

November 11, 2025

The Honorable Curt VanderWall  
Health Policy Committee Chair  
Michigan House of Representatives  
P.O. Box 30014  
Lansing, MI 48909-7514

Dear Chair VanderWall:

Thank you for the opportunity to share our concerns regarding House Bills 4925 and 4896, which would allow internationally educated physicians to bypass Michigan's licensure process and national residency standards. While work has been done to improve the bill, we remain concerned that this legislation lowers the standard of patient care and may inadvertently negatively impact patient safety.

Family medicine is the cornerstone of primary care, encompassing preventive services, chronic disease management, and comprehensive patient coordination. While many International Medical Graduates (IMGs) bring valuable experience from their home countries, medical education and clinical practice standards vary significantly across the globe.

Our biggest concern related to patient safety is the foregoing of a U.S. residency program. A structured U.S. residency program provides supervised training that aligns clinical judgment, communication practices, and documentation with national standards of care. Without this foundation, even highly skilled physicians may struggle to adapt to U.S. clinical systems and technologies, pharmacological standards, and patient expectations.

The Accreditation Council for Graduate Medical Education (ACGME) sets rigorous competency benchmarks in medical knowledge, professionalism, and systems-based practice. Through supervised patient care, IMGs develop proficiency in evidence-based medicine and quality improvement, which are skills essential for preventing diagnostic errors and reducing avoidable complications. This process ensures that all practicing physicians, regardless of where they were trained, meet consistent standards of quality and safety.

Standardized residency training also promotes equity within healthcare teams. It reassures patients that all physicians licensed in the U.S. have completed equivalent pathways of evaluation and professional development. This trust is vital to maintaining confidence in our healthcare system, especially in underserved communities where IMGs often serve critical roles.

Furthermore, allowing physicians to bypass standardized licensure and residency training could expose supervising physicians and clinical sites to increased liability. Without the assurance of U.S.-based training, supervising providers may bear greater legal and professional risk for oversight and patient outcomes. This heightened liability could lead to increased malpractice insurance premiums and more defensive clinical practices, ultimately driving up healthcare costs for patients and systems across Michigan.

In summary, formal family medicine residency training for IMGs is not a barrier. It is a bridge. It ensures that globally trained physicians integrate seamlessly into our healthcare system, preserving clinical excellence and patient safety for all Americans.

Thank you again for the opportunity to share our concerns. We look forward to partnering with you to ensure Michiganders receive care that meets the highest standards of quality and safety. For more information or questions, please contact Karlene Ketola, MSA, CAE, Chief Executive Officer at [kketola@mafp.com](mailto:kketola@mafp.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Bashar Yalldo".

Bashar Yalldo, MD, FAAFP  
Board President, 2025-2026

cc: Representative Phil Green