal or nonpublic actions an applicant must report to the board as part of the license application process.

h. A letter sent directly from the ABGC or ABMGG to the board verifying the applicant holds active certification in genetic counseling by the ABGC or ABMGG for genetic counselor licensure or a letter sent directly from ABGC ABMGG to the board verifying the applicant has been granted active candidate status for provisional licensure;

This amendment indicates the board will accept a letter sent directly from ABGC and ABMGG to the board as proof that an applicant has been granted active candidate status for provisional licensure.

### ITEM 2. Amend paragraphs **20.8(4)"a" and "b"** as follows:

a. Paying all fees charged by regulatory authorities, national testing or credentialing certifying organizations, health facilities, and educational institutions providing the information specified in subrule 20.8(2);

# This amendment replaces national testing or credentialing organization with national certifying organization.

b. Providing accurate, up-to-date, and truthful information on the application form including, but not limited to, that specified under subrule 20.8(2) related to prior professional experience, education, training, active certification, licensure or registration, and disciplinary history.

### This amendment removes registration as this does not apply to genetic counselors.

### ITEM 3. Amend paragraphs **20.8(5)**"g" as follows:

g. If the committee is not able to eliminate questions or concerns without dissension from staff or a committee member, <u>and after consultation with an Iowa licensed genetic counselor</u>, the committee shall recommend that the board:

This amendment indicates the licensure committee shall consult with an Iowa licensed genetic counselor if the committee is unable to eliminate questions or concerns about an applicant.

(3) If an applicant has not engaged in the fields of genetic counseling <u>or precision medicine</u> in the past three years in any jurisdiction of the United States, <u>the Board may, after</u> consultation with an Iowa licensed genetic counselor, require an applicant to:

This amendment defines the practice of genetic counseling to include precision medicine and indicates the board shall consult with an Iowa licensed genetic counselor if an applicant has not engaged in active practice in the last three years in the United States to determine whether there is another option to demonstrate current clinical competency.

3. If the genetic counselor is employed or has an offer of employment, successfully complete any other pathway as agreed by the board and the genetic counselor's employer;

This amendment creates an option for an employer-based pathway for an applicant to demonstrate current clinical competency if an applicant has not engaged in active practice in the past three years in the United States.

- ITEM 4. Amend paragraphs 20.8(5)"h" as follows:
- (3) If an applicant has not engaged in the fields of genetic counseling <u>or precision medicine</u> in the past three years in any jurisdiction of the United States, the Board may, after consultation <u>with an Iowa licensed genetic counselor</u>, require an applicant to:

This amendment defines the practice of genetic counseling to include precision medicine and indicates the board shall consult with an Iowa licensed genetic counselor if an applicant has not engaged in active practice in the past three years in the United States to determine whether there is another option to demonstrate current clinical competency.

3. If the genetic counselor is employed or has an offer of employment, successfully complete any other pathway as agreed by the board and the genetic counselor's employer;

This amendment creates an option for an employer-based pathway for an applicant to demonstrate current clinical competency if an applicant has not engaged in active practice in the past three years in the United States.

- ITEM 5. Amend paragraph **20.8(6)** as follows:
- **20.8(6)** Grounds for denial of licensure. The board, on the recommendation of the committee, and after consultation with an Iowa licensed genetic counselor, may deny an application for licensure for any of the following reasons:

This amendment indicates the board shall consult with an Iowa licensed genetic counselor prior to denying a license if the board believes there are grounds for denial of licensure.

ITEM 6. Amend paragraph **20.10(1)"b"** as follows:

b. A letter sent directly from the ABGC or ABMGG to the board verifying the applicant holds active certification in genetic counseling by the ABGC or ABMGG for genetic counselor licensure or proof of active candidate status for provisional licensure a letter sent directly from ABGC or ABMGG to the board verifying the applicant has been granted active candidate status for provisional licensure.

This amendment indicates the board will accept a letter sent directly from ABGC and ABMGG to the board as proof that an applicant has been granted active candidate status for provisional licensure.

ITEM 7. Amend paragraph **20.11(1)"d"** as follows:

d. A letter sent directly from the ABGC or ABMGG to the board verifying the applicant holds active certification in genetic counseling by the ABGC or ABMGG for genetic counselor licensure or a letter sent directly from the ABGC or ABMGG to the board verifying the applicant has been granted active candidate status for provisional licensure;

This amendment indicates the board will accept a letter sent directly from ABGC and ABMGG to the board as proof that an applicant holds active certification in genetic counseling or that an applicant has been granted active candidate status for provisional licensure.

ITEM 8. Amend paragraph **20.11(2)** as follows:

**20.11(2)** *Reinstatement:* If an applicant <u>for reinstatement</u> has not engaged in the fields of genetic counseling <u>or precision medicine</u> in the past three years in any jurisdiction of the United States, <u>the Board may, after consultation with an Iowa licensed genetic counselor</u>, require an applicant to:

This amendment defines the practice of genetic counseling to include precision medicine and indicates the board shall consult with an Iowa licensed genetic counselor if an applicant has not engaged in active practice in the past three years in the United States to determine whether there is another option to demonstrate current clinical competency.