



Accreditation Council[™]
for Continuing Medical Education

Curriculum Framework for
Onboarding and Orienting
International Medical Graduates

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Introduction and Rationale

International Medical Graduates (IMGs) are a cornerstone of the U.S. healthcare system, providing critical support in addressing workforce shortages and improving access to care, particularly in rural and underserved areas. Recognizing the significant role of IMGs and in response to various legislative actions authorizing additional licensing pathways, the Advisory Commission on Additional Licensing Models was established in December 2023 to explore and develop pathways for licensing IMGs who have been fully trained abroad and have not completed U.S.-based graduate medical education (GME) programs. Some IMGs currently reside in the U.S. and seek licensure, while others will immigrate specifically to practice under new licensure pathways.

The Commission's early recommendations highlight a concerted effort to address systemic barriers while ensuring public safety and healthcare quality. These recommendations focus on creating pathways that uphold rigorous standards while accommodating the unique qualifications and experiences of internationally trained physicians. Notable areas of emphasis include:

- Empowering state medical boards with the authority and resources to implement additional licensure pathways.
- Requiring IMGs to meet critical benchmarks, such as confirmation of prior training, and provisional licensure under supervision.
- Establishing mechanisms to assess competency, ensure readiness, and facilitate integration into the U.S. healthcare system.
- Collecting standardized data to evaluate the impact of these pathways on addressing healthcare shortages and maintaining quality care.

The recommendations also underscore the need for structured programs that support IMGs in navigating the complexities of U.S. medical practice. This includes acculturation to patient care norms, developing communication and teamwork skills, understanding ethical and professional expectations, and mastering operational systems such as electronic medical records (EMRs), billing, and referrals.

Future work of the commission will elaborate expectations for both supervision and mentorship to support IMGs in practice, ensure they are not exploited, and can live up to their promise of improving the health of the nation.

Purpose of This Curriculum Framework

This curriculum builds on the Commission's recommendations by providing a standardized, scalable framework to support the development of learning materials by educational organizations across the country. These organizations have an opportunity to prepare IMGs for successful integration into the U.S. healthcare workforce. Designed as a guidance tool for accredited educational providers, the curriculum supports state licensing boards by offering an extensive onboarding program to address some of the unique needs of IMGs.

Particular areas of practice that represent high risk for arriving physicians are emphasized. These include:

- Practicing within competency and scope of practice
- Substance use disorder and prescribing controlled substances
- Confidentiality breaches
- Violations of shared decision-making
- Boundary violations
- Interpersonal relationships with the care team
- Poor documentation

This curriculum is not a certification or competency assessment tool; it is a structured guide for educational organizations to support state licensure programs. This general framework is expected to be supplemented by local, facility-specific training.

Educational organizations are encouraged to develop self-paced modules, interactive simulations, and practical assessments. In doing so, IMGs should feel equipped with the knowledge, skills, and attitudes necessary to navigate the cultural, ethical, and procedural aspects of U.S. medical practice. By aligning with the Commission's goals, this curriculum ensures that IMGs can meet the expectations of patients, employers, and regulatory bodies while contributing to the delivery of equitable and high-quality care.

Program Goals

1. Facilitate acculturation to the cultural, professional, and procedural norms of U.S. medical practice.
2. Strengthen communication and interdisciplinary collaboration skills for effective team-based care.
3. Provide foundational knowledge on U.S. licensing, certification, credentialing, payment systems, and referrals.
4. Develop familiarity with electronic medical records (EMRs) and related digital systems.
5. Emphasize ethics, professionalism, and patient boundaries to ensure compliance with U.S. standards.

Learning Objectives

By the end of this program, participants will be able to:

- Demonstrate an understanding of U.S. patient care norms, including autonomy, informed consent, and shared decision-making.
- Communicate effectively with diverse patient populations and interdisciplinary teams.
- Navigate the licensing, certification, and credentialing processes in the U.S.
- Explain Medicare, Medicaid, private payer systems, and billing and coding basics.
- Be familiar with EMRs and digital prescribing systems and expectations for accurate and efficient documentation.
- Understand and uphold professional boundaries and ethical principles in patient care.
- Recall strategies to coordinate and document patient referrals to ensure continuity of care.

This curriculum framework is structured into four key sections:

Section 1: The U.S. Healthcare System, Licensing, and Health Systems Science

Introduction to The U.S. Healthcare System

- **Public vs. Private Models:** Medicare, Medicaid, Affordable Care Act (ACA), employer-based insurance (e.g., UnitedHealth Group, Anthem, Humana), and uninsured populations.
- **Government Oversight & Accreditation Bodies:**
 - Regulatory Agencies: Centers for Medicare & Medicaid Services (CMS), U.S. Department of Health & Human Services (HHS), Centers for Disease Control (CDC), Food & Drug Administration (FDA), and state health agencies.
 - Accreditation & Licensing Organizations:
 - The Joint Commission & DNV: Hospital accreditation and safety compliance.
 - ABMS and AOA: Board certification of physicians.
 - FSMB: Federation of State Medical Boards, convening physician licensing authorities for each state.
- **Major Healthcare Institutions:**
 - Hospitals, community health centers, specialty clinics, private practices.
 - Teaching hospitals vs. non-teaching hospitals.
- **Comparison with Global Systems:** How the U.S. model differs from other healthcare systems worldwide.

The Role and Contributions of IMGs in U.S. Medicine

- Current Workforce Trends: Percentage of IMGs in primary care and specialty fields.
- State-Based Variations: Which states have higher IMG populations and why.
- Challenges IMGs Face: Credentialing delays, visa issues, cultural adaptation.

Medical Training Pathways in the U.S.

- **Education Pipeline:**
 - Undergraduate Pre-med → U.S. Medical School (MD/DO) → Graduate Medical Education (Residency/Fellowship) → Board Certification and Continuing Medical Education (CME).
- **Regulatory Bodies at Each Stage:**
 - Medical School Accreditation: LCME (allopathic), AACOM (osteopathic).
 - IMG Credentialing: Educational Commission for Foreign Medical Graduates (ECFMG) and Intealth.
 - Graduate Medical Education (GME): Accreditation Council for Graduate Medical Education (ACGME).
 - Licensing & Match Process: National Resident Matching Program (NRMP), Federation of State Medical Boards (FSMB).
- **Board Certification (ABMS, AOA) & Continuing Medical Education (ACCME)**
 - ABMS vs. AOA Certification Pathways: Specialty board certification differences.
 - State Licensing, Credentialing and Certification Requirements for CME
 - CME Access & Formats: CME resources, online, with colleagues/teams and conference-based learning.
- **Ongoing Certification & MOC Requirements:**
 - Recertification timelines, performance assessments, continuing certification.
 - Relationship between certification and hospital privileging, insurer reimbursement and credentialing.

Licensing and Examination Requirements

- **USMLE & ECFMG Certification:** Required exams (Step 1, Step 2 CK, OET), role of ECFMG.
- **State Licensing Pathways:** Variability across states, supervised vs. independent licensure.
- **Drug Enforcement Agency (DEA)** licensing for controlled substance prescribing
- **FSMB's Role:**
 - Federation Credentials Verification Service (FCVS): repository for background and credentialing.
 - Interstate Medical Licensure Compact (IMLCC): multi-state licensing.
- **Application Components:**
 - Identity verification, citizenship, medical education, residency training, board certification.

- Controlled substance certificates (state-specific requirements beyond DEA).

Credentialing for Employment & Payers

- **Contract and Compensation Structure:**
 - RVU-based, salary-based, or hybrid models.
 - Expectation for work hours, on-call, shift lengths, administrative support
 - Malpractice coverage: claims-made vs. occurrence-based policies. Tail coverage.
 - Non-compete clauses. Renewal length. Terminations. Departure.
- **Hospital Privileging & Payer Enrollment:**
 - Individual vs. group credentialing requirements.
 - Unique documentation needed per facility.
- **Risk Management & Compliance Training:**
 - Conflict of interest disclosures, mandatory safety training.
 - Institutional malpractice insurance coverage—limitations on moonlighting.
- **Health and Legal Requirements:**
 - Vaccination records, TB negativity documentation, drug screening.
 - State-specific CME requirements, DEA certification for controlled substances.

Malpractice, Insurance, and Legal Considerations

- **Understanding Liability and Risk Management:**
 - Claims-based vs. occurrence-based malpractice insurance.
 - Common medico-legal risks and how to mitigate them.
- **Tort Reform and Medical Liability Protections:**
 - Good Samaritan laws, apology laws, and variations by state.
- **Case Studies on Common Malpractice Issues:**
 - Documentation errors, failure to diagnose, informed consent disputes.
 - Prescribing for family members; controlled substance prescribing

Understanding System-Based Practice

- **Definition & Core Concepts:** How system-based practice improves healthcare quality, efficiency, and safety.
- **Healthcare Quality & Safety Initiatives:**
 - Adverse event reporting, near-miss reporting, and root cause analysis.
 - Institutional safety protocols and continuous quality improvement (CQI).
- **Patient Safety Programs & Risk Mitigation:**
 - Medication safety, infection control, and clinical handoff best practices.
 - Use of electronic surveillance tools in quality assurance.

Introduction to Population Health & Public Health Strategies

- **Social Determinants of Health (SDoH):**

- Impact of socioeconomic factors, geography, education, and environment on health.
- Strategies for addressing disparities through evidence-based interventions.
- **Value-Based Care & Population Health Management:**
 - Alternative Payment Models (APMs), bundled payments, and shared savings programs.
 - Role of preventive care and chronic disease management in improving outcomes.
- **Public Health & Regulatory Oversight:**
 - FDA approvals for medications and devices.
 - CMS, state health departments, and disease surveillance programs.

Integrating Health Systems Science into Clinical Practice

- Using Health Systems Data to Improve Care:
 - Application of big data analytics in clinical decision-making.
 - How benchmarking and health information exchanges (HIEs) drive system improvements.
 - Accessing evidence-based medicine resources to apply to medical care including local county, state and health system resources for disease of local importance.

Section 2: Clinical Operations, Insurance and Healthcare Payment Systems

Introduction to U.S. Healthcare Payment Systems

- **Public vs. Private Insurance Models:** Medicare, Medicaid, employer-sponsored, and ACA plans.
- **Key Stakeholders:** Patients, providers, payers (insurers), pharmacy benefit managers, regulatory agencies.
- **Financial Flow of Healthcare Payments:** How providers get paid under different models.

Billing & Coding Essentials

- **Core Medical Coding Systems:**
 - ICD-10: Diagnostic coding.
 - CPT & HCPCS: Procedural and supply coding.
 - Modifiers: Importance in avoiding denials.
- **Claim Lifecycle & Denial Management:**
 - Claims Submission Process: Coding, claim scrubbing, submission to payers.
 - Common Billing Errors: Upcoding, unbundling, medical necessity denials.

- Adjudication & Payment Posting: What happens after claim submission.

Reimbursement and Managed Care Models

- **Fee-for-Service (FFS):** Traditional volume-based payments.
- **Value-Based Care & Alternative Payment Models (APMs):**
 - Accountable Care Organizations (ACOs): Shared savings and quality incentives.
 - Bundled Payments: Cost-containment strategies and efficiency.
 - Capitation & Risk-Based Contracts: Prepaid per-member, per-month payments and risk-sharing agreements.
- **Quality Metrics & Performance-Based Incentives:**
 - HEDIS, STAR ratings, MIPS, and hospital readmission penalties.
 - Pay-for-performance models driving healthcare quality improvements.

Payer Interactions and Patient Financial Responsibility

- Deductibles, Copays, and Coinsurance: How they impact patients and providers.
- No Surprises Act & Balance Billing Protections: Compliance with recent legislation.
- Understanding Explanation of Benefits (EOB) and patient responsibility.
- Coordination of Benefits (COB): Handling multiple insurance coverages.
- Medical debt, collections, and impact on patients and communities.

Prior Authorization & Utilization Management

- **Preauthorization & Referral Approvals:** Ensuring compliance with insurer requirements.
- **Common Procedures Requiring Prior Authorization:** Imaging, specialty drugs, elective procedures.
- **The Appeals Process:** Steps in contesting a denied claim.
- **Peer-to-Peer Reviews:** When and how providers can challenge a denial.
- **Strategies to Minimize Denials & Delays:** Documentation best practices.

Compliance & Legal Considerations

- **Key Healthcare Fraud & Abuse Laws:**
 - False Claims Act (FCA): Legal risks of improper claims.
 - Anti-Kickback Statute (AKS) & Stark Law: Rules around provider self-referrals.
 - HIPAA & Patient Privacy Protections: Ensuring compliance in billing and documentation.
- **Best Practices for Compliance:** Regular audits, staff training, and self-reporting violations.

Referrals in Healthcare

- **The Importance of Referrals:** How referrals ensure continuity of care and optimize specialty interventions.
- **Types of Referrals:** Internal vs. external referrals, direct specialist access, and gatekeeping models.
- **The Referral Process:**
 - Primary care provider (PCP) role in managing referrals.
 - Referral documentation and insurer requirements.
 - Managing and tracking referrals effectively in an EMR system.
- **Legal & Ethical Considerations:** Patient choice in referrals, conflicts of interest, and transparency requirements.

Telehealth: Integration into Modern Healthcare

- **Overview of Telehealth Services:** Synchronous (real-time) vs. asynchronous (store-and-forward) models.
- **Benefits & Challenges:** Expanding access to care, patient convenience vs. technological limitations, reimbursement issues.
- **Best Practices for Conducting Telehealth Visits:**
 - Ensuring high-quality virtual patient interactions.
 - Managing virtual patient assessments and follow-ups.
 - Documentation standards for telehealth visits.
- **Regulatory & Compliance Considerations:**
 - HIPAA & State-Specific Laws: Privacy, security, and compliance requirements.
 - Licensing Across State Lines: Challenges of practicing telemedicine for out-of-state patients.
 - Reimbursement & Parity Laws: Understanding how different payers handle telehealth claims.

Electronic Medical Records (EMRs) & Digital Health Tools

- **Overview of EMRs vs. EHRs:**
 - EMRs: Provider-centric digital records maintained within a single institution.
 - EHRs: Comprehensive records shared across healthcare organizations.
- **Key Components of EMRs:**
 - Patient demographics, medical history, clinical documentation, and test results.
 - Order entry, medication prescribing, and care coordination features.
- **Interoperability & Health Information Exchanges (HIEs):**
 - Connecting different EMR platforms for coordinated care.
 - Data-sharing policies and security protections.
- **Privacy & Security in EMRs:**
 - HIPAA compliance for digital records.
 - Managing patient consent for information sharing.

- **Optimizing EMR Use for Efficiency & Accuracy:**
 - Avoiding documentation errors.
 - Using templates, macros, and decision-support tools to streamline workflows.

Section 3: Professionalism, Ethics, and Patient-Centered Care

U.S. Patient Care Norms and Cultural Competency

- **Patient-Centered Care Principles**
 - Shared Decision-Making: Partnering with patients and caregivers in medical decisions.
 - Autonomy & Informed Consent: Legal and ethical standards for decision-making capacity.
 - Respect for Individual Autonomy: Physicians must prioritize patient needs and access to care over personal beliefs.
 - Patient Advocacy & Rights: Ensuring respect for all patients' dignity, values, and medical choices.
- **Addressing Racial & Ethnic Health Disparities**
 - Implicit Bias Awareness: Recognizing unconscious bias and strategies for mitigation.
 - Health Disparities & Underserved Communities: Understanding social determinants of health.
 - Cultural & Religious Sensitivities: Practices affecting medical treatment (e.g., fasting, end-of-life decisions).
- **Culturally Competent Communication**
 - Effective Use of Interpreters: Working with medical interpreters for accurate patient communication.
 - Navigating Language Barriers: Clear explanations, avoiding idioms, and simplifying medical jargon.
 - Health Literacy Considerations: Ensuring patients understand treatment plans and instructions.
- **Confidentiality & Patient Relationships**
 - Beyond HIPAA: Parental rights vs. minor autonomy, spousal/caregiver access to information.
 - Ethical Handling of Sensitive Information: When to breach confidentiality for safety reasons.
 - Legal Considerations for Reporting: Duty to warn, mandatory reporting laws.

Effective Communication and Interdisciplinary Teaming

- **The Clinical Care Team**
 - Roles

- Discharge planning, post-hospitalization follow-up, and patient education.
 - Addressing gaps in care through multi-disciplinary coordination.
 - Hierarchy vs. Collaboration: Navigating team-based care models while respecting roles and expertise.
- Members
 - Physicians & Specialists: Differences between primary care vs. subspecialists.
 - Advanced Practice Providers (APPs): Nurse Practitioners, Physician Assistants, and their scope of practice.
 - Allied Health Professionals: Including pharmacists, physical therapists, dietitians, social workers.
 - Support & Patient Care Roles: Case Managers: Coordinating care transitions and insurance coverage. Medical Assistants & Patient Care Technicians: Supporting physicians in outpatient and inpatient settings.
- **Effective Communication Techniques**
 - Core Communication Strategies: Verbal and nonverbal communication, structured tools for clarity.
 - Closed-Loop Communication: Ensuring message accuracy and minimizing misinterpretations.
 - Listening & Empathy: Active listening techniques to improve patient interactions and team dynamics.
- **Conflict Resolution & Trust-Building**
 - Navigating Disagreements: Managing team conflicts professionally, addressing communication breakdowns.
 - Giving & Receiving Feedback: Constructive models and psychological safety in the workplace.
 - Crisis & High-Stress Situations: Clear, calm decision-making under pressure.
- **Navigating Patient & Family Dynamics**
 - Cultural Variations in Family Involvement: Ethical considerations in family-centered decision-making.
 - Shared Decision-Making with Families & Caregivers: Balancing autonomy and patient-centered care.

Professional Boundaries and Ethical Practice

- **Defining Professional Boundaries in Medicine**
 - Ethical & Legal Expectations: Upholding patient safety and professional integrity. Familiarity with state medical practice act and law.
 - Recognizing & Preventing Boundary Violations: Identifying subtle vs. clear violations.
 - Financial Conflicts of Interest & REPA: Transparency and ethical considerations.
- **Managing Relationships with Patients**

- Professional Detachment & Boundaries: Avoiding inappropriate personal relationships with patients.
- Terminating Patient Care: Legal and ethical steps to ensure proper transitions.
- **Managing Disruptive Behaviors in Clinical Practice**
 - Handling Disruptive Patients & Families: Conflict de-escalation techniques.
 - Addressing Disruptive Colleagues: Identifying and managing unprofessional behavior.
- **Maintaining Professionalism in Online & Digital Spaces**
 - Social Media & Digital Conduct: Protecting patient confidentiality online.
 - Use of Personal Devices: HIPAA compliance in digital communication.
 - Physician Wellness & Healthy Coping Strategies
 - Identifying Burnout & Seeking Support: Peer and institutional support programs.
 - Work-Life Balance & Mentorship: Establishing professional boundaries for sustainable practice.

Medical Ethics and Decision-Making

- **Core Ethical Principles in Medical Practice**
 - Autonomy: Respecting patient choices and informed consent.
 - Beneficence & Non-Maleficence: Acting in the patient's best interest while avoiding harm.
 - Justice: Equitable allocation of healthcare resources and managing bias.
- **Common Ethical Challenges & Decision-Making Frameworks**
 - End-of-Life Care & Advance Directives: Ethical dilemmas in withholding or withdrawing life-sustaining treatments.
 - Sensitive Exams & Chaperone Use: Ensuring dignity and safety in sensitive examinations.
 - Conflicts of Interest in Medicine: Industry relationships, offers of gifts/meals/travel, and transparency.
- **Legal & Ethical Boundaries in Clinical Practice**
 - Resource Allocation & Systems-Based Considerations: Ethical prioritization of limited resources.
 - Fraud, Abuse, and Inappropriate Prescribing: Recognizing and reporting fraudulent practices.
 - Confidentiality & HIPAA Compliance: Navigating complex privacy scenarios.
- **Ethical Decision-Making in Practice**
 - Applying Ethical Frameworks to Real-World Scenarios: Case studies and structured ethical decision-making.
 - Regulatory & Professional Conduct Guidelines: Adherence to Code of Medical Ethics and state regulations.

Section 4. Practical Preparation for Entering the U.S.

- **Visa & Immigration Pathways:**
 - Overview of J-1, H-1B, O-1 visas, and waiver programs.
 - Permanent residency and citizenship pathways for physicians and their families.
 - Required forms (I-94, I-129, DS-2019, etc.), and extensions/renewals.
 - Finding and working with an immigration attorney.
- **Social Security & Work Authorization:**
 - How to apply for a Social Security Number (SSN) and why it's necessary.
 - Understanding tax obligations and working within visa restrictions.
- **Financial Setup & Banking:**
 - U.S. banking system, opening a checking/savings account, international fund transfers.
 - Building credit history, obtaining loans, and responsible credit card use.
- **Housing & Transportation:**
 - Understanding rental agreements, security deposits, and tenant rights.
 - Buying vs. leasing a car, auto insurance, and navigating public transit options.
- **Family Considerations & Education for Dependents:**
 - Finding and enrolling children in school.
 - Childcare options and early education resources.
 - Understanding health insurance coverage for family members.
- **Legal Consultation:**
 - Independent legal advice for employment contracts and visas
 - Non-competes, insufficient sponsorship commitments
- **Resources for IMGs:**
 - Key organizations, professional and specialty societies, mentorship opportunities.
 - Online support communities and relocation assistance programs.
 - Independent legal advice for employment contracts and visa-related matters.
 - A faith home

Evaluation Plan

The following evaluation framework is recommended to educational providers wishing to deploy this curricular framework and provide a certificate of completion to IMGs.

1. **Knowledge-Based Assessments**
 - **Module-Specific Quizzes:** Short multiple-choice or true/false tests to confirm comprehension of key topics (e.g., licensing steps, Medicare fundamentals).
 - **Comprehensive Final Exam:** Evaluates overall mastery of the curriculum (ethics, coding, cultural competency, etc.).
2. **Scenario-Based Evaluations**

- **Case-Study Discussions:** Present ethical dilemmas (e.g., end-of-life care, boundary violations) and require structured reasoning.
- **Role-Play Exercises:** Communication scenarios with standardized patients or peers for practicing telehealth visits, conflict resolution, or delivering bad news. Can be virtual or in-person.

3. **Practical Skill Demonstrations**

- **EMR Simulations:** Test ability to document a mock patient encounter, place orders, and manage referrals within an EMR environment.
- **Billing & Coding Workshops:** Use real or de-identified patient charts to practice coding accuracy, handle claim denials, and ensure compliance.

4. **Feedback & Reflection**

- **Self-Assessments:** Encourage learners to identify areas of discomfort or knowledge gaps.
- **Peer & Facilitator Feedback:** Enable timely critiques of role-plays or group discussions, fostering continuous improvement.
- **Longitudinal Monitoring:** Follow up with IMGs' supervisors or mentors after onboarding to gauge real-world application of learned skills.

Acronym Appendix

Below is a compiled list of acronyms used in the curriculum for clarity:

- AACOM – American Association of Colleges of Osteopathic Medicine
- ABMS – American Board of Medical Specialties
- ACCME – Accreditation Council for Continuing Medical Education
- ACGME – Accreditation Council for Graduate Medical Education
- ACO – Accountable Care Organizations
- AKS – Anti-Kickback Statute
- AMA – American Medical Association
- APM – Alternative Payment Model
- APP – Advanced Practice Provider
- CDC – Centers for Disease Control
- CME – Continuing Medical Education
- CMS – Centers for Medicare & Medicaid Services
- COD – Co-Occurring Disorder
- CPT – Current Procedural Terminology
- CQI – Continuous Quality Improvement
- DNI – Do Not Intubate
- DNR – Do Not Resuscitate
- DNV – Det Norske Veritas
- DO – Doctor of Osteopathic Medicine
- ECFMG – Educational Commission for Foreign Medical Graduates
- EHR – Electronic Health Record
- EMR – Electronic Medical Record
- EOB – Explanation of Benefits
- FCA – False Claims Act
- FCVS – Federation Credentials Verification Service
- FDA – Food and Drug Administration
- FFS – Fee for Service
- FSMB – Federation of State Medical Boards
- GME – Graduate Medical Education

- H-1B Visa – Temporary Work Visa for Specialty Occupations
- HCPCS – Healthcare Common Procedure Coding System
- HEDIS – Healthcare Effectiveness Data and Information Set
- HIE – Health Information Exchange
- HIPAA – Health Insurance Portability and Accountability Act
- ICD-10 – International Classification of Diseases, Tenth Revision
- IMG – International Medical Graduate
- IMLCC – Interstate Medical Licensure Compact
- J-1 Visa – Exchange Visitor Visa for Physicians
- LCME – Liaison Committee on Medical Education
- MBBS – Bachelor of Medicine, Bachelor of Surgery
- MD – Doctor of Medicine
- MIPS – Merit-Based Incentive Payment System
- MOC – Maintenance of Certification
- O-1 Visa – Visa for Individuals with Extraordinary Ability
- OET – Occupational English Test
- PBM – Pharmacy Benefit Manager
- PCP – Primary Care Provider
- PHP – Physician Health Program
- REPA – Reporting of Executive and Physician Arrangements
- SDoH – Social Determinants of Health
- SSN – Social Security Number
- STAR – Substance Treatment and Recovery
- USMLE – United States Medical Licensing Examination

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The following references were used to inform this curriculum, incorporating legislative developments, IMG workforce data, and accreditation standards.

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