

Councilmember Yvette Alexander
Chair, Committee on Health and Human Services
District of Columbia Council
1350 Pennsylvania Avenue, NW
Washington, DC 20001

October 26, 2015

Dear Chairwoman Alexander:

On behalf of the 2,800 members of the Medical Society of the District of Columbia and the thousands of District patients they treat each and every day, I am writing to you to express the Medical Society's opposition to **B21-168**, LGBTQ Cultural Competency Continuing Education Amendment Act of 2015.

As you know, there are nearly 10,000 licensed physicians in the District of Columbia, and as a condition of licensure, each licensee is required to demonstrate that he or she has obtained at least 50 hours of continuing medical education every two years. As you can imagine, there are physicians of every stripe practicing in the District, and a recent DC Board of Medicine report shows that well less than half of them actually treat patients in the District of Columbia. These physicians come from every specialty and sub-specialty accredited by the American Board of Medical Specialties, and the vast majority of them are Board Certified- a status that has its own requirements for continuing medical education and periodic examinations. It is the most rigorous process in American medicine- far more rigorous and encompassing than state licensure. Physicians accept and embrace this continuing medical education as part of their professional obligation and duty to their patients to provide the best care possible. I believe they do a good job of that, and while we always look to improve, state-mandated, content specific continuing medical education is simply not good medicine and will not improve medical care in the Nation's Capital.

Medicine requires a degree of education and experience to a greater degree than all the other professions. After undergraduate education, physicians attend four years of medical school followed by three to six years of Residency training, sometimes followed with additional fellowships. And our own city is a leader in the training of physicians with three medical schools within three miles of the Council Chamber. Through a life-long learning process, physicians continue to learn through the myriad of continuing medical education (CME) programs available to them. Boards of Medicine have long understood that individual physicians need to determine the content of the CME that will best benefit their practice and their patients. As a result, no two physicians have the exact same history of continuing medical education programs.

The Medical Society believes strongly that the medical profession alone has the responsibility for setting standards and determining curricula in continuing medical

education. In the District, the mechanism for that is the Board of Medicine which has in the past opposed content-specific requirements surrounding CME.

It should give us all great pause, and I say "us all" because at one time or another we will all be patients, to have lay people or the government – no matter how well-intentioned- determining what physicians ought to be taught. Having said that, hundreds if not thousands of District physicians have taken cultural competency CME over the years and will continue to do for the benefit of their patients. They have taken these courses just as they have taken courses for hypertension, heart disease, obesity, and lung disease. The precedent established by this legislation if it were to pass, would only cause others to come forward with other CME content requirements.

Finally, to be clear, the Medical Society strongly supports increasing the CME opportunities for physicians in the area of cultural competency and will work with the Department of Health, the hospital community, and others in designing and promoting those opportunities. Physicians have the expertise and the resources to partner with the Department in offering both online and real-time CME programs on a voluntary basis. We will "make the right thing easy". You will see that the carrot of professional responsibility and commitment to patient care is a far more effective way in the long run than the stick of government mandates.

We look forward to our ongoing partnership with you in making our City a healthier place to live and work.

Sincerely,



K. Edward Shanbacker
Executive Vice President