
Ensuring Medical Education Compliance with State Authorization

States may require out-of-state institutions to register and meet certain requirements to operate higher education programs within their state — a process known as “state authorization.” Depending on the state, this regulation can be triggered by a physical presence within the state, online courses, recruitment/advertising, and clinical rotations, among other activities. The AAMC has prepared this guidance with the intention to helping U.S. medical schools ensure compliance for clinical rotations across state lines.

The recent growth in online courses and programs has spawned increased state and federal oversight. In 2010, the Department of Education proposed to directly tie an institution’s eligibility for federal student aid to state authorization compliance. A 2011 lawsuit successfully challenged the proposed regulation on procedural grounds. However, the controversy has drawn attention to this issue and elevated the importance of compliance with current state laws (a condition for access to federal student aid that existed prior to the Department of Education’s vacated rule).

Independent of this recent regulatory activity, the Department of Education maintains that institutions violating state law are not eligible for federal student aid. It is our understanding that while there is no risk to students who perform clinical rotations in another state, institutions are appropriately evaluating their out-of-state activities.

Every state has different rules and regulations about when authorization is required. For the purposes of state authorization, the clinical rotation relationship typically comprises the visiting student, the home medical school, and the away faculty, but not the away institution. According to a [survey](#) by the State Higher Education Executive Officers Association (SHEEO), clinical rotations in the third and fourth year of medical school could trigger the need for authorization in approximately half of all states (see attached table). SHEEO maintains a list of [state authorization agencies](#) with contact information for further clarification.

Several states have joined the State Authorization Reciprocity Agreement (SARA), and will recognize the authorization of other SARA states. To qualify for reciprocity, the away state, the home state, and the home medical school must all participate in SARA. The National Council for State Authorization Reciprocity Agreements (NC-SARA) maintains a list of [SARA member states](#) as well as an interactive map of approved [SARA institutions](#). Under SARA, “A contract for supervised field experiences ... Cannot provide for the placement of more than ten students from an individual academic program placed simultaneously at one clinical or practicum site, unless approval for a larger number is provided by the host state SARA portal agency.”

In response to a request from House Education and Workforce Chair John Kline (R-MN), several health professions education associations, including AAMC, sent an April 2015 [letter to Congress](#) recommending a nationwide exemption for clinical rotations from future Department of Education federal regulation pertaining to state authorization.

Additional resources are available from [SHEEO](#); [NC-SARA](#); WICHE Cooperative for Educational Technologies ([WCET](#)) and its [State Authorization Network \(SAN\)](#); and the [Department of Education](#). Professional consultants are available to help navigate your institution through state authorization. Please be sure to consult with your institution’s legal counsel regarding state authorization compliance.

Contact: Matthew Shick <mshick@aamc.org>, AAMC Government Relations, 202-828-0526.

Steps to Ensure Medical School Compliance with State Authorization: For U.S. medical schools sending their students to other states for clinical rotations, the medical school must review state authorization compliance in every state that your medical students will attend a clinical rotation.

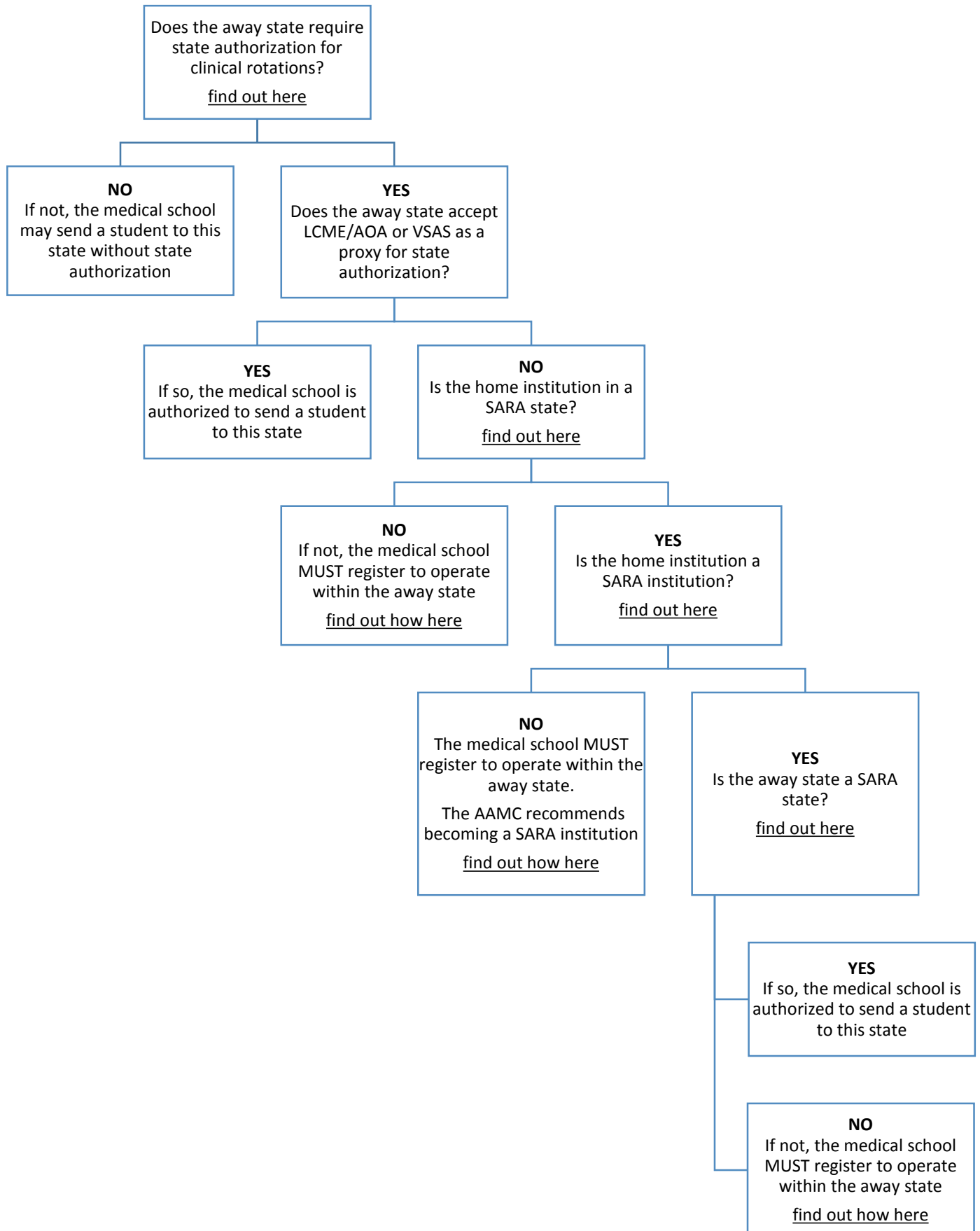


Table: State Authorization of Medical School Clinical Rotations – April 2016

Results may vary for other health professions and international medical schools; if faculty are compensated by home institution; if the clinical rotation is not student-initiated; or depending on whether the student is registered in a non-degree program in the away state.

Table Sources (unless verified by AAMC direct outreach to state higher education offices in Summer 2016):

National Council for State Authorization Reciprocity Agreements (NC-SARA) State Actions Regarding SARA; April 2016; <http://nc-sara.org/content/sara-state-status>.

State Higher Education Executive Officers Association (SHEEO) State Authorization Survey and Reports; May 2015; <http://www.sheeo.org/node/434>. (see “Please specify whether any of the following activities would constitute a physical presence or signify “operating” in your state, assuming that the named activity is the institution’s sole activity in your state: Permitting a student to complete an internship, externship, field experience, or clinical practicum organized by the institution?”)

	Does the state require authorization for U.S. medical clinical rotations?	Is the state a SARA member? (Dec. 2016)
Alabama	Yes	Yes
Alaska	No	Yes
Arizona	No	Yes
Arkansas	No	Yes
California	No – verified by AAMC	No
Colorado	No	Yes
Connecticut	No	No (legislation passed, SARA pending)
Delaware	No – verified by AAMC	Yes
Washington, D.C.	No	Yes
Florida	No – verified by AAMC	No
Georgia	No	Yes
Hawaii	No	Yes
Idaho	No, unless 11 or more students of the institution are physically present simultaneously at a single field site within the state – verified by AAMC	Yes
Illinois	No	Yes
Indiana	No	Yes
Iowa	No	Yes
Kansas	No, but generally follows SARA guidelines and looks at the entire scope of the institution’s activities – verified by AAMC	Yes
Kentucky	Yes – verified by AAMC	Yes
Louisiana	No – verified by AAMC	Yes
Maine	No	Yes
Maryland	No, unless 11 or more students of the institution are physically present simultaneously at a single field site within the state; however, there is a reporting requirement – verified by AAMC	Yes
Massachusetts	No	No
Michigan	No	Yes
Minnesota	No – verified by AAMC	Yes
Mississippi	No	Yes
Missouri	No, but international requirements may differ – verified by AAMC	Yes
Montana	No	Yes

Nebraska	No	Yes
Nevada	Yes, requires registration with state – verified by AAMC	Yes
New Hampshire	Yes – verified by AAMC	Yes
New Jersey	No	No
New Mexico	Yes – verified by AAMC	Yes
New York	No, not for students from LCME and AOA accredited schools – verified by AAMC	No (legislation passed, SARA pending)
North Carolina	Yes, unless the student is enrolled in a non-degree program for the clinical rotation with UNC, Duke, Wake Forest, or ECU – verified by AAMC	Yes
North Dakota	No	Yes
Ohio	Yes – verified by AAMC	Yes
Oklahoma	No	Yes
Oregon	Yes, but schools can seek exemptions for non-repetitive placements, and fees can be waived for native Oregonians – verified by AAMC	Yes
Pennsylvania	No	Yes
Puerto Rico	No – verified by AAMC	No
Rhode Island	No – verified by AAMC	Yes
South Carolina	No	Yes
South Dakota	No	Yes
Tennessee	No, not for student-initiated rotations (e.g., VSAS) – verified by AAMC	Yes
Texas	No, not for students using VSAS. Specifically prohibits students from international medical schools – verified by AAMC	Yes
Utah	No	Yes
Vermont	No	Yes
Virginia	No	Yes
Washington	No – verified by AAMC	Yes
West Virginia	Yes – verified by AAMC	Yes
Wisconsin	No	Yes
Wyoming	Yes – verified by AAMC	Yes