

HOD ACTION: Recommendations in Council on Medical Education Report 8 adopted and the remainder of the report filed.

REPORT OF THE COUNCIL ON MEDICAL EDUCATION

CME Report 8-A-23

Subject: Challenges to Primary Source Verification of International Medical Graduates Resulting from International Conflict

Presented by: John P. Williams, MD, Chair

Referred to: Reference Committee C

1 American Medical Association (AMA) Policy D-255.975, “Hardship for International Medical
2 Graduates from Russia and Belarus,” calls for the following action:

3
4 “Our AMA will study the impact of the current political crisis on international medical
5 graduates with medical degrees from Russia and Belarus who are already in the U.S. either in
6 training or practicing in regards to their ability to obtain primary source verification and report
7 back during the 2022 Interim House of Delegates meeting.”
8

9 The resolution that led to the policy was adopted at the 2022 Annual Meeting of the AMA House
10 of Delegates (HOD). This report is in response to that policy.
11

12 BACKGROUND

13
14 Russia, with the support of Belarus, invaded Ukraine on February 24, 2022. This action
15 precipitated sanctions of the invading countries by the international community, including the U.S.,
16 which significantly reduced communication to and from organizations in Belarus and Russia, to
17 include postal mail, internet, and receipt and origination of electronic payments. These gaps in
18 communications may affect international medical graduates (IMGs) in the U.S. who completed
19 medical school in Russia or Belarus, and who may require primary source verification for purposes
20 of obtaining licensure or credentialing.
21

22 One of the key organizations involved in such verification and assistance of IMGs is the
23 Educational Commission for Foreign Medical Graduates (ECFMG), a member of Intealth, an
24 integrated organization that also includes the Foundation for Advancement of International Medical
25 Education and Research (FAIMER™). Certification by ECFMG is the standard for evaluating the
26 qualifications of these physicians before they enter U.S. graduate medical education (GME).
27 ECFMG Certification also is a requirement for IMGs to take Step 3 of the three-step United States
28 Medical Licensing Examination® (USMLE®) and to obtain an unrestricted license to practice
29 medicine in the United States.
30

31 The ECFMG provides other programs for IMGs pursuing U.S. GME, including those that 1) assist
32 them with the process of applying for U.S. GME positions and 2) sponsor foreign nationals for the
33 J-1 visa for the purpose of participating in such programs. The ECFMG also offers a verification
34 service that allows GME programs, state medical boards, hospitals, and credentialing agencies in
35 the United States to obtain primary-source confirmation that their IMG applicants are ECFMG-
36 certified.¹

1 A little over a month after the invasion, on March 31, 2022, the ECFMG announced that it was
2 pausing certification services requested by Russian citizens residing in Russia.² The ECFMG
3 statement reflected concern for the health and safety of all medical school students and graduates as
4 they pursue their medical education and training. The statement also noted that 30 Russian
5 physicians and 10 Ukrainian physicians were selected in the 2022 Match for positions in U.S.
6 training programs; ECFMG noted that it would do its best to assist those seeking J-1 visas.

7 8 RELEVANT AMA POLICIES

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10 The AMA has a number of policies reflecting support for IMGs and their significant role in
11 providing health care services in the U.S., as highlighted in the appendix. That said, AMA policy
12 does not specifically address the issue of physicians in the U.S. who are from countries that are
13 sanctioned by the international community and the resulting impact on primary source verification
14 of their medical education for the purposes of licensure, certification, and credentialing.

15
16 Existing policy D-275.989, “Credentialing Issues,” asks that the AMA encourage “state medical
17 licensing boards, the Federation of State Medical Boards, and other credentialing entities to accept
18 the Educational Commission for Foreign Medical Graduates certification as proof of primary
19 source verification of an IMG’s international medical education credentials.” If credentialing
20 organizations follow this recommendation, that obviates the need for communication to foreign
21 schools or government agencies to obtain the requested documentation.

22 23 RELEVANT POLICY FROM THE WORLD MEDICAL ASSOCIATION

24
25 Founded in 1947, the World Medical Association (WMA) is a non-governmental, not-for-profit
26 voluntary organization representing 9 million physicians from 115 national medical associations.
27 The WMA’s areas of interest comprise ethical, educational, social, public health, and medical
28 practice concerns, among others. The AMA has a delegation to the WMA and is involved in
29 proposing and revising WMA policies, which help inform global health policy.³

30
31 A recent search of WMA policy found nothing that specifically mentions primary source
32 verification or support for IMGs from Russia and Belarus. The policy “Ethical Guidelines for the
33 International Migration of Health Workers”⁴ includes the following recommendations:

34
35 5) Physicians should not be prevented from leaving their home or adopted country to pursue
36 career opportunities in another country.

37
38 8) Nothing should prevent countries from entering into bilateral agreements and agreements
39 of understanding, as provided for in international law and with due cognizance of international
40 human rights law, so as to effect meaningful co-operation on health care delivery, including the
41 exchange of physicians.

42
43 The above policy also underscores the World Health Organization (WHO) Global Code of Practice
44 on the International Recruitment of Health Personnel,⁵ which specifies ethical and equitable
45 recruitment principles, but again no specific mention is made of primary source verification or
46 challenges to such recruitment and verification of credentials in the case of war and/or conflict.

47
48 Other tangentially relevant WMA policies include two resolutions (both adopted in October 2022)
49 on humanitarian and medical aid⁶ and support for medical personnel and citizens⁷ that specifically
50 mention the Russian invasion and the resulting impact on Ukraine.

1 DISCUSSION

2
3 Policy D-255.975 stipulates the study of IMGs “with medical degrees from Russia and Belarus
4 who are already in the U.S. either in training or practicing” in regard to concerns for primary
5 source verification of their education. The ECFMG statement, in contrast, specifically paused
6 certification services requested by Russian citizens residing in Russia (not Belarus)—it was not
7 directed at those Russian citizens already in the U.S., as described in the resolution.

8
9 In the case of the invasion of Ukraine, damages to and interruptions of the country’s technological
10 infrastructure would seem to present even greater challenges to the provision of needed documents
11 to the U.S. than those of Russia and Belarus. The resolution does not mention this aspect.

12
13 It is important to note that, if a physician is already in GME, that individual is primary source
14 verified, as such verification is a requirement for entry to GME (personal communication with
15 senior ECFMG staff, February 7, 2023). Even those IMGs arriving this year to commence GME
16 are likely to have already had their documents verified when they started the certification process
17 (which typically takes place over a three-year period). In other words, the impact on credentials
18 verification arising from any international conflict or cessation of diplomatic relations between the
19 U.S. and another country is delayed, so if the situation continues past three years, the negative
20 impacts to primary source verification rise.

21
22 ECFMG staff also indicated that the ECFMG pursues alternative options if the customary primary
23 source verification process is not workable—for example, when there is international conflict or
24 the medical school or ministry of health in a given country is not responding to ECFMG queries.
25 Through one alternative option, the applicant for ECFMG certification can request that three
26 medical school classmates or faculty who are now practicing in the U.S. swear on their U.S.
27 medical license that the applicant did indeed graduate. This process requires completion of a
28 notarized form and submission of a letter describing the facts of the matter. The ECFMG tries to
29 assist individual applicants throughout the certification process (while maintaining the integrity of
30 its procedures), to include postponement of examinations and refunding fees, where appropriate.

31
32 Because of the relatively low number of IMGs currently in U.S. GME programs from Russia,
33 Belarus, and Ukraine—217, 36, and 115, respectively, according to 2022 data from the AMA GME
34 Database—the extent of the impact of the Ukraine conflict on primary source verification is limited
35 in scope. ECFMG staff noted that, from a historical perspective, the cessation of communication
36 from Russia to any U.S. agency during the 1990s, the embargo with Cuba, and the Gulf wars in
37 Iraq and Iran presented significantly greater difficulties to obtaining primary source verification of
38 medical education. Nonetheless, due to the history of challenges associated with primary source
39 verification for IMGs, the Council on Medical Education—with input from the IMG Section—will
40 regularly engage with the ECFMG to monitor the impact of conflicts on primary source
41 verification of medical education and report back to the HOD as needed.

42
43 SUMMARY AND RECOMMENDATIONS

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45 Even aside from international conflict and war, and public health disruptions such as the COVID-
46 19 pandemic, there are many challenges to primary source verification of IMGs. Despite the
47 internet and email technologies, the obstacles of international communication and retention of
48 appropriate educational records by countries of origin continue to present difficulties for IMGs.
49 The cessation of international bank payments and transfers, due to sanctions put in place by the
50 international community in response to the invasion, can also hinder requests for primary source
51 documentation.

1 The impacts of the war in Ukraine on primary source verification of physicians from Russia and
2 Belarus have been relatively limited—in part due to the small number of IMGs in the U.S. from
3 those countries. In addition, the ECFMG has been responsive to the situation and has in place
4 multiple alternative methods for verifying an IMG’s medical education credentials. That said, the
5 Council on Medical Education will continue to monitor this situation, as well as other conflicts or
6 wars that may delay primary source verification of IMGs’ medical education, and report back to
7 the HOD as needed.

8
9 As noted above, existing AMA policy D-275.989, “Credentialing Issues,” is the most relevant
10 policy to the question posed by the resolution and is therefore recommended for reaffirmation
11 through this report. Widespread acceptance by credentialing agencies of ECFMG certification
12 would provide relief to ECFMG-certified IMGs from any country as they seek initial or renewed
13 medical certification, licensure, or credentials in the U.S.

14
15 The Council on Medical Education therefore recommends that the following recommendations be
16 adopted and the remainder of this report be filed:

- 17
18 1. That American Medical Association (AMA) Policy D-275.989, “Credentialing Issues,” be
19 amended as follows:

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21 Our AMA encourages state medical licensing boards, the Federation of State Medical
22 Boards, and other credentialing entities to accept certification by the Educational
23 Commission for Foreign Medical Graduates (a member of Intealth) as proof of primary
24 source verification of an IMG’s international medical education credentials. (Modify
25 Current HOD Policy)

- 26
27 2. That AMA Policy D-255.975, “Hardship for International Medical Graduates from Russia
28 and Belarus,” be rescinded, as having been fulfilled by this report.

Fiscal note: \$1,000.

APPENDIX: RELEVANT AMA POLICY

[H-255.966, “Abolish Discrimination in Licensure of IMGs”](#)

1. Our AMA supports the following principles related to medical licensure of international medical graduates (IMGs): . . .

C. Discrimination against physicians solely on the basis of national origin and/or the country in which they completed their medical education is inappropriate. . . .

(BOT Rep. 25, A-15; Appended: CME Rep. 4, A-21)

[H-255.988, “AMA Principles on International Medical Graduates”](#)

Our AMA supports: . . .

8. The AMA continues to support the activities of the ECFMG related to verification of education credentials and testing of IMGs.

9. That special consideration be given to the limited number of IMGs who are refugees from foreign governments that refuse to provide pertinent information usually required to establish eligibility for residency training or licensure. . . .

22. The Federation of State Medical Boards, its member boards, and the ECFMG in their willingness to adjust their administrative procedures in processing IMG applications so that original documents do not have to be recertified in home countries when physicians apply for licenses in a second state. . . .

24. Continued study of challenges and issues pertinent to IMGs as they affect our country’s health care system and our physician workforce. . . .

(BOT Rep. Z, A-86; Reaffirmed: Res. 312, I-93; Modified: CME Rep. 2, A-03; Reaffirmation I-11; Reaffirmed: CME Rep. 1, I-13; Modified: BOT Rep. 25, A-15; Modified: CME Rep. 01, A-16; Appended: Res. 304, A-17; Modified: CME Rep. 01, I-17; Reaffirmation: A-19; Modified: CME Rep. 2, A-21; Modified: CME Rep. 1, A-22; Modified: CCB/CLRPD Rep. 1, A-22)

[D-275.989, “Credentialing Issues”](#)

Our AMA encourages state medical licensing boards, the Federation of State Medical Boards, and other credentialing entities to accept the Educational Commission for Foreign Medical Graduates certification as proof of primary source verification of an IMG’s international medical education credentials.

(CME Rep. 3, A-02 Appended: CME Rep. 10, A-11 Modified: CME Rep. 1, A-21)

[H-275.978, “Medical Licensure”](#)

Our AMA . . . (20) urges that documentation of graduation from a foreign medical school be maintained by boards providing an initial license, and that the documentation be provided on request to other licensing boards for review in connection with an application for licensure by endorsement;

(CME Rep. A, A-87; BOT Rep. I-93-13; CME Rep. 10 - I-94; Modified: Sunset Report, I-97; Reaffirmation A-04; Reaffirmed: CME Rep. 3, A-10; Reaffirmation I-10; Reaffirmed: CME Rep. 6, A-12; Appended: Res. 305, A-13; Reaffirmed: BOT Rep. 3, I-14; Modified: CME Rep. 1, A-18; Appended: CME Rep. 3, I-19; Modified: CME Rep. 2, A-21)

[D-275.975, “Sharing of Medical Disciplinary Data Among Nations”](#)

Our AMA will, in conjunction with the Federation of State Medical Boards, support the efforts of the International Association of Medical Regulatory Authorities in its current efforts toward the exchange of information among medical regulatory authorities worldwide.

(Res. 318, A-05; Reaffirmed: CME Rep. 1, A-15)

REFERENCES

¹ Educational Commission for Foreign Medical Graduates. About Us. Available at: <https://www.ecfmg.org/about/>. Accessed January 15, 2023.

² Statement on Providing Services to Applicants in Russia. Educational Commission for Foreign Medical Graduates. Available at: <https://www.ecfmg.org/news/2022/03/31/statement-on-providing-services-to-applicants-in-russia/>. Accessed January 15, 2023.

³ AMA leadership and policy development through the World Medical Association. American Medical Association Office of International Relations. Available at: <https://www.ama-assn.org/about/office-international-relations/ama-leadership-and-policy-development-through-world-medical>. Accessed January 18, 2023.

⁴ Ethical Guidelines for the International Migration of Health Workers. World Medical Association. Available at: <https://www.wma.net/policies-post/wma-statement-on-ethical-guidelines-for-the-international-migration-of-health-workers/>. Accessed January 16, 2023.

⁵ WHO Global Code of Practice on the International Recruitment of Health Personnel. World Health Organization. Available at: <https://www.who.int/publications/i/item/wha68.32>. Accessed January 23, 2023.

⁶ WMA Resolution on Humanitarian and Medical Aid to Ukraine. World Medical Association. Available at: <https://www.wma.net/policies-post/wma-resolution-on-humanitarian-and-medical-aid-to-ukraine/>. Accessed January 20, 2023.

⁷ WMA Resolution in support of Medical Personnel and Citizens of Ukraine in the face of the Russian invasion. World Medical Association. Available at: <https://www.wma.net/policies-post/wma-resolution-in-support-of-medical-personnel-and-citizens-of-ukraine-in-the-face-of-the-russian-invasion/>. Accessed January 2, 2023.