SENATE SUBSTITUTE FOR
SENATE, No. 144 and SENATE
SUBSTITUTE for ASSEMBLY, No. 492

STATE OF NEW JERSEY
211th LEGISLATURE

ADOPTED MARCH 29, 2004

Sponsored by:
Senator WAYNE R. BRYANT
District 5 (Camden and Gloucester)
Senator DIANE ALLEN
District 7 (Burlington and Camden)
Assemblywoman BONNIE WATSON COLEMAN
District 15 (Mercer)
Assemblyman GORDON M. JOHNSON
District 37 (Bergen)

Co-Sponsored by:
Senator Baer

SYNOPSIS
Requires physician cultural competency training as a condition of licensure.

CURRENT VERSION OF TEXT
Substitute as adopted by the Senate.
AN ACT concerning medical education and supplementing chapter 9 of Title 45 of the Revised Statutes.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. The Legislature finds and declares that:
   a. The findings of a recently reported, federally-funded study by Georgetown University, in conjunction with the Rand Corporation and the University of Pennsylvania, which were published in the New England Journal of Medicine, indicate that physicians are far less likely to refer blacks and women than white men with identical complaints of chest pain to heart specialists for cardiac catheterization; and the authors of this study suggest that the difference in referral rates stems from racial and sexual biases;
   b. These findings are the latest in a growing body of medical literature which documents race and gender-based disparities in the provision of health care, especially in the treatment of cardiovascular disease; however, according to the Surgeon General of the United States, the Georgetown University study represents the best attempt to date to document the racial attitudes of physicians as a factor in the poorer health of African Americans;
   c. It is estimated that the minority population in the United States will increase by 60% between now and the year 2010;
   d. Cultural awareness and cultural competence are essential skills for providing quality health care to a diverse patient population;
   e. Only a small percentage of medical schools nationwide currently provide some formal training in cultural competence;
   f. The Association of American Medical Colleges is working to help medical schools improve the teaching of cultural competency; and
   g. The public interest in providing quality health care to all segments of society dictates the need for a formal requirement that medical professionals be trained in the provision of culturally competent health care as a condition of licensure to practice medicine in New Jersey.

2. The State Board of Medical Examiners shall prescribe the following requirements for physician training, by regulation, in consultation with the Commission on Higher Education:
   a. The curriculum in each college of medicine in this State shall include instruction in cultural competency designed to address the problem of race and gender-based disparities in medical treatment decisions and developed in consultation with the Association of American Medical Colleges or another nationally recognized organization which reviews medical school curricula.
   b. Completion of cultural competency instruction as provided in
subsection a. of this section shall be required as a condition of receiving a diploma from a college of medicine in this State.

c. A college of medicine which includes instruction in cultural competency as provided in subsection a. of this section in its curricula shall offer for continuing education credit, cultural competency training which is provided through classroom instruction, workshops or other educational programs sponsored by the college and which meets criteria established by the board consistent with the instruction developed pursuant to subsection a. of this section.

d. A person who received a diploma from a college of medicine in this State prior to the effective date of this act, who was not required to receive and did not receive instruction in cultural competency as part of a medical school curriculum, shall be required as a condition of relicensure by the board, to document completion of cultural competency training which is offered pursuant to subsection c. of this section to the satisfaction of the board. The training required by this subsection shall be in addition to any continuing medical education required pursuant to section 10 of P.L.2001, c.37 (C.45:9-7.1).

e. A physician licensed to practice medicine in this State prior to the effective date of this act, who was not required to receive and did not receive instruction in cultural competency as part of a medical school curriculum, shall be required, as a condition of relicensure, to document completion of cultural competency training which is offered pursuant to subsection c. of this section to the satisfaction of the board prior to relicensure. The training required pursuant to this subsection shall be in addition to any continuing medical education required pursuant to section 10 of P.L.2001, c.37 (C.45:9-7.1).

f. The board may waive the requirement in subsection d. or e. of this section if an applicant for licensure or relicensure, as applicable, demonstrates to the satisfaction of the board that the applicant has attained the substantial equivalent of this requirement through completion of a similar course in his post-secondary education which meets criteria established by regulation of the board.

3. The State Board of Medical Examiners, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

4. This act shall take effect immediately.

STATEMENT

This Senate Substitute requires that physicians in New Jersey take cultural competency training as a condition of licensure, or relicensure,
as the case may be, by the State Board of Medical Examiners.

Specifically, the bill mandates that the board prescribe the following requirements for physician training in New Jersey, by regulation, in consultation with the Commission on Higher Education:

a. The curricula in each college of medicine in this State shall include instruction in cultural competency designed to address the problem of race and gender-based disparities in medical treatment decisions and developed in consultation with the Association of American Medical Colleges or another nationally recognized organization which reviews medical school curricula.

b. Completion of cultural competency instruction shall be required as a condition of receiving a diploma from a college of medicine in this State.

c. A college of medicine in this State which includes cultural competency instruction as provided in this bill in its curricula shall offer for continuing education credit, cultural competency training which is provided through classroom instruction, workshops or other educational programs sponsored by the college and which meets criteria established by the board consistent with instruction developed pursuant to this bill.

d. A person who received a diploma from a college of medicine in this State prior to the effective date of this bill who was not required and did not receive instruction in cultural competency as part of a medical school curriculum, shall be required, as a condition of relicensure by the board, to document completion of cultural competency training which is offered pursuant to this bill to the satisfaction of the board. This training requirement is in addition to existing continuing medical education requirements.

e. A physician licensed to practice medicine in this State prior to the effective date of the bill who was not required to receive and did not receive instruction in cultural competency as part of a medical school curriculum shall be required, as a condition of relicensure, to document completion of cultural competency training which is offered through continuing education pursuant to this bill to the satisfaction of the board. This training requirement is in addition to existing continuing medical education requirements.

f. The board may waive the requirement to complete cultural competency training offered pursuant to this bill for initial licensure or relicensure if an applicant demonstrates to the satisfaction of the board that he has attained the substantial equivalent of this requirement through completion of a similar course in his post-secondary education which meets criteria established by regulation of the board.