

**ONE HUNDRED NINTH LEGISLATURE - SECOND SESSION - 2026**  
**COMMITTEE STATEMENT**  
**LB1212**

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**Hearing Date:** Wednesday February 11, 2026  
**Committee On:** Health and Human Services  
**Introducer:** Riepe  
**One Liner:** Provide for licensure of internationally trained physicians under the Uniform Credentialing Act

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**Roll Call Vote - Final Committee Action:**  
Advanced to General File with amendment(s)

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**Vote Results:**

<b>Aye:</b>	6	Senators Ballard, Fredrickson, Hansen, Meyer, G., Quick, Riepe
<b>Nay:</b>		
<b>Absent:</b>	1	Senator Hardin
<b>Present Not Voting:</b>		

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**Testimony:**

**Proponents:**

Senator Merv Riepe  
Hunter Traynor  
Michael Zimmer  
Matthew Gregory  
Arturo Aceves Gonzalez  
Nick Grandgenett  
Itzel Lopez  
Carter Matt

**Representing:**

Opening Presenter  
Nebraska Chamber of Commerce and Industry  
World Education Services, WES  
Nebraska Farmers Union  
LEDC, Latino Economic Development Council  
Nebraska Appleseed  
LEDC, Latino Economic Development Council  
Career Ladder

**Opponents:**

Jodanne Hedrick DO  
Wesley Zeger

**Representing:**

Board of Medicine and Surgery, State of Nebraska  
Nebraska Medical Association

**Neutral:**

**Representing:**

\* ADA Accommodation Written Testimony

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**Summary of purpose and/or changes:**

LB 1212 allows an internationally trained physician to practice medicine in the United States. The Department of Health and Human Services, with approval of the Board of Medicine and Surgery, shall issue a restricted license or limited license for no longer than three years to these physicians. This bill provides disciplinary actions under the Uniform Credentialing Act as well as the current appeal process under the Administrative Procedure Act. Definitions are also provided.

Section by Section Summary:



Sec. 1: Adds new sections 3 to 8 of the bill under the Medicine and Surgery Practice Act.

Sec. 2: Provides that the new definitions in section 3 of the bill apply to the Medicine and Surgery Practice Act and the Uniform Credentialing Act

Sec. 3: Provides the following defined terms for purposes of sections 3 to 8 of the bill:

"Health profession shortage area" is defined as a geographic region of the state that has been designated as such by the Nebraska Rural Health Advisory Commission. In making this designation, the commission shall consider the number of physicians that currently practice in the region; the racial, ethnic, cultural and language needs of the area; travel time; and other criteria provided in federal regulations.

"Internationally trained physician" is defined as a physician who has received a degree of doctor of medicine or its equivalent from a legally chartered medical school outside the United States, completed training in the United States or another country with a substantially similar medical training program, been licensed or otherwise authorized to practice medicine in a country other than the United States, and has practiced medicine for at least three of the last five years in the United States or another country unless waived by the Board of Medicine and Surgery.

"Legally chartered medical school outside the United States" is defined as a medical school recognized by the Educational Commission for Foreign Medical Graduates that provides individuals with a medical education or training outside the United States that is substantially similar to the training required to qualify to practice medicine and surgery in this state.

Also, "licensing examination" means the United States Medical Licensing Examination. "Limited license" means a license to practice medicine. "Participating health care entity" is defined as a federally qualified health center, hospital, or other entity that provides an assessment and evaluation program and is approved by the board. The Board of Medicine and Surgery may establish additional criteria for qualification as a participating health care entity. Lastly, "restricted license" is defined as a license that permits an internationally trained physician to practice as a practitioner in a health profession shortage area independently without the supervision of a participating health care facility.

Sec. 4: A new section of law that requires the Department of Health and Human Services, with approval of the Board of Medicine and Surgery, to issue a limited license for no longer than three years to an internationally trained physician if the physician and the participating health care entity submit evidence. The evidence must show that the physician meets the definition of an internationally trained physician, has a valid certification from the Educational Commission for Foreign Medical Graduates, has achieved a passing score on step one and step two of the licensing examination, has entered into an agreement with a participating health care entity under the supervision of a licensed physician, has federal immigration status that allows the internationally trained physician to practice in the United States, and has satisfied other criteria as required by the board.

In addition, an internationally trained physician practicing under a limited license shall be allowed to renew such license for one three-year period, but no more than six years. Also, this physician is required to be supervised by and employed by a participating health care entity. The participating health care entity is required to employ one or more supervisors, carry medical malpractice insurance, and complete all required assessment and evaluation criteria.

Sec. 5: A new section of law that requires the Department of Health and Human Services, with approval of the Board of Medicine and Surgery, to issue a restricted license for no longer than three years to an internationally trained physician. This physician is required to have practiced medicine for three years under the supervision of a



participating health care entity, completed and received satisfying results on the assessment or evaluation program, received a satisfactory score on step three of the licensing examination, and completed additional prerequisites required by the board.

Sec. 6: A new section of law that provides that after an internationally trained physician has practiced under a limited license for three years and a restricted license of three years, such physician shall be eligible to apply for an unrestricted license. While practicing under a limited or restricted license, the physician shall, every six months, submit a statement certifying employment as a physician in this state and a disclosure of assessment or evaluation results. The physician is required to notify the Board of Medicine and Surgery of any employment changes while holding a limited license.

Sec. 7: A new section of law that provides in addition to any other grounds for disciplinary action against the license under the Uniform Credentialing Act, the Department of Health and Human Services may take disciplinary action. The disciplinary action includes suspension and revocation, against a license granted pursuant to section 4 or 5 of this bill for professional misconduct, noncompliance, or an unsatisfactory assessment or evaluation. A limited or restricted license may be suspended, pending a full disciplinary review by the Department of Health and Human Services, if, in the judgement of a participating health care entity, the internationally trained physician's practice jeopardizes the health and well-being of a patient.

Also, a limited or restricted license may be suspended, pending a full disciplinary review by the Department of Health and Human Services, if, in the judgement of a participating health care entity, the internationally trained physician's practice jeopardizes the health and well-being of a patient.

Sec. 8: A new section of law that provides that an internationally trained physician aggrieved by any action against such physician's limited or restricted license may appeal the decision. The appeal shall be in accordance with the Administrative Procedure Act.

Sec. 9: Repealer

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**Explanation of amendments:**

AM2477 is a white copy committee amendment that strikes the original sections and inserts the following new sections.

**Section by Section Summary:**

Section 1: Amends Section 38-2001 to include new sections 3 through 9 in the Medicine and Surgery Practice Act.

Section 2: Amends Section 38-2002 to apply the defined terms in new section 3 in the Medicine and Surgery Practice Act and elsewhere in the Uniform Credentialing Act.

Section 3: A new section of law that adds definitions. The amendment adds the definitions of "assessment and evaluation program" and "general competencies", and redefines "health profession shortage area" and "internationally trained physician" which were defined in the original bill. Also, the definitions of "legally chartered medical school", "licensing examination", and "participating health care entity" remain the same as in the original bill. The definition of "provisional license" replaces the definition of "limited license" in the original bill and the definition of "transitional license" replaces the definition of "restricted license" in the original bill.

Section 4: A new section of law that requires the Department of Health and Human Services, with approval of the Board of Medicine and Surgery, to issue a provisional license for no longer than three years to an internationally



trained physician. The internationally trained physician and the participating health care entity must submit evidence that the physician meets the definition of internationally trained physician as defined in section 3 of this act. Second, the physician must have a valid certification issued by the Educational Commission for Foreign Medical Graduates. Third, the physician must have achieved a passing score on step one and step two of the licensing examination. Fourth, the physician must have entered into an agreement with a participating health care entity for full-time employment under the supervision of a licensed physician. Such agreement shall provide that the participating health care entity is required to conduct an initial formative needs assessment, develop an individualized learning and supervision plan, and assess and evaluate the physician's familiarity with current medical standards. Fifth, the physician must be either a United States citizen or be legally authorized to work by the federal government pursuant to 8 C.F.R. 274a.12. Sixth and lastly, the physician must have satisfied other criteria as required by the Board of Medicine and Surgery which shall not include a medical education residency program as a prerequisite.

In addition, an internationally trained physician practicing under a provisional license shall be allowed to renew such provisional license for one three-year period. No physician practicing under a provisional license shall be allowed to hold a provisional license for more than six years.

Also, within six months after a physician commences to practice under a provisional license, the participating health care entity is required to conduct an initial formative needs assessment of the internationally trained physician's competence in the general competencies, including review of the physician's prior graduate medical education and practice experience using a process approved by the Board of Medicine and Surgery. The participating health care entity shall submit to the Board of Medicine and Surgery an individualized learning and supervision plan for the physician that is informed by the initial formative needs assessment and addresses all general competencies for the physician's intended scope of practice. In addition, the initial formative needs assessment shall be used to identify areas of strength and areas in which additional support is needed and shall not be used to deny issuance of a provisional license to a physician who otherwise meets the requirements of this section.

Further, the assessment and evaluation program utilized by a participating health care entity for a physician practicing under a provisional license shall include, but not be limited to, standardized assessments of medical knowledge; direct observation of the physician's clinical skills; multi-source feedback from physicians and other health care team members and, when feasible, patients; and periodic audits of medical records for which the physician is responsible. Also, the assessment and evaluation program shall ensure that the physician engages in sufficient volume and breadth of cases to permit meaningful assessment across the general competencies for the physician's intended scope of practice.

Finally, an internationally trained physician practicing under a provisional license shall be supervised and employed by a participating health care entity. All practice under a provisional license shall initially occur under supervision by a supervisor who meets the requirements described in this section. The level of supervision may be adjusted over time based on documented competence demonstrated through the assessment and evaluation program, in accordance with standards and supervision levels established by the Board of Medicine and Surgery in rule and regulation. The participating health care entity is required to employ one or more supervisors to supervise internationally trained physicians. A supervisor shall be licensed to practice medicine in the state in good standing, and possess all necessary institutional privileges. Also, the participating health care entity shall carry medical malpractice insurance covering such physician during the period of time the physician practices under the provisional license and complete all required assessment and evaluation program criteria.

Section 5: A new section of law that requires the Department of Health and Human Services, with approval of the Board of Medicine and Surgery, to issue a transitional license for no longer than three years to an internationally trained physician. The internationally trained physician is required to have practiced medicine for three years under the supervision of a participating health care entity. Also, the physician is required to have completed and received



satisfactory results on the participating health care entity's Board of Medicine and Surgery approved assessment and evaluation program which shall document, using multiple assessment methods, the physician's performance across the general competencies within the physician's intended scope of practice. In addition, the physician shall have received a satisfactory score on Step three of the licensing examination and completed additional prerequisites required by the Board of Medicine and Surgery. Such prerequisites shall not include a medical education residency program.

Prior to issuing a traditional license, the Board of Medicine and Surgery shall receive from the participating health care entity a final assessment and evaluation report on a form prescribed by the Board affirming that, in the judgment of the participating health care entity, the physician has demonstrated the ability to engage in independent and unsupervised practice under the physician's intended scope of practice across all general competencies. Also, the transitional license may be renewed for one three-year period.

Section 6: A new section of law that provides that after an internationally trained physician has practiced under a provisional license for a minimum of three years and a transitional license for a minimum of three years, such physician shall be eligible to apply for an unrestricted license to practice medicine in this state. Prior to granting such unrestricted license, the Board of Medicine and Surgery shall consider assessment data and reports submitted under sections 4 and 5 of this act.

While participating under a provisional or transitional license, the physician is required to submit, to the Board of Medicine and Surgery every six months or upon request, a statement certifying that the physician is employed as a physician in this state and not subject to discipline, and a disclosure of the results of any assessment or evaluation completed by the participating health care entity under a Board of Medicine and Surgery approved assessment and evaluation program. In addition, the physician is required to notify the Board of Medicine and Surgery of any changes in employment during the period of time a provisional license is in effect.

Section 7: A new section of law that requires a participating health care entity employing a physician practicing under a provisional or transitional license to ensure that such physician is subject to, and protected by, the entity's policies regarding work hours, discrimination and harassment, and access to wellness and support services on the same basis as other physicians employed by the entity. Also, a participating health care entity shall ensure that such physician receives written information at the commencement of employment regarding the policies described in this section.

Section 8: A new section of law that allows, in addition to any other grounds for disciplinary action against the license under the Uniform Credentialing Act, the Department of Health and Human Services to take disciplinary action. The disciplinary action includes suspension and revocation against a license granted under section 4 or 5 of this act for professional misconduct, noncompliance with licensure requirements, or an unsatisfactory assessment or evaluation submitted by a participating health care entity. In determining whether an assessment or evaluation is unsatisfactory under this subsection, the Department of Health and Human Services and the Board of Medicine and Surgery may consider the totality of assessment data generated under a Board of Medicine and Surgery approved assessment and evaluation program, including deficiencies in one or more general competencies and the physician's response to remediation. A provisional or transitional license may be suspended, pending a full disciplinary review by the Department of Health and Human Services, if, in the judgement of a participating health care entity, the internationally trained physician's practice jeopardizes the health and well-being of a patient.

Section 9: A new section of law that allows an internationally trained physician aggrieved by any action against such physician's provisional or transitional license to appeal the decision. The appeal shall be in accordance with the Administrative Procedure Act.



Section 10: Operative date of August 1, 2027.

Section 11: Repealer

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Brian Hardin, Chairperson

