Good morning, my name is Marschall Smith. I am the executive director of the Interstate Medical Licensure Compact Commission or IMLCC. Mr. Rick Masters is joining me this morning. Mr. Masters is the IMLCC's legal counsel and will be assisting me in answering the committee's questions.

My testimony is limited to the provisions of the bill found in Section 10 and 10a.

Regarding the provisions of Section 10, it is consistent with the IMLCC statute and our normal practice to provide assistance and resources to our member states and boards in understanding how the IMLCC works and the valuable service that being a IMLCC member states provides to physicians in and outside of your state. Concerns raised by member states and boards after the U.S. Supreme Courts decision on Dobbs has been a focus of the IMLCC. We have and will continue to maintain each member state's right to regulate the practice of medicine in their state and ensure that their citizens are receiving appropriate and safe care. These principals are outlined in the IMLCC statute, section 1.

Regarding the provisions of Section 10a, the intention of this provision has already been accomplished through the leadership of Vermont's commissioners to the IMLCC. Currently the regulation of the practice of medicine is controlled by each state, territory or the District of Columbia. That control is limited to the practice of medicine provided by physicians to patients receiving care in that state. The Constitution of the United States prevents a state from regulating or controlling activities of other states when acting or regulating within their jurisdiction. The IMLCC has taken the position that strongly supports these concepts.

Vermont has 2 commissioners appointed to the IMLCC, Commissioner Gilman and Commission Herlihy. Both of Vermont's commissioners have in the past and continue to take active leadership roles in the IMLCC. Commissioner Herlihy is a Chair of the IMLCC's Personnel Committee and is a member of the IMLCC's Executive Committee (our governing body). Commissioner Gilman serves of the IMLCC's Rules & Administrative Procedures Committee.

In November 2022, the IMLCC amended IMLCC Rule 6, by the addition of paragraph 6.6, which reinforces and clearly express the authority of each state to determine its decision regard licensing actions, specifically the decision to take or decline to take disciplinary actions. Commissioners Gilman and Herlihy, were instrumental is the passage this amendment to the IMLCC's rules. Vermont is well and ably represented by your appointed commissioners.

With that said, each commissioner has the authority to introduce and request consideration of amendments to rules. The IMLCC would provide resources and assistance to the Vermont commissioners to carry out the provisions of 10a, if passed. This is consistent with the IMLCC's charge.

I would request that the Vermont legislature continue to support its

Commissioners to the IMLCC as they help lead the IMLCC in our deliberate and active process to provide an expedited licensure process for physicians. The concerns of the Vermont legislature are similar to many other member states and are shared by member states on both sides of the abortion and gender-affirming care discussion. The IMLCC was founded

on the principals of Federalism, where each state has the absolute right and authority to regulate the practice of medicine provided in that state, and then a national contract or compact to allow for licensure in their state via an expedited process.

Thank you for considering my comments as you deliberate this important matter. The IMLCC is committed to ensuring, through our commissioners and staff, that our member states are heard and well represented.

I would be happy to answer any questions from the committee.