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## The Re-certification Barriers in the United States: Comparing Refugee Professional Credentials to Texas Standards

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## ABSTRACT

The purpose of this study is to explore the recertification process for college- educated immigrants in the United States, Canada, and Texas. Underemployment is a problem among foreign trained professionals in the United States. Additionally, this study serves as a guide for the International Rescue Committee to assist future clients. The guide provides a general outline for the licensure process within three professions in Texas. A sample of 192 participants was collected from existing client files from a resettlement agency in Texas. The researcher found approximately 24% of participants were college- educated. An advanced level of English proficiency did not correlate to higher education levels among participants. The recertification process in Texas for three professions— dentists, nurses, and physical therapists—were discussed. Canada recognized the problem of underemployment among immigrants and implemented the Pan-Canadian Framework in 2009. Many states have passed recent policies that are relevant to foreign-trained professionals. A more focused study is needed to examine brain waste among internationally trained professionals in the United States.

The Re-certification Barriers in the United States: Comparing Refugee Professional  
Credentials to Texas Standards

A Thesis

Presented to

The Faculty of the Graduate School

Abilene Christian University

In Partial Fulfillment

Of the Requirements for the Degree

Master of Science in Social Work

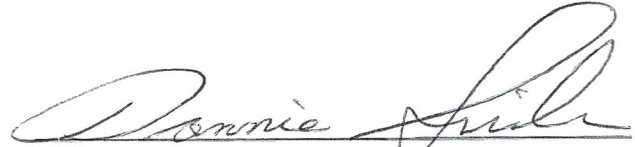
By

Mary Beth Shelton

May 2018

This thesis, directed and approved by the candidate's committee, has been accepted by the Graduate Council of Abilene Christian University in partial fulfillment of the requirements for the degree

Master of Science



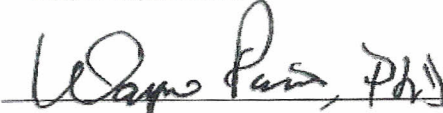
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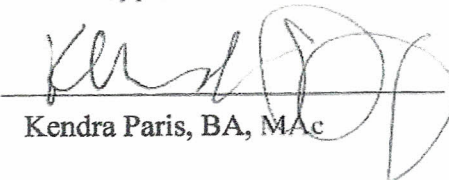
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## CHAPTER I

### INTRODUCTION

The International Rescue Committee (IRC) is a resettlement agency in Texas. This agency works primarily with refugees that provide services such as assistance applying for public benefit programs, provide referrals to the community, cultural classes, job readiness training classes, and a variety of other programs. The agency's goal is for the clients to attain self-sufficiency in the United States. The employment program is one service provided to clients upon arrival, if they meet certain requirements. For example, clients that are not able bodied may not benefit by participating in the program. In general, job readiness classes teach clients how to: create a resume, cover letter, apply for jobs in their area, and provide referrals to local employers. The primary goal is for the client to attain self-sufficiency.

Some clients arrive in the United States with professional training from their country of origin. Clients that wish to continue their previous career will have to get recertified in the United States. Goals of the study were to examine the process of evaluating foreign-educated credentials in the United States, Texas, and Canada. This study also identified the number of college-educated immigrants entering the IRC office in Midland, Texas, and potential options for re-credentialing in the United States.

The primary goal was to provide a guide line to the IRC for the application process in Texas within three professions. The three professions studied according to the Texas licensure policies are dentists, nurses, and physical therapists. Barriers were examined to bring awareness to the rigorous process faced by internationally trained professionals in the United States and Texas.

## CHAPTER II

### LITERATURE REVIEW

Studies suggest 26% of college-educated immigrants are underemployed in the United States (Bachmeir, 2016; Fogg & Harrington, 2012; Rabben, 2013). Underemployed or mal-employed is defined as an individual working below their education level or based on their employment history. Fogg and Harrington (2012) define mal-employment as a measure of skill underutilization in the labor force market. For example, a foreign-trained medical graduate works in the food industry, cashier, retail, or other jobs that pay low wages. This individual will have to navigate the U.S. system in hopes of getting their credential recognized by the local licensing board in their area. Some will attain recertification, but others will not.

This problem merits further study regarding the process of recertifying foreign-trained professionals in the United States at the federal and state level with emphasis in the State of Texas. It is helpful to study how another country is working with this population. The researcher retrieved studies in Canada to compare their policies to United States policies. Current literature related to the recertification process for foreign-trained professionals were analyzed- and primary findings discussed in the review. Research was focused on dentists, nurses, and physical therapists to later examine the state licensure requirements of Texas for professionals trained outside of the United States.

## **Occupational Licensure in the United States**

The U.S. occupational license system is not regulated by the federal government. According to Kleiner and Krueger (2010), 29% of the U.S. workforces requires an occupational license to work. These credentials are difficult to examine on a broad scale because the U.S. does not have a set body of rules and regulations at the federal level. Professional credentials are primarily based on national professional organizations, or accreditation bodies, and each state has their own licensure requirements. Licensure requirements for occupations in each state vary widely. For example, internationally trained medical graduates in Texas requires three years of residency before they can apply for their medical license (Federation of State Medical Boards, 2017). In Oklahoma, the residency requirement is two years, and Wyoming requires one year (Federation of State Medical Boards, 2017).

## **Foreign-Educated Dentists in the United States**

Numerous studies (Bazargan, Chi, & Milgrom, 2010; Boorberg, Schönwetter, Swain, 2009; Pannu, Thompson, Pannu, & Collins, 2013) predict a shortage of dentists in the United States. Part of the shortage falls to the baby boomers retiring who started practicing in the 1970's (Boorberg et. al., 2009). As the baby boomers are retiring, new dentists should fill these spots. According to (Allareddy, Elangovan, Nalliah, Chickmagalur, & Allareddy (2014), the U.S. population is growing with a more diverse population, and thus there is an increasing need for multilingual dentists to assist the population with limited English proficiency. Foreign-educated dentists could fill these gaps left from the baby boomers and work with populations that have limited English proficiency.

Internationally trained dentists in the United States are not allowed to transfer credentials directly from their home country without completing a degree in the United States. Policy changes implemented in 1986 by the Commission on Dental Accreditation (CODA) discontinued the certification by examination credential process (Boorberg et. al., 2009). Therefore, foreign dental graduates are required to apply to advanced standing programs, International Education Programs (IEPS), or pursue a post-doctorate specialty program. According to (Pannu et. al., 2013), the U.S. requires foreign dental graduates to complete a degree in the U.S. to ensure they are competent to practice. Every state has different licensure requirements for international dental graduates.

### **Foreign-Educated Nurses in the United States**

Currently, the United States has approximately 4.6 million licensed nurses (National Council of State Boards of Nursing, 2016). There are predictions there will be a nursing shortage with the aging baby boomers in this occupation (AMN Healthcare, 2015; Bieski, 2007; Davis & Nichols, 2002). According to AMN Healthcare (2015), two out of five nurses who responded to the survey stated they are thinking about or are planning to retire in the next three years.

Internationally educated nurses play a major role within the U.S. healthcare system. According to the Institute for Immigrant Research (2015), there has been an increase in immigrant nurses from 2000 to 2015. The estimated number of immigrant nurses in 2015 was 1,106,565 (Institute for Immigrant Research, 2015). The top nine countries of origin for foreign-educated nurses are the Philippines, Mexico, Haiti, Jamaica, Nigeria, India, Dominican Republic, China, Ghana, and Korea (Institute for Immigrant Research, 2015).

## **Foreign-Educated Physical Therapists in the United States**

Currently, the U.S. has a shortage of physical therapists, and employment opportunities for physical therapists will increase 36% from 2012 to 2022 (Cornwall, Keehn, & Lane, 2016). Researchers suggest the implementation of the Affordable Care Act for the cause of the growth. Employing foreign-educated physical therapists is one policy solution to address the shortage (Cornwall et. al., 2016). In 2015, 4.2% of all licensed physical therapists in the United States were foreign-educated (Cornwall et. al., 2016). One study concluded that foreign-educated and U.S.-educated physical therapists had the same treatment outcomes (Haskins, Kirk-Sanchez, & Tsai, 2007). Physical therapists educated in other countries are more likely to be male, a member of a minority group, and more experienced (Haskins et. al., 2007).

The general pathway for foreign-educated physical therapists in the U.S is as follows: submit application for licensure to the intended state board, pass the National Physical Therapy Examination, get credentials evaluated from an approved credentialing agency, submit proof of English proficiency, and submit other additional documents required by the applicant from the state intended to reside and apply for licensure. There are limited studies available on foreign-trained physical therapists in the United States. The credentialing process could be one barrier faced by this population.

### **Barriers**

According to the U.S. Bureau of Labor Statistics (2017) there are 27.0 million immigrants in the U.S. workforce. This is close to 20% of the entire workforce. One out of four foreign-educated individuals is experiencing skill underutilization (Batalova, Fix, & Bachmeier, 2016; Montalto, 2012; Sumption, 2013; Zong & Batalova, 2016). The

common barriers of recertification noted in the literature include: English proficiency, passing national examinations for licensure, and occupational licensure and policy concerns.

### **English Proficiency and National Licensure Examinations**

Professionals applying for licensure who are not proficient in English correlates to a low pass rate on national licensure examinations. Foreign-educated professionals who received a degree from courses not taught in English is a high predictor of not passing professional licensure examinations (Cheng, Spaling, & Song, 2013; Cornwall et al., 2016; Rietig, & Squires, 2015; Zong & Batolova, 2016). One of the pathways to professional licensure is submitting proof of English proficiency to the licensing board in the state in which the professional intends to work and reside.

Another requirement is passing a national examination recognized by the applicant's profession as the test to show competence in the field. National examinations are used by many professions for example the following national licensure examinations discussed earlier: the National Clinical Licensing Examination for Registered Nurses (NCLEX-RN), the National Physical Therapy Exam (NPTE), or the National Board Dental Examination (NBDE) Part 1 and 2. One recommendation to combat this barrier is for college-educated immigrants to reach a high level of English proficiency before attempting to gain licensure in their respective professional occupations.

### **Occupational Licensure and Policy**

The United States has a complex occupational licensing system. According to (Kleiner & Krueger, 2010) 29 % of the U.S. workforces requires an occupational license to have the legal authority to work. Therefore, more than 25% of jobs require a licensure



to be eligible for employment. This is a difficult process for U.S.-educated graduates to obtain after graduation. For internationally educated graduates, the process is more rigorous due to the “U.S. decentralized system” (Rabben, 2013, p.1). Currently, no single body in the U.S. regulates each occupation, which makes it difficult to achieve licensure (Rabben, 2013).

Many authors state that occupational licensure laws are in place to protect the public from unqualified professionals entering the workforce (Hemphill, 2016; Peterson, Pandya, Leblang, 2014). This is a barrier for college-educated immigrants navigating the U.S system due to each state having different levels of standards. In one state, a foreign-educated nurse may be licensed in one state and not eligible for licensure in a different state. The U.S. needs to address this issue by exploring options for occupational license reform for both U.S. educated and internationally educated professionals.

### **United States Foreign Credential Recognition**

The United States does not regulate the licensed professions and occupations in the nation, instead reserving this power for the states. Every licensed profession has accreditation bodies that grant licenses to workers, which gives them the legal authority to work in their respective profession. This does not apply to unlicensed occupations in the United States or at the state level. This has caused a growing awareness of the barriers faced by college-educated immigrants in the country. This research will discuss recent policy initiatives passed at the federal and state level.

#### **Federal Level**

No federal policies have been found in the literature for the licensure of foreign-educated professionals, although the White House (2015) suggested that college-educated

immigrants face barriers related to occupational licensure. In the literature, occupational licensure is noted as a major barrier for immigrants navigating the recertification process. Federal policies may exist, but in this study of the literature, no policy was found.

### **State Level**

The National Conference of State Legislatures (NCSL) has released reports from the years 2012 to 2017 that show legislature passed, pending, or vetoed for immigration-related laws. Another source, Imprint (2017), has released an interactive map that tracks occupational licensing laws or bills in twenty states. The following states have passed or have pending laws: California, Georgia, Illinois, Maine, Minnesota, Nevada, New Mexico, Nebraska, Oklahoma, Rhode Island, South Dakota, Utah, Washington, and West Virginia (Imprint, 2017). The researchers do not discuss whether these are the only states that have pending or passed bills in the United States related to the recognition of foreign credentials. Refer to Appendices C, D, E, F, G, and H for more information on the licensing laws passed or pending from 2012-2017 in the states' legislatures.

After reviewing the National Conference of State Legislators (2012) report, three bills passed related to the licensing of foreign-educated professionals in the respective states: California and New York. California passed bill AB 1533 for international medical graduates and bill ACR 167 that states immigration status will not be a determining factor for immigrants receiving their license from the California State Bar Association (NCSL, 2012). New York passed bill A 9472, a licensing law for teacher certification (NCSL, 2012).

In 2013, five states approved six bills in the state legislatures of Arkansas, Maryland, Nevada, Oregon, and West Virginia related to the licensing of foreign-

educated professionals. Arkansas passed bill H2033 that amended the medical licensing requirements for foreign-educated physicians (NCSL, 2013). Bill S942 in Maryland added oral competency in English to the requirements of licensure to the Maryland State Board of Physicians practice act (NCSL, 2013). Bill S327 in Nevada added provisions to restricted physician license applicants educated from foreign countries. Oregon passed bill H2948 and S806 licensing laws for dentists and medical graduates (NCSL, 2013).

In 2014, five states (Illinois, Kentucky, Rhode Island, Minnesota, and New Mexico) passed six licensing laws or amendments that could benefit or not benefit foreign-educated immigrants. Illinois approved two bills: H 4535, concerning architecture license and H 4235, enacted for out of state lawyers that are licensed in another state or foreign country (Imprint, 2017; NCSL, 2014). Kentucky approved bill H 337, which is a law enacted that creates citizenship and residency requirements for the licensing of air conditioning contractors in the state (Imprint, 2017; NCSL, 2014). Rhode Island passed bill S 3125 which created a task force that studies the recertification process for foreign-educated professionals and are required to submit a report (Imprint, 2017; NCSL, 2014).

Minnesota and New Mexico passed similar bills that created a special task group to study the recertification process for foreign-educated professionals in the respective states. Minnesota passed bill S 1340, which created a Foreign Trained Physician task force that examines ways to integrate these professionals into the Minnesota healthcare system and requirements to submit a report to the commissioner of health by a specified date (NCSL, 2014; Imprint, 2017). New Mexico bill H 12 created a task group which studies how community health care specialist positions could be implemented in the state. If approved, these positions would allow foreign-educated health care professionals to fill

these positions that are unable to be licensed in the state due to their unrecognized credentials (NCSL, 2014; Imprint, 2017).

In 2015, the National Conference of State Legislators released two reports including the (2015 Mid-Year Report and 2015 End of Year Report) for immigration-related laws which passed through the state legislature. Twenty-six bills passed through 18 states: Alabama, Arkansas, Arizona, Georgia, Idaho, Illinois, Louisiana, Maryland, Minnesota, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, West Virginia, and Wyoming that related to the licensing or certification of foreign-educated immigrants. Also, some of these bills created programs that address barriers for different occupations for internationally trained immigrants.

Alabama, Arkansas, and Arizona approved four bills. Alabama S 118 removed some language in the accountant certification policy related to citizens and non-citizens (NCSL, 2015). Arkansas passed bill H 1162 which made changes to the Physician Act (NCSL, 2015). Bills 2036 and S 1012 were approved through the Arizona state legislature (NCSL, 2015). These bills are for the licensure of naturopathic medicine and osteopathic physicians.

Georgia, Idaho, and Illinois approved four relevant laws or bills in the state legislatures. Georgia passed bill H 394 that allows nurses educated outside the U.S. to apply for licensure, but the board will determine if their education meets their standards. Idaho approved bill H 23 that pertains to the licensing of message therapists in the state (NCSL, 2015). Illinois passed two bills, H 1496 Dental Practice Act and S 785 Licensing of Certain Health Professionals (NCSL, 2015). The Dental Practice Act is related to the licensing of foreign-educated dentists in the state of Illinois. The other bill approved

pertains to health care professionals for athletic teams and allows them to be exempt from licensure requirements if certain conditions are met (NCSL, 2015).

There are 18 remaining bills that passed through the following state legislatures in 2015. Louisiana, Maryland, Minnesota, and North Dakota passed six relevant bills. Oklahoma, Oregon, South Dakota, and Texas approved five related bills. Utah, Washington, West Virginia, and Wyoming approved seven bills.

In 2016, Minnesota and Nebraska passed two bills or laws through the state legislature. Minnesota passed bill number (H3142) (NCSL, 2016; Imprint, 2017). Minnesota bill (H 3142) pertains to the requirements for licensure of medical faculty in the state (NCSL, 2016; Imprint, 2017). The Nebraska bill supports individuals that are legally authorized to work in the United States, with proof from the Department of Homeland Security, and allows them to obtain a commercial or professional license in the state (NCSL, 2016; Imprint, 2017).

In 2017, four states (California, Louisiana, Massachusetts, and Washington) approved five bills or laws are pending or approved through the respective state legislatures (Imprint, 2017; NCSL, 2017). California bill A 827 is pending in the state legislature of California. If passed this bill would require the Department of Consumer Affairs to appoint a task force that studies the licensing and workforce barriers of foreign-educated professionals (Imprint, 2017; NCSL, 2017). Maine has a similar bill pending S 1340. If passed, this would appoint a committee of professionals that study the barriers for licensing foreign-educated medical professionals in the state (Imprint, 2017; NCSL, 2017). Other states have already passed similar bills including: Minnesota, Washington,

and Rhode Island. If the bill is implemented, the task force would be required to research and submit a report of findings to the state legislature by January 1, 2019 (Imprint, 2017).

### **Canadian Foreign Credential Recognition**

The basic geographic descriptions of Canada include ten provinces and three territories. The provinces are: Alberta, British Columbia, Manitoba, New Brunswick, Newfoundland and Labrador, Nova Scotia, Ontario, Prince Edward Island, Quebec, and Saskatchewan (Government of Canada, 2017). The three provinces are: Northwest Territories, Yukon, and Nunavut (Government of Canada, 2017). Most professions that require a license are often referred to as regulated occupations. The licensing bodies are called regulatory bodies often referred to as “Colleges” in the literature. For example, in Canada there are 12 regulatory bodies that regulate the profession of nursing (Canadian Nurses Association, 2017). In British Columbia, the regulatory body is the College of Registered Nurses of British Columbia. The Nurses Association of New Brunswick is similar to the State Boards of Nursing in the states which have the authority to grant licenses to nurses in New Brunswick.

### **Recent Policy Initiatives**

In Canada, there are substantial amounts of data associated with the Government of Canada recognizing the issues of the re-certification process for foreign educated professionals in their country (Elgersma, 2012). According to Elgersma (2012, p.4), “there are 500 regulatory bodies governing 55 professions, and 13 provincial and territorial apprenticeship authorities governing approximately 50 trades.” In comparison, the United States system has an estimated 800 licensed occupations (Hemphill, 2015).

Examining the Canadians' approach to licensing foreign-educated professions will show the difference between the United States and Canadian system.

### **Agreement on Internal Trade**

In 1994, the Agreement on Internal Trade was initially signed to reduce barriers faced within the provinces related to the movement of workers, goods, services, and investments (Forum of Labor Market Ministers, 2016). In 2009, the Canadian federal, provincial, and territorial governments approved Chapter 7 of the Agreement that continues the focus of the barriers faced by regulated professions within different provinces (Forum of Labor Market Ministers, 2009). This created "full labor mobility" by allowing workers in regulated professions the right to be licensed in another province due to relocation. (Forum of Labor Market Ministers, 2009, p.3). The certified worker would have to submit an application to the regulatory body in the intended province or territory depending on the applicant's profession. The regulatory body is required to license the worker in the respective province unless there are "pre-defined requirements" in the province or territory that helps protect the public (Forum of Labor Market Ministers, 2009, p.3). Therefore, once foreign-trained professionals are licensed in Canada they will have the same standards and rights as Canadian educated professionals.

### **Foreign Credentials Recognition Program**

The Foreign Credential Recognition Program (FCRP) was started in 2003 (Employment and Social Development Canada, 2015). According to Employment Social Development Canada (2015), the primary goals of the Foreign Credentials Recognition Program is to implement the Pan-Canadian Framework. The FCRP funds programs and projects that help endorse the framework and transition the Canadian federal government,

provincial, territorial, regulatory bodies, and other stakeholders into a unified approach with foreign credential recognition. The FCRP has funded 142 projects since the adoption of the framework in 2009 (ESDC, 2015).

One program under the FCRP is the Foreign Credential Recognition Loan Pilot Program. The Foreign Credential Recognition Loan Pilot Program financially assisted 1,600 new Canadians with license recertification fees (ESDC, 2015). Under this program, the government will give foreign-educated immigrants a loan to assist with getting their credentials recertified, attending additional training if required, or explore career opportunities related to their profession before migrating to Canada.

Another program under the FCRP is the Foreign Credential Referral Office (FCRO) created in 2007 by the Government of Canada and is implemented by the Human Resources and Skills Canada (Citizenships and Immigration Canada, 2013; Elgersma, 2012; Government of Canada, 2013). The FCRO assists foreign educated immigrants with navigating the process of evaluating their credentials. FCRO works to eliminate barriers faced by internationally educated immigrants and acts primarily as a referral service. The Government of Canada approved \$13.7 million for fiscal years 2007-2012 (Elgersma, 2012). In 2009, additional funding was approved for \$13.75 for another two years (Elgersma, 2012).

### **Pan-Canadian Framework**

The Pan-Canadian Framework for the Assessment and Recognition of Foreign Qualifications is a framework that was implemented in 2009 (Forum of Labor Market Ministers, 2009). The Forum of Labor Market Ministers are representatives from the different levels of the Canadian Government, federal, provincial, and territorial.



According to the Forum of Labor Market Ministers (2009) this is not a legal document but is seen as a set principles, ideas, and leadership initiatives that gives the Government of Canada directions for addressing the barriers faced by college-educated immigrants. Three sets of “target occupations” have been identified as high priority to implement the principles of the framework by working with the Government of Canada, regulatory bodies or accreditation agencies, and other stakeholders (Forum of Labor Market Ministers, 2009, p. 12).

In 2010, after one year the first set of target occupations including: architects, engineers, financial auditors and accountants, medical laboratory technologists, occupational therapists, pharmacists, physiotherapists, and registered nurses, are meeting the time requirements agreed in the framework (Forum of Labor Market Ministers, 2010). The framework lists timely service,” meaning that in these occupations regulatory bodies are required to give applicants within one year if their credentials will be recognized in Canada. If their credentials are not recognized, the regulatory body will inform the applicants of additional requirements that must be met or give them recommendations for similar occupations based on their education and experience (Forum of Labor Market Ministers, 2009).

The second set of target occupations starting in 2012 includes: dentists, engineering technicians, licensed practical nurses, medical radiation technologists, physicians, and teachers (Forum of Labor Market Ministers, 2009). The third set of target occupations includes: audiologists and speech therapists, midwives, psychologists, lawyers, and geo-scientists (Forum of Labor Market Ministers, 2016). Also, in the Forum of Labor Market Ministers Annual Report of (2016) suggests that an action plan is being

created for lawyers and psychologists. No current report was found to provide results of the past two years.

Foreign credential recognition is one of the current priorities listed in the Forum of Labor Market Ministers (2015-2016) report. The purpose is to initiate a partnership among the provincial, territorial, and regulatory governments along with other stakeholders to address these barriers experienced by immigrants and internationally educated workers and to create an action plan. Fairness, transparency, timeliness, and consistency are principles in the framework.

## CHAPTER III

### METHODOLOGY

During the first part of the study, the researcher examined the demographics of clients that received employment services at a national refugee resettlement agency, the International Rescue Committee IRC in Midland, Texas. Second, the researcher studied the process of recertifying foreign professionals in Texas for three professions. Foreign professionals in this study are defined as: individuals who received professional training outside of the United States. The study is exploratory and descriptive in nature and is not data driven. The primary goal of the study is to provide a guideline to the IRC.

#### **Participants**

One-hundred and ninety-two participants include refugees, asylees, and Cuban parolees who received services from the Midland, Texas, IRC office from March 2016-January 2018. Refugees are individuals that have fled their country and resettled in the United States. Refugees flee their country for some various reasons which may include: a threat of serious harm or persecution based. Asylees would qualify for Refugee status but since they are already in the United States or at an entry port their status is different. Asylees apply to the government for asylum. Cuban entrants are labeled as parolees and are seeking asylum in the United States.

The total number of clients served shows the number of clients with professional training compared to those with a lower education level. The researcher examined client data through existing client files and a software program used by the agency to track

client information. Patient identifying information was excluded after data collection to follow client confidentiality procedures.

### **Procedure**

This study received formal approval from the Abilene Christian University Institutional Review Board (ACU IRB), and the approval letter is shown on Appendix A. Also, the letter of approval from the resettlement director of Midland IRC has been collected (see Appendix B). Due to the nature of the study, the risk to the participants was low. Data was collected from existing client files. Information for the second part of the study was retrieved from credible sources online. Some sources include: relevant literature, accreditation boards' websites, and client data collected from the IRC database. The demographics were discussed, and tables were created to show the results. The licensure requirements were found primarily on their respective accrediting bodies website in Texas.

### **Analysis**

Four tables were created to show the demographics of the study. The researcher was not able to provide results on employment data for many reasons. Most participants were Cuban entrants and on average received their work permits five months after submitting their application. Cuban entrants are not legally authorized to obtain employment until they receive their work permits. Due to this, employment data was excluded due to a lower number of variables. There was a gap in the literature studying the issues of underemployment for college-educated immigrants wishing to resume their previous career in the United States.

In the second part of the study, the researcher reported these findings using many charts and figures located in the appendices. The researcher discusses the licensure requirements for three professions. The three professions examined in Texas were dentists, nurses, and physical therapists. This will serve as a guideline to the IRC for assisting future clients in their employment program. Although, the licensure requirements by professions change every few years due to new policies changed or passed by the accreditation bodies. Readers and applicants should contact the respective licensure body in the state where they intend to reside for the most up to date information.

## CHAPTER IV

### RESULTS

The results of the study include two parts, the demographics of the participants and the current licensure requirements for three professions in the United States. Four tables were created to show data retrieved from existing clients from the IRC in Midland, Texas, from March 2016 to January 2018. Table 1 shows demographics of all participants, Table 2 includes the demographics of professionals, Table 3 excludes the professionals with an unknown type of degree and profession, and Table 4 provides the level of education and profession of the professionals from Table 3. The second part of the study discusses the general steps for Texas recertification for dentists, nurses, and physical therapists. Information was gathered from various sources but primarily from the professions credentialing website. This will serve as a guideline for the IRC when working with future clients on the path to resume their previous career in the United States.

#### **Demographics of Participants**

This study included 114 female and 78 male participants. The marital status of the participants included 47.9% single, 37.5% married, 7.8% divorced, 6.2% separated, and 0.5% unknown. The participants' country of origin is diverse. The total number of participants were 192. The country of origin of the participants includes: 154 from Cuba, 23 from Myanmar, five from Iraq, and smaller groups originated from other countries.

The largest percentage of participants, 63.5%, were not proficient in English. The primary language spoken among the participants was Spanish at 80.2%. Other languages of the participants includes: Hakha Chin 7.2%, other 5.2% Arabic 2.6%, Fallam Chin 2.6%, and Senthang 2.0%. The mean age of the participants was 35.1. The mean number of years of education is 12.1.

Table 1

*Demographics of Gender, Marital Status, Country of Origin, English Ability, Language, Age, and Years of Education (n=192)*

Demographics	Frequency (n)	Percentage
Gender		
Male	114	59.3
Female	78	40.6
Marital Status		
Divorced	15	7.8
Married	72	37.5
Separated	12	6.2
Single	92	47.9
Unknown	1	0.5
Country of Origin		
China	2	1.0
Cuba	154	80.2
DRC	4	2.0
Iraq	5	2.6
Myanmar	23	11.9
Other	4	2.0
English Ability (Speak)		
None	122	63.5
Basic	47	24.4
Medium	18	9.3
Advanced	5	2.6
Language		
Arabic	5	2.6
Fallam Chin	5	2.6
Hakha Chin	14	7.2
Senthang	4	2.0
Spanish	154	80.2
Other	10	5.2
Mean Age 35.1	Range (18-60)	
Mean # yrs of education 12.5	Range (0-20)	

Table 2 includes the participants labeled as professionals for the purposes of this study. The table lists the overall demographics of the participants in the professionals category with 20 males and 27 females. The professionals overall were single 47.9%, married 37.5%, divorced 7.8%, separated 6.2%, and unknown 0.5%. Most participants were from Cuba 47 and one from Myanmar. The primary language spoken among the professionals was 46 participants who spoke Spanish and 1 professional spoke Hakha Chin.

Table 2

*Professionals Demographics of Gender, Marital Status, Country of Origin, English Ability, Age, and Years of Education (n=47)*

Demographics	Frequency	Percentage
Gender		
Males	20	42.5
Females	27	57.4
Marital Status		
Divorced	3	6.3
Married	17	36.1
Separated	6	12.7
Single	21	44.6
Country of Origin		
Cuba	46	97.8
Myanmar	1	2.1
English Ability (Speak)		
None	22	46.8
Basic	19	40.4
Medium	6	12.7
Advanced	0	0
Language		
Hakha Chin	1	2.1
Spanish	46	97.8
Mean Age 36.8	Range (1-47)	
Mean # yrs of Education 16.2	Range (14-20)	



Table 3 includes the participants in the professionals' category with the type of college degree and profession known. There are 12 females and 8 male participants. The marital status of the participants included 10% divorced, 45% married, 10% separated, 7% single, and 0.0% unknown. All of the participants were from Cuba, and their primary language was Spanish. The largest percent of participants (45%) were not able to speak English. There were 40% of participants who spoke English at the basic level and 15% at the medium level. No participants spoke English at the advanced level. The mean age of the participants was 34.9. The mean number of years of education is 16.5. (See Table 3).

Table 3

*Professionals Demographics Type of Degree and Profession  
Known (n=20)*

<b>Demographics</b>	<b>Frequency</b>	<b>Percentage</b>
Gender		
Males	8	40
Females	12	60
Marital Status		
Divorced	2	10
Married	9	45
Separated	2	10
Single	7	35
Country of Origin		
Cuba	20	100
English Ability (Speak)		
None	9	45
Basic	8	40
Medium	3	15
Advanced	0	0
Language		
Spanish	20	100
Mean Age 34.9	Range (21-47)	
Mean # YRs of Education 16.5	Range (14-20)	

Table 4 shows the professionals from Table 3, listing the participants' type of degree and profession. Seventeen out of 20 hold bachelor's degrees, and three hold other advanced degrees. There were two participants that are doctors in medicine. The other professional is an attorney with a Juris Doctor degree. Some other professions included: accountants, teachers, physical therapists, nurses, and engineers.

Table 4

*Professionals Profession Listed (n=20)*

<b>Professions</b>	<b>Number of Participants</b>
Accountant	2
Attorney	1
Cosmetologist	1
Teacher/Professor	5
Engineer	2
Nurse	3
Doctor	2
Physical Therapist	3
Music Producer	1

*Note: Table 4 includes the participants from Table 3.*

### **Licensure in Texas**

The general pathway for recertification for foreign-trained professionals in the U.S. varies by profession, type of degree attained, country that granted the degree, and other factors refer to Appendix I. The first step to get recertified is to contact the profession's accreditation body in the state of residence. Next, the state's professional accreditation body will provide the requirements to achieve recertification in the United States. This process differs across the professions but could be a long, expensive,

rigorous process. The journey will primarily depend on the state of residence and profession. Some states are more immigrant friendly than others.

For the purposes of this study, the researcher chose to examine the Texas requirements and steps for foreign-educated professionals in three professions: dentists, nurses, and physical therapists. The information was retrieved from the accrediting bodies websites, Texas State Board of Dental Examiners, Texas State Board of Nursing, and the Texas Board of Physical Therapy Examiners. The state requirements and pathways are based on the researcher's extensive study and review. Applicants should contact their local or state level board to receive the most updated information.

### **Texas Pathway for Foreign-Educated Dentists**

The Texas State Board of Dental Examiners (TSBDE) is the licensing body for dentists in the state of Texas. Foreign-educated dentists will have to contact the board directly for the most current information. According to the Texas State Board of Dental Examiners (2017) website, the general licensure requirements are listed for foreign-educated dentists (refer to Appendix J). The general requirements for foreign-trained dentists are: complete licensure by examination application and pay all associated fees, complete required education, pass the National Dental Examination Parts 1 & 2, pass the regional clinical examination, provide proof of completion of the TSBDE Jurisprudence Assessment, and submit a National Practitioner Data Bank (NPDB) Self-Query and American Association of Dental Boards (AADB) Clearinghouse Self-Query to the TSBDE.

**Required Education**

The Texas State Board of Dental Examiners requires foreign-educated dentists to complete an American Dental Association (ADA) specialty education program accredited by the Commission on Dental Accreditation (CODA). According to the TSBDE (2017) website, the board recognizes nine specialties. The recognized specialties are: “Endodontics, Periodontics, Oral and Maxillofacial Pathology, Oral and Maxillofacial Surgery, Oral and Maxillofacial Radiology, Orthodontics and Dentofacial Orthopedics, Pediatric Dentistry, Dental Public Health, or Prosthodontics” (TSBDE, p.1, 2017). These programs will take at minimum two years to complete to meet the requirements of the board.

**Joint Commission on the National Dental Examination**

Foreign-educated and U.S.-educated graduates will have to register for a DentPin (Dental Personal Identifier Number) to register for the National Dental Examination (ADA, 2017). Dentists currently licensed in another state or jurisdiction have a DentPin and can retrieve it on the American Dental Association (ADA) website (American Dental Association (A), 2017). Foreign-educated dentists will have to get their credentials evaluated if studied at a school not accredited by Commission on Dental Accreditation (CODA) or Commission on Dental Accreditation of Canada (CDAC) by the Educational Credentials Evaluators (ECE). Applicants may have been required to complete a credential evaluation report when applying for either a specialty education program or advanced standing program for international educated dentist and may have already completed this step. According to the (ECE) (2017) website, the general report costs \$85 and the course by course report is \$160 (ECE, 2017). Applicants should contact the

Educational Credentials Evaluators (ECE) for requirements and documents needed to apply to for the report.

### **Texas Jurisprudence Exam**

The Texas Jurisprudence Exam is required to obtain a dental license in Texas. The cost of the exam is \$54 for applicants applying for initial licensure (TSBDE, 2017). This exam provides applicants with the ability to learn about the Texas Occupations Code, is statutes that regulate the practice of professions in Texas as (TSBDE, 2017). The board states that the exam should be taken within one year before applying for licensure.

### **Clinical Examination**

After completing the steps above the international trained dentist will request approval from (TSBDE) to take the regional clinical examination from one of the five recognized dental examining boards: “Western Regional Examining Board, Central Regional Dental Testing Service, Commission on Dental Competency Assessments, Southern Regional Testing Agency, and Council on Interstate Testing Agencies” (TSBDE, p.1, 2017). Refer to Appendices K and L for steps to obtain approval to take the clinical exam and contact information for the regional clinical examination boards recognized by the Texas State Board of Dental Examiners.

### **Texas Pathway for Foreign-Educated Nurses**

The Texas Board of Nursing (BON) is the licensing body for nurses in the state of Texas. Foreign-educated nurses should contact the board directly for the most current information and for the steps regarding the licensure process in Texas. According to the Texas Board of Nursing (2017) website, the general licensure requirements for foreign-educated nurses are listed in Appendix N. For information on the U.S. licensure steps for

nurses, refer to Appendix M. The general requirements are: complete the application for examination form, take the National Clinical Licensing Examination for Registered Nurses (NCLEX-RN) Exam, complete the background check and fingerprint process, complete the verification of license (VOL) if applicable, take the required English proficiency test if applicable, take the Texas Jurisprudence Nurse Exam, and have credentials evaluated by an approved organization (Texas Board of Nursing, 2017). These are the general steps for licensure required in Texas.

### **Application for Examination Form**

After contacting the Texas Board of Nursing, completing the application for examination is the next step to apply for licensure. The application for examination form can be retrieved from the Texas BON website (Texas Board of Nursing, 2017). This form is 19 pages that gives detailed information for licensure. This describes the application process for licensure in Texas. It also includes information for foreign-educated nurses.

### **Texas Nursing Jurisprudence Exam**

Another step required for the licensure process is to take the Nursing Jurisprudence Exam (NJE). The NJE is an exam testing the applicant's knowledge of the Texas BON policies, regulations, guidelines, and laws governing the nursing profession in the state. The cost of the exam is included in the application fee discussed earlier. There is a preparation course available online on the board's website. According to the Texas BON (2017), applicants are allowed three attempts at taking the exam and if unsuccessful may be required to take additional courses.

After submitting the application for examination form to the Texas BON, the applicant will wait 15 business days (Texas Board of Nursing, 2017). The exam is

administered online and takes approximately two hours to complete. There is no data available on the pass rates of the NJE, but this is an open book test, which allows the applicants to refer to their study materials if needed. A re-test is allowed 24 hours after a failed attempt by the applicant. Foreign- and U.S.-educated applicants are required to pass the NJE prior to being given authorization to test for the Nursing Clinical Licensing Examination (NCLEX) examination (Texas Board of Nursing, 2017).

### **Criminal Background Check and Fingerprint Process**

Effective in 2004, submitting a background check to the board is required to be eligible for licensure as a nurse in the state of Texas. According to the National Council of State Boards of Nursing (2016), The Nurse Practice Act Texas Occupational Code 301.452(b)(3) states: “It is grounds for disciplinary action or denial of license a conviction for, or placement on deferred adjudication community supervision for a felony or for a misdemeanor involving moral turpitude.” The Texas Occupational Code 53.021 enforces the legal authority to revoke, suspend, or deny license if an individual has been convicted of a misdemeanor or felony conviction, “that directly relates to the duties and responsibilities of the licensed occupation” (National Council of State Boards, 2015, p.8). The Texas Administrative Code 213.29 lists the offenses that the board has declared related offenses to the nursing profession. If the offenses are against the person, against property, involving fraud, or drug related, then the offenses are considered related to the nursing profession. These offenses are subject to review by the board.

### **Credential Evaluation Service Report**

A Credential Evaluation Report (CES) is required by the Texas Board of Nursing to evaluate the credentials for the nursing applicant educated outside of the United States.

The Texas BON recognizes CES reports from three non-governmental agencies, Commission on Graduates of Foreign Nursing Schools (CGFNS), Educational Records Evaluation Service (ERES), and the International Education Research Foundation (IERF). The board will not accept reports from any other credential evaluation organizations and recommends the applicant contact the board with the most current approved CES agencies.

The Commission on Graduates of Foreign Nursing Schools CGFNS is one of the recognized credential evaluating agencies approved by the board. According to the CGFNS (2017) website, the fee for the Professional Credential Evaluation Report is \$350 (CGFNS, 2017). Also, the website lists the fee schedule for other services. The Educational Records Evaluation Service is the second approved credential evaluation service. The ERES (2017) website, lists the basic fee of \$395 for the report approved by the Texas Board of Nursing. The applicant should contact them directly for more specific information. The third approved organization by the board is the International Education Research Foundation IERF. After reviewing their website, the fee schedule is \$475 for the first report (IERF, 2017). The board requires that the applicant submits the CES report within one year of the completed report from one of the three approved agencies discussed above.

### **Proof of English Proficiency**

If the foreign-educated nurse did not complete his/her education in a program taught in English, then they are required to submit proof of English proficiency to the Texas BON. The Texas BON lists specific requirements on their website. There are five options to satisfy the requirement. The Test of English as a Foreign Language (TOEFL)



has three formats: computer based, paper based, and internet based. The minimum passing scores are 560 for paper-based tests, 220 computer-based tests, or 83 for internet-based (Texas Board of Nursing, 2017). The applicant will only have to submit one of these formats to the board. The applicant can take the Test of Spoken English (TSE) with the minimum passing score of 50 and the Test of Written English (TWE) with the minimum score of 4.0 (TSBON, 2017). Both the TSE and TWE will have to be taken and submitted to the board. The third option available is the International English Language Testing System (IELTS). The passing score required is at least a score of 6.5 overall with a minimum of 6.0 in all of the four modules (Texas Board of Nursing, 2017).

### **Verification of License**

A verification of licensure (VOL) form is required if the applicant held a professional license in other countries, states, provinces, or territories. The board requires the VOL to be sent directly from the licensing agency and an official seal to prove the authenticity (TSBON, 2017). This is only valid for one year after the form is signed and sealed by the licensing board or agency. The board notes in the application that the credential evaluation services report required and discussed earlier will have the original countries VOL contained in the CES report.

### **NCLEX Examination**

The National Council Licensure Examination for registered nurses (NCLEX-RN) is referred to the “rite of passage” for nurses (Sean, 2017). The NCLEX is required in all 50 states to be licensed as a nurse. According to Sean (2017), the test is computer based and the total number of questions ranges from 75 to 200. The test configures the number

of questions based on the test-takers answers for questions labeled difficult or easy. Test takers will take the minimum amount of questions needed to achieve a pass or fail score.

According to various data (Davis & Nichols, 2002; Institute for Immigrant Research, 2015; Squires, 2017), foreign-educated nurses have a 30% pass rate on the NCLEX. The researchers explain the language barrier is one possible cause for a low pass rate among internationally trained nurses. One passing predictor on the exam is foreign-educated nurses from countries with English as the official language. Nurses from other countries should be aware of these predictors. Foreign-educated nurses should first become competent speaking and writing in English before attempting to take the NCLEX.

Applicants are required to register for the exam and pay the fee of \$200 to Pearson Vue and the \$100 fee to the Texas Board of Nursing before the board will give the applicant the authorization to test if deemed eligible. According to the application for examination on page 12, there are three registration options: online, over the phone, and through the third-party site. Foreign-educated nurses should refer to the application for examination for more detailed results and for the most current information. The application for examination for registered nurses was accessed online at the Texas BON website.

### **Texas Pathway for Foreign-Educated Physical Therapists**

The general requirements for licensure in Texas are: apply to the board, credentials evaluated with an approved credentialing agency, submit proof of English proficiency, take the Jurisprudence Assessment, and submit other required documents to the board if applicable. The researcher examined the Texas Board of Physical Therapy

Examiners (TBPTE) website and literature related to the licensing laws in Texas.

Applicants should contact the board for up-to-date information. Refer to Appendix O.

### **Education Evaluation**

Foreign-educated physical therapists are required to get their degree evaluated by an approved credentialing agency recognized by the TBPTE. Applicants that graduated from CAPTE foreign accredited school are exempt from this requirement (TBPTE, 2017). The TBPTE only accepts credentialing reports from five agencies: Foreign Credentialing Commission on Physical Therapy Education (FCCPT), International Consultants of Delaware (ICD), International Credentialing Association (ICA), International Education Research Foundation (IERF), and the University of Texas at Austin. Refer to Appendix P for contact information and fee schedule for the approved credentialing agencies in Texas (TBPTE, 2017). The credentialing agency will require their own application and supporting documents to complete the evaluation. Applicants will need to get their transcript translated to English if applicable. Consult the credentialing agencies for more information.

### **Proof of English Proficiency**

The Test of English as a Foreign Language (TOEFL) is the only recognized English proficiency test accepted by the board (TBPTE, 2017). The minimum passing scores for the internet-based test include: writing 24, speaking 26, reading comprehension 21, listening comprehension 18. For the computer-based TOEFL test minimum scores include: reading comprehension 237, writing 5.0, and speaking 50. The paper-based minimum scores required are: reading comprehension 580, writing 5.0, and speaking 50. If applicants received a degree from a CAPTE-accredited school, held a license from

another U.S. state for the past 10 years, or were a citizen or permanent resident of the U.S., they qualify for an exception (TBPTE, 2017).

### **Jurisprudence Assessment Module**

The Physical Therapy Texas Jurisprudence Assessment exam is similar to the Dental and Nursing Jurisprudence test. There is no cost to take the assessment for initial licensure but for renewals the cost is \$48 (TBPTE, 2017). The test consists of 75 questions and the minimum passing score is 60 correct answers out of 75 with a two-hour time limit (TBPTE, 2017). Applicants will have to achieve a passing score prior to receiving their licenses. However, the board provides free resources available online to study for the exam and allows applicants to take the exam until they receive a passing score.

### **Other Documents**

Internationally-educated graduates should contact the board for other required documents and current licensure information. The process may be different for each applicant and some may require more steps for licensure than other candidates. The board will require a background check and finger print. The Federation of State Boards of Physical Therapy is another great source for more information.

## CHAPTER V

### DISCUSSION

Studies suggest there is a problem among foreign-trained professionals in the United States. The goals of the study were to explore the recertification process for college-educated immigrants in the United States, Canada, and Texas. The researcher reported policies found at the state and federal levels in the United States. Also, Canadian policies were examined to compare their advancements to the United States. The second part serves as a guide for the International Rescue Committee to assist future clients. The guide provides a general outline for the licensure process within three professions in Texas.

#### **Demographics of Participants**

A sample of 192 participants was collected from existing client files from a resettlement agency in Texas. The researcher found approximately 24% of participants were college educated. Advanced level of English proficiency did not correlate to higher education levels among participants. Also, the professional training of participants varied within the participants. Some professions included dentists, nurses, physical therapists, professors or teachers, and engineers.

#### **Occupational Licensure**

The second part of the study included information gathered from the Texas State Board of Dental Examiners, Texas Board of Nursing, and the Texas State Board of

Physical Therapy Examiners websites. The researcher created charts and figures to explain the licensure process for three professions. The general pathway to licensure for college-educated immigrants is to first attain English proficiency. English proficiency was reported in the literature as a major barrier. Part of the application process requires foreign-educated professionals to pass an English proficiency test. Next, the applicant contacts the licensure body in the respective profession in the state of residency.

Requirements for each state vary among the professions. Applicants submit an application for licensure to the accreditation body along with other supporting documents. Foreign-trained applicants are required to get their credentials evaluated by a credential evaluation service. Licensure bodies will provide applicants with contact information for the credential evaluation agencies they recognized in their state and profession. The final step is pay all associated fees and requirements set by the professions licensure body in the applicants' home state.

The U.S. occupational license system is not regulated by the federal government. According to Kleiner and Krueger (2010), 29% of the U.S. workforce requires an occupational license to work. Credential regulated by the states are difficult to study on a broad scale because the U.S. does not regulate occupational licensing at the federal level. Professional credentials are primarily based on national professional organizations, or accreditation bodies, and each state has their own licensure requirements. Licensure requirements for occupations in each state vary widely. For example, internationally trained medical graduates in Texas require three years of residency before they can apply for their medical license (Federation of State Medical Boards, 2017). In Oklahoma, the

residency requirement is two years, and Wyoming requires one year (Federation of State Medical Boards, 2017).

### **Limitations**

Although measures were carefully thought out for the study, limitations are acknowledged by the researcher. First, the measures used to collect the data were flawed by relying on existing data in participant files. During the collection process, the researcher found many files that had missing data. The missing data caused the researcher to exclude the findings from the professionals' last known employment. Most of the Cuban participants had not received their work permit while enrolled in the program. They were not eligible for employment until the U.S. government issued them a work permit. Also, some of the participants entered the workforce after their exit date from the agency. The design of the study did not include participants interviews or follow ups that could have allowed the researcher to acquire more data. Second, the sample size limited the study by having a small number of participants in the professionals count. The missing data played a role in this area by lowering the number of results. Third, there was a lack of current research studies on the relevant topic in the United States. Lastly, the information collected was self-reported data from caseworkers at a resettlement agency in Texas.

### **Conclusion**

One out of four college-educated immigrants are underemployed (Batalova et. al., 2016; Montalto, 2012; Sumption, 2013; Zong, Batalova, 2016). According to Montalto (2012), this is causing governments at the local, state, and federal level to lose potential tax revenue. Foreign credential recognition is a problem in the United States. Some

barriers noted in the literature include: English proficiency, national licensure examinations, and the occupational licensing standards between each state.

Studies predict a shortage of health care professionals in the future that correlates to the retiring of the baby boomers and the aging of current health care workers. Utilization of foreign-educated professionals is one potential solution that could address the predicted healthcare shortage in the U.S. No recent policy initiatives were found at the federal level. Many states have passed different licensing laws, created special task forces, and immigration integration programs. There is limited data available at the local, state, and federal level evaluating the current policies implemented that address barriers for re-credentialing in the United States.

Canada adopted the Pan-Canadian Framework for the Assessment and Recognition of Foreign Qualifications nationwide in 2009, at the federal, provincial, and territorial governments. This framework is based on four principles that focus on integration initiatives and goals to resolve the licensing barriers for internationally educated professionals. The Forum of Labor Market Ministers (2014) released an action report describing goals and recommendations for the future. Canada recognizes the problems associated with foreign credential recognition and has taken initiative to address these issues.

For future findings, a more focused study should include evaluating immigrant policies relevant to the recertification of college-educated immigrants found at the state and federal level. Researchers should continue to examine the progress of the Pan Canadian Framework implemented to decrease the brain waste found among college-educated immigrants. Also, explore the brain waste among college-educated immigrants



in the U.S. by repeating this study with an increased sample size and recordable data. The data should include the type of degree attained, country of origin, years of experience, and the last known employment of the foreign-trained professional. The type of degree attained, and last known employment could show data that credits or discredits the brain waste results found by other researchers in the U.S.

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APPENDIX A  
ACU IRB APPROVAL

ABILENE CHRISTIAN UNIVERSITY

*Educating Students for Christian Service and Leadership Throughout the World*

Office of Research and Sponsored Programs  
320 Hardin Administration Building, ACU Box 29103, Abilene, Texas 79699-9103  
325-674-2885



April 19, 2018

Mary Shelton

Department of Social Work

ACU Box 27866

Dear Mary,

On behalf of the Institutional Review Board, I am pleased to inform you that your project titled  
Comparing Refugee Professional Credentials to Texas Standards

(IRB# 17-112 )is exempt from review under Federal Policy for the Protection of Human Subjects.

If at any time the details of this project change, please resubmit to the IRB so the committee can determine  
whether or not the exempt status is still applicable.

I wish you well with your work.

Sincerely,

*Megan Roth*

Megan Roth, Ph.D.  
Director of Research and Sponsored Programs

## APPENDIX B

### IRC Letter of Approval

International Rescue Committee  
3305 N 3<sup>rd</sup> St. Suite 320  
Abilene, TX 79603  
(325) 675-5643



November 15, 2017

Dear Dr. Wayne Paris:

It is my understanding that Mary Shelton will be conducting a research study in the IRC Midland office. Ms. Shelton has informed me of the design of the study as well as the targeted population.

I support this effort and will provide the assistance requested for the successful implementation of this study. If you have any questions, please do not hesitate to call. I can be reached by Email at [susanna.lubanga@rescue.org](mailto:susanna.lubanga@rescue.org) or by phone at (325) 675-5643.

Sincerely,

A handwritten signature in brown ink, appearing to read 'Susanna Lubanga'.

Susanna Lubanga  
Resettlement Director  
3305 North Third Street, Suite 320  
Abilene, TX 79603

APPENDIX C

2012 Legislation Related to Occupational Licensing of Foreign-Educated Immigrants

State	Subject	Bill Number	Date Enacted	Summary
California	Medicine: Trainees: International Medical Graduate	A 1533	07/13/2012	This law authorizes a clinical instruction pilot program for English-Spanish bilingual international medical graduates at the David Geffen School of Medicine at UCLA, and provides that program participants not be barred from practicing medicine as required by the program.
California	California State Bar Admission	ACR 167	09/04/2012	This resolution states that an applicant's immigration status should not be a determining factor when deciding whether to approve their license to practice law in California
New York	Citizenship Requirements for Teacher Certification	A 9472	08/01/2012	This law extends until 2017 the citizenship requirements for permanent certification as a teacher.

Source: National Conference of State Legislatures, 2012) Retrieved from: <http://www.ncsl.org/documents/immig/EnactedLawsDec2012byState.pdf>

APPENDIX D

2013 Legislation Related to Occupational Licensing of Foreign-Educated Immigrants

State	Subject	Bill Number	Date Enacted	Summary
Nevada	Health Care Professions	S327	06/02/2013	This law revises the provisions authorizing the issuance of restricted licenses to certain graduates of a foreign medical school.
Maryland	State Board of Physicians	S942	05/16/2013	This law mandates that the State Board of Physicians establish within its examination or licensing procedures, oral competency in English.
Arkansas	Unrestricted Licenses	H2033	03/28/2013	This law amends medical licensing requirements to include eligibility for foreign medical graduates who meet specified Requirements.

West Virginia	Oregon	Oregon	
Exemption from License as an Adjuster	Individual Licensed To Practice Medicine	Dentists Licensed in Other Countries	
H2762	S806	H2948	
04/29/2013	06/13/2013	05/14/2013	
This law, which relates to the licensure of insurance adjusters, adds a clause that a resident of Canada may be licensed as a nonresident adjuster if he/she holds a resident or home state adjuster license in another state.	This law authorizes an individual licensed in medicine or podiatry out of state or out of the country to provide medical services for an out of state athletic team	This law authorizes dentists licensed in other countries to participate in educational dental activities and provides exceptions for this class of dentists to practice without compensation for no more than 5 days in a year, or to receive or give instruction at a certified teaching institution with express consent.	

Source: National Conference of State Legislatures, 2013) Retrieved from:  
[http://www.ncsl.org/documents/statefed/2013enacted\\_FinalbySubject.pdf](http://www.ncsl.org/documents/statefed/2013enacted_FinalbySubject.pdf)

APPENDIX E

2014 Legislation Related to Occupational Licensing of Foreign-Educated Immigrants

State	Subject	Bill Number	Date Enacted	Summary
Illinois	Architecture License	H 4535	08/18/2014	This law allows an exception for applicants for an architecture license who have graduated from an architectural program outside the United States, and whose first language is not English, to not be required to submit certification of passage of the TOEFL or a test of spoken English, if the applicant earned an advanced degree from an accredited educational institution in the United States or its territories.
Illinois	Out of State Attorney	H 337	8/15/2014	his law permits out-of-state attorneys who are licensed in another state or foreign country to appear before hearing officers, administrative law judges, and other adjudicator bodies of departments, enables foreign attorneys to represent taxpayers in proceedings before a tax tribunal.
Kentucky	Master heating, Ventilation, & Air Conditioning Licenses	H 337	4/10/2014	An applicant for a master heating, ventilation, and air conditioning contractor's license shall be a citizen or legal resident of the U.S.



New Mexico	Task Force Community Health Specialist Positions	Rhode Island	Task Force for Foreign-Trained Professionals
HM 12	2/14/2014	S 3125	6/19/2014
This resolution requests that the chancellor for health sciences at the University of New Mexico convene a task force made up of experts in health care professions to study the possibilities for creating community health specialist positions in the state. These positions may be filled by individuals residing in New Mexico who have professional health care credentials from another jurisdiction, such as a foreign country, but do not have licensure or other authorization to apply their health care skills in the state, also that the task force present its recommendations to the legislative health and human services committee by November 1, 2014.	The law establishes a Foreign Trained Physician Task Force to integrate refugee and asylee physicians into the Minnesota health care delivery system. The task force will analyze demographics, identify costs and barriers with integrating foreign-trained physicians into the state workforce, identify possible funding, and submit recommendations to the commissioner of health, who will report findings and recommendations to legislative committees by January 15, 2015.	The law creates a special senate task force to study the evaluation and certification of foreign-trained professionals. The task force shall report its findings and recommendations to the Senate on or before March 4, 2015.	

Source: National Conference of State Legislatures, 2014) Retrieved from:  
[http://www.ncsl.org/documents/immig/2014\\_Immig\\_Laws\\_by\\_Subject.pdf](http://www.ncsl.org/documents/immig/2014_Immig_Laws_by_Subject.pdf)

APPENDIX F

2015 Legislation Related to Occupational Licensing of Foreign-Educated Immigrants

	State	Subject	Bill Number	Summary
Alabama	Alabama	Certified Public Accountant	S 118	This law removes language stating that a legally present immigrant in the United States who has duly declared his or her intent to become a citizen can apply to become a certified public accountant. Non-citizens must have legal documentation from the federal government.
Arkansas	Arkansas	Graduate Registered Physician Act	H 1162	A graduate registered physician must either be an Arkansas resident and graduate from an accredited qualifying school in the U.S., or be a U.S. citizen or a legal resident alien who has graduated from an accredited Arkansas allopathic medical school or Arkansas osteopathic medical school.
Arizona	Arizona	Osteopathic Examiners in Medicine and Surgery	S 1012	This law requires an applicant to be a U.S. citizen or a resident alien to be licensed as a osteopathic physicians by the State Board of Osteopathic Examiners in Medicine and Surgery.
Arizona	Arizona	Naturopathy	H 20436	If an applicant for licensure to practice naturopathic medicine who is licensed in another state, district or territory of the U.S. or another country that does not require the same qualifications required by Arizona, the applicant must complete examinations in certain elective practice areas or be issued a license that does not include those practice areas.

Illinois	Illinois	Idaho	Georgia
Dental Practice Act	Licensing of Certain Health Professionals	Message Therapy	Nurses
H 1496	S 785	H 23	H 394
This law relates to individuals with education outside of the United States and amends provisions of the Dental Practice Act requiring applicants for a dental license who did not graduate from a dental school in the United States or Canada to complete a certain number of years of general dental clinical training in the United States or Canada prior to licensure, removes provisions allowing the applicant to substitute other forms of training and requiring the applicant to have received specified certification from a dean of an approved college or school.	A health care professional for athletic teams is licensed to practice in another state or country shall be exempt from licensure requirements under the applicable Illinois professional act while practicing his or her profession in this state if certain conditions are met.	This law provides an exemption from massage therapy licensing laws for the practice of massage therapy by persons licensed, registered or certified in another state, a territory, the District of Columbia or a foreign country when practicing on clients participating in organized athletic events or affiliated with or employed by established athletic teams, athletic organizations or performing arts companies temporarily practicing, competing or performing in the state for no more than 60 days in a calendar year.	This law adds language to allow licensure of those who graduated from a nursing education program outside the U.S. that is determined by the board to be equivalent to and not less stringent than an approved nursing education program.

Minnesota	Minnesota	Maryland	Maryland	Louisiana
International Medical Graduates Assistance Program	Higher Education Budget	State Racing Commission	Audiologists Speech Language Pathologists	Dentists
S 1438	S 5	H 1160	S 829	H 491
This law appropriates \$500,000 in fiscal year 2016 and \$500,000 in fiscal year 2017 to create the international medical graduate's assistance program to address barriers to practice and facilitate pathways to assist immigrant international medical graduates to integrate into the Minnesota health care delivery system, with the goal of increasing access to primary care in rural and underserved areas of the state. The Department of Health must report recommendations to the legislature by January 15, 2017	This budget appropriates \$35,000 in fiscal year 2016 and \$35,000 in fiscal year 2017 to implement a program to assist foreign-born students and groups underrepresented in nursing to succeed in post-secondary nursing programs.	This law repeals provisions of law requiring 85 percent of individuals employed by a person licensed by the State Racing Commission to hold a race meeting to be U.S. citizens who have maintained a permanent place of residence in the state for two years immediately before being employed.	This law exempts persons licensed to practice audiology or speech-language pathology in another state or a foreign country from a licensure requirement while the individuals are providing a clinical demonstration or receiving clinical training at a training or an educational event in the state.	This law allows persons with valid and current legal authority to reside and work in the United States to apply for a dentistry license

Oregon	Oklahoma	Oklahoma	North Dakota
State Medical Board	Dental Act	Chiropractic Practice Act	Temporary Suspension of Chiropractors
S 684	S 781	S 434	H 1099
The Oregon Medical Board may issue a limited license to practice medicine in the state to a physician who is licensed to practice medicine another state or country.	Upon request of the Dean of an accredited dental or hygiene program, the Board President may issue a dentist or hygienist licensed in another state or country a temporary license for the purpose of attending, presenting or participating in a seminar or live training in dental techniques or dental anesthesia, given at the University of Oklahoma College of Dentistry to licensed dentists and hygienists for continuing education credits and students enrolled in the University of Oklahoma College o Dentistry. A temporary permit issued for this purpose shall not exceed seven (7) days and may not be issued to the same person more than four (4) times in a calendar year.	This law directs the Board to issue chiropractic licenses to applicants who graduated from Board-approved and accredited chiropractic schools, colleges or programs outside the U.S. if the applicants have completed an educational program leading to a degree in chiropractic from an institution authorized to operate by the government having jurisdiction in which it is domiciled. Requires applicants with documentation in a foreign language submitted by the Board to be accompanied by notarized English translations. International applicants shall provide satisfactory evidence of meeting the requirements for permanent residence or temporary nonimmigrant status as set forth by U.S. Citizenship and Immigration Services.	This law exempts chiropractors from the state's licensing requirements if licensed in another jurisdiction of the U.S. or credentialed to practice chiropractic in another country if they are teaching, demonstrating, or providing chiropractic in connection with teaching or participating in an educational seminar in the state for no more than sixty days in a calendar year.

Utah	Utah	Utah	Utah	South Dakota
Dental Practice Act Amendments	Occupational Therapy License Amendments	Occupational Therapist Amendments	Licensing of Auctioneers	Dentistry
S 92	H 194	S 131	H 2481	H 1045
This law creates an exemption to licensure requirements for the practice of dentistry for certain faculty of accredited dental schools if the individual meets certain qualifications, including holding a license to practice dentistry in another jurisdiction, being permitted to the work in the United States under federal immigration law, and complying with other restrictions as outlined.	This law authorizes the division to issue a license as an occupational therapy assistant to an applicant who meets the requirements of receiving a license, and has been licensed in a state, district, or U.S. territory, or in a foreign country, where the education, experience, or examination requirements are not substantially equal to the requirements of this state, if the applicant passes an examination approved by the division in consultation with the board.	This law authorizes the division to issue a license as an occupational therapist or as an occupational therapy assistant to an applicant who meets the requirements of receiving a license, and has been licensed in a state, district, or U.S. territory, or in a foreign country, where the education, experience, or examination requirements are not substantially equal to the requirements of this state, if the applicant passes an applicable examination.	his law specifies that an individual is eligible for an associate auctioneer license if they are a citizen of the U.S. or a legal alien and employed under the direct supervision of a licensed auctioneer	Any foreign-trained or any other graduate from a dental program or dental hygiene program not accredited by the American Dental Association Commission on Dental Accreditation may apply for a license to practice as a dentist or dental hygienist. The board, by rule promulgated pursuant to chapter 1-26, shall establish requirements to reasonably ensure that an applicant's training and education are sufficient for licensure.

West Virginia	Washington	Utah
Alternative Programs for Certification of Teachers	Dental Professionals	Social Work Amendments
H 2005	S 5606	S 108
<p>This law establishes that a certificate to teach may be granted only to a person who is a U.S. citizen and meets other qualifications. However, a permit to teach in the public schools of this state may be granted to a person who is an exchange teacher from a foreign country or an alien person who meets the requirements to teach</p>	<p>The department shall issue an initial limited license without an examination to any applicant who, as determined by the secretary: holds a valid license in a Canadian province that allows a substantively equivalent scope of practice, is currently engaged in active practice in a Canadian province, files with the secretary documentation certifying that the applicant has graduated from an accredited dental hygiene school, has successfully completed the dental hygiene national board examination, and is licensed to practice in a Canadian province. Additionally, a person licensed in a Canadian province who can demonstrate substantively equivalent licensing standards in the administration of local anesthetic may receive a temporary endorsement to administer local anesthesia, and a person licensed in a Canadian province who can demonstrate substantively equivalent licensing standards in restorative procedures may receive a temporary endorsement for restorative procedures.</p>	<p>This law amends language to allow graduates with a master's degree in a social work program accredited by the Canadian Association of Schools of Social Work to qualify for licensure or certification as a clinical social worker, certified social worker, and social service worker, and those holding a bachelor's degree in a social work program accredited by the Canadian Association of Schools of Social Work to qualify as a social worker intern.</p>

Wyoming	Practice of Law	H 214	This law removes language requiring an applicant to be a U.S. citizen to be admitted to the bar.
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Source: National Conference of State Legislatures, 2015) Retrieved from:  
<http://www.ncsl.org/research/immigration/report-on-2015-state-immigration-laws.aspx>



APPENDIX G

2016 Legislation Related to Occupational Licensing of Foreign-Educated Immigrants

State	Subject	Bill Number	Summary
Florida	Physician Assistants	H 375	This law amends physician assistance licensure, deleting provisions related to translated tests and demonstration of English proficiency.
Minnesota	Licensing Provisions	H 3142	This health law includes licensing provisions. In order to receive a medical faculty, license the applicant must present evidence satisfactory to the board of the completion of two years of graduate, clinical medical training in a program located in the United States, its territories, or Canada and accredited by a national accrediting approved by the board. These requirements do not apply to permanent immigrants admitted to the United States as a person of exceptional ability in the sciences before October 1, 1991, and to applicants holding a valid license to practice medicine in another country and issued a permanent immigrant visa after October 1, 1991, as a person of extraordinary ability in the field of science or as an outstanding professor or researcher, or a temporary nonimmigrant visa or status as a person of extraordinary ability in the field of science.

Nebraska	Professional or Commercial Licenses	<p data-bbox="542 621 570 688">L 947</p> <p data-bbox="630 226 1458 688">The Legislature finds that it is in the best interest of the State of Nebraska to make full use of the skills and talents in the state by ensuring that a person who is work-authorized can obtain a professional or commercial license and practice his or her profession. A person who submits an unexpired employment authorization document issued by the United States Department of Homeland Security (DHS), and documentation issued by the DHS, the United States Citizenship and Immigration Services, or any other federal agency, demonstrating that such person is described in section 202(c)(2)(B)(i) through (ix) of the federal REAL ID Act of 2005, Public Law 109-13, has demonstrated lawful presence and is eligible to obtain such license. Such license shall be valid only for the period of time during which such person's employment authorization document is valid. Nothing in this subsection shall be construed to grant eligibility for any public benefits other than obtaining a professional or commercial license.</p>
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*Source: National Conference of State Legislatures, 2016) Retrieved from:  
<http://www.ncsl.org/research/immigration/report-on-2016-state-immigration-laws-january-june.aspx>*

APPENDIX H

2017 Legislation Related to Occupational Licensing of Foreign Educated Immigrants

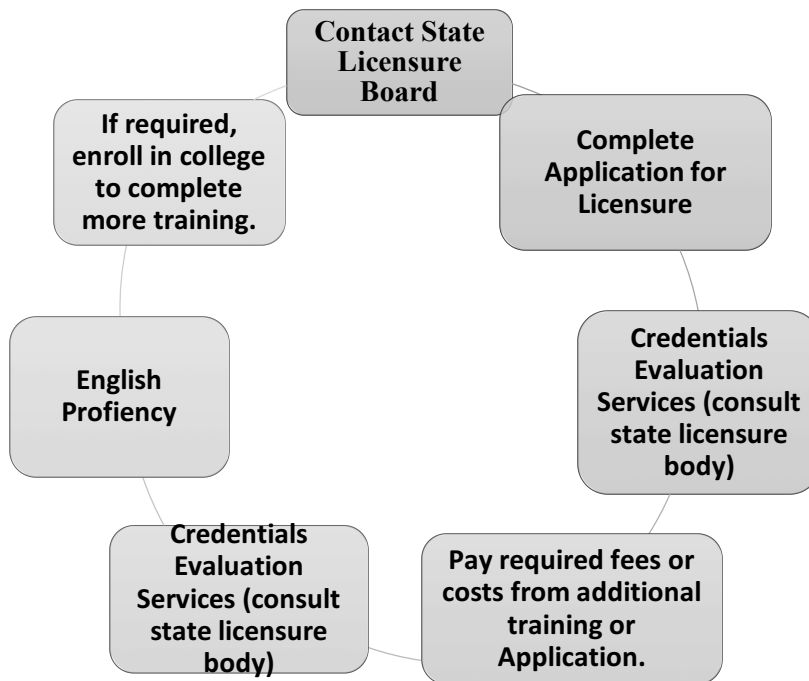
	State	Subject	Bill Number	Enacted/ Pending	Summary
Massachusetts	Massachusetts	Licensure of Foreign Educated Physical Therapists	H 305	Enacted	This law provides for the licensure of foreign graduates as physical therapists.
	California	Taskforce for Foreign Trained Professionals	A 827	Pending	This bill would require the Department of Consumer Affairs to create a task force to study and write a report of its findings and recommendations regarding the licensing and workforce integration of foreign-trained professionals. The bill would require the task force to submit the report to the legislature no later than January 1, 2019.
Massachusetts	Massachusetts		H 3248	Pending	This bill would establish a special commission, including leaders of executive branch agencies, the state legislature, and licensing boards in health professions, to study and make recommendations on the licensing of foreign-trained medical professionals with the goal of expanding and improving medical services in rural and underserved areas. The commission is required issue a report containing legislative and regulatory recommendations within one year of the bill's enactment.
Massachusetts	Massachusetts		H 2474	Pending	This bill would establish the position of advanced dental therapist, to provide dental services (including fillings and non-surgical extractions) in underserved areas, under the supervision of a licensed dentist. The dental therapist must have received education that meets the standards of the Commission on Dental Education, and pass a clinical examination approved by the Board of Registration in Dentistry. Such a person would also be registered as a dental hygienist.

Washington		H 1293	Pending	This bill establishes common statewide employment standards, training, and career development for paraeducators who work in the state learning assistance program, the federal disadvantaged program, and English language learner programs.
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*Source: National Conference of State Legislatures, 2017). Retrieved from:  
<http://www.ncsl.org/Portals/1/Documents/immig/2017ImmigrationLawsByState.pdf>*

## APPENDIX I

### General Pathway for Recredentialing in the United States



## APPENDIX J

### Texas State Board of Dental Examiners Licensure Requirements (TSBDE)

<i>(TSBDE) Licensure Requirements for Foreign Dental Graduates:</i>
1. <b>Complete 2 years of training in an American Dental Association (ADA) approved specialty education program.</b> There is a list of specialty residency programs accredited by the (ADA) and the (TSBDE). There are nine recognized specialties: “Endodontics, Periodontics, Oral and Maxillofacial Pathology, Oral and Maxillofacial Surgery, Oral and Maxillofacial Radiology, Orthodontics and Dentofacial Orthopedics, Pediatric Dentistry, Dental Public Health, or Prosthodontics”.
2. Take the Joint Commission of National Dental Examination Part 1 & 2.
3. Take the Jurisprudence Assessment in Texas. The fee is \$54.00. (November 2017)
4. After completing the above steps, a foreign educated dentist can petition the (TSBDE) for approval to take the <b>general dentistry regional clinical examination</b> from an approved provider in Texas.

Source: Texas State Board of Dental Examiners, 2017)

<http://www.tsbde.texas.gov/ForeignEducatedLicensure.html>

## APPENDIX K

### How to Request Approval to Take a Regional Examining Board

<i>To Request Approval to Take a Regional Examining Board:</i>
1. Complete the Regional Examining Board Approval Form and send to the (TSBDE).
2. Submit proof of graduation from dental school. Translate the proof of graduation to English if applicable.
3. Submit proof of graduation from an ADA CODA-accredited two-year specialty training program.
4. Proof of completion of the NBDE Part I and II scores.
5. There is no fee to request permission to take a clinical examination.

*Source: Texas State Board of Dental Examiners, 2017)*  
*<http://www.tsbde.texas.gov/ForeignEducatedLicensure.html>*

## APPENDIX L

### Regional Clinical Examining Boards Recognized by TSBDE

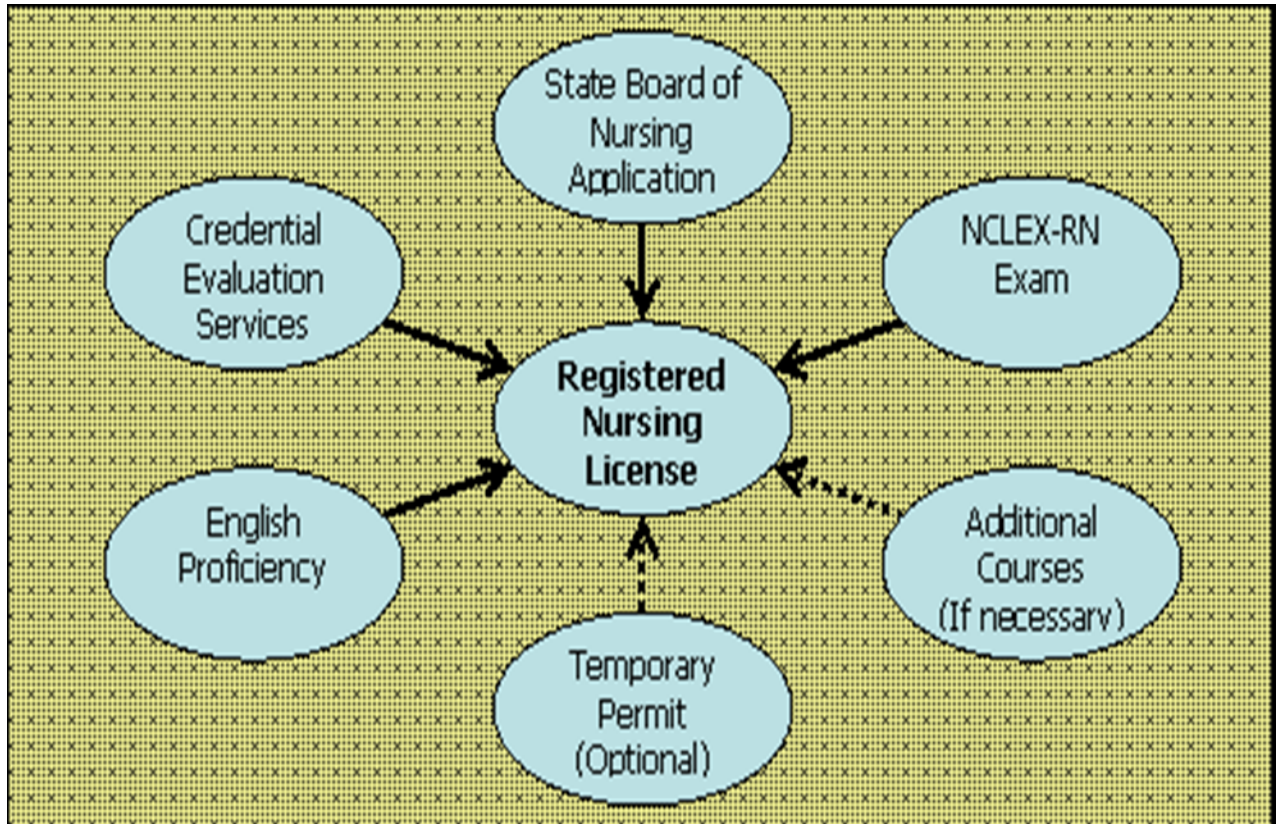
<i>Regional Clinical Examining Boards Contact Information</i>
<p>Western Regional Examining Board (WREB)</p> <p>Website: <a href="http://www.wreb.org">www.wreb.org</a></p> <p>Phone: (602) 944-3315</p> <p>General Dentistry Clinical Examination results must be dated within five years. The perio and prosthodontic components must be taken.</p>
<p>Central Regional Dental Testing Service (CRDTS)</p> <p>Website: <a href="http://www.crdts.org">www.crdts.org</a></p> <p>Phone: (785) 273-0380</p> <p>General Dentistry Clinical Examination results must be dated within five years.</p>
<p>Commission on Dental Competency Assessments (CDCA) (Formerly NERB)</p> <p>Website: <a href="http://www.cdcaexams.org">www.cdcaexams.org</a></p> <p>Phone: (301) 563-3300</p> <p>General Dentistry Clinical Examination results must be dated within five years. Perio component must be taken.</p>
<p>Southern Regional Testing Agency (SRTA)</p> <p>Website: <a href="http://www.srta.org">www.srta.org</a></p> <p>Phone: (757) 318-9082</p> <p>General Dentistry Clinical Examination results must be dated within five years. Perio component must be taken.</p>
<p>Council on Interstate Testing Agencies (CITA)</p> <p>Website: <a href="http://www.citaexam.com">www.citaexam.com</a></p> <p>Phone: (919) 460-7750</p> <p>General Dentistry Clinical Examination results must be dated within five years. Perio component must be taken.</p>

*Source: Texas State Board of Dental Examiners, 2017)*  
<http://www.tsbde.texas.gov/ForeignEducatedLicensure.html>



APPENDIX M

United States General License Steps for Foreign-Educated Nurses (RN)



Source: Office of Refugee Resettlement, 2012

<https://www.acf.hhs.gov/orr/resource/us-registered-nursing-re-licensing-process>

## APPENDIX N

### Texas Board of Nursing (BON) License Requirements for Foreign-Educated Nurses (RN)

<b>Texas (BON) General License Requirements for Foreign Graduates (RN)</b>
<p><b>1. Contact the Texas Board of Nursing to receive current license requirements for foreign educated nurses. Contact information:</b>  <b>Address:</b> 333 Guadalupe, Suite 3-460 Austin, TX 78701-3944  <b>Phone</b> (512) 305-7400  <b>Website:</b> <a href="https://www.bon.texas.gov/licensure_examination.asp">https://www.bon.texas.gov/licensure_examination.asp</a></p>
<p><b>2. Complete an RN Examination Application available online at:</b>  <a href="https://www.bon.texas.gov/pdfs/forms_pdfs/examination_pdfs/RNExam2017.pdf">https://www.bon.texas.gov/pdfs/forms_pdfs/examination_pdfs/RNExam2017.pdf</a>.</p>
<p><b>3. Complete the Nursing Jurisprudence Examination (NJE).</b></p>
<p><b>4. Complete the background check and finger print process.</b></p>
<p><b>5. A credential evaluations service (CES) report from one of the following organizations approved by the Texas (BON):</b></p> <ul style="list-style-type: none"> <li>(A) Commission on Graduates of Foreign Nursing Schools (CGFNS)  <a href="http://www.cgfns.org">www.cgfns.org</a></li> <li>(B) Educational Records Evaluation Service (ERES)  <a href="http://www.eres.com">www.eres.com</a>, <a href="http://www.eres.com/Eval_Nursing.htm">http://www.eres.com/Eval_Nursing.htm</a></li> <li>(C) International Education Research Foundation, Inc. (IERF)  <a href="http://www.ierf.com">www.ierf.com</a></li> </ul>
<p><b>6. Proof of English proficiency if applicable. “If the nursing education program was not conducted in English with English textbooks,” then proof of English proficiency is applicable (Texas Board of Nursing, 2017). Texas (BON) accepts 5 tests for English Proficiency:</b></p> <ul style="list-style-type: none"> <li>(A) Test of English as a Foreign Language (TOEFL) and with the minimum score of 560 paper based or 220 computer based; or</li> <li>(B) Test of English as a Foreign Language (TOEFL) internet-based test (IBT) with a minimum passing score of 83; or</li> <li>(C) Receipt of both the Test of Spoken English (TSE) with a minimum score of 50 and the Test of Written English (TWE) with a minimum score of 4.0; or</li> <li>(D) the International English Language Testing System (IELTS) with a passing standard of an overall score of 6.5 with a minimum of 6.0 in all of the four modules; or</li> <li>(E) the Pearson Test of English Academic (PTE) with a passing standard of an overall score of 55 with a minimum of 50 in each of the four modules.</li> </ul>
<p><b>7. A verification of license (VOL) is required if the foreign applicant has been licensed in another state, territory, providence, or country. The (VOL) should be sent to the</b></p>

**Texas (BON). This document is valid for one year after it has been signed by the licensing authority and should be sent directly to the Texas (BON).**

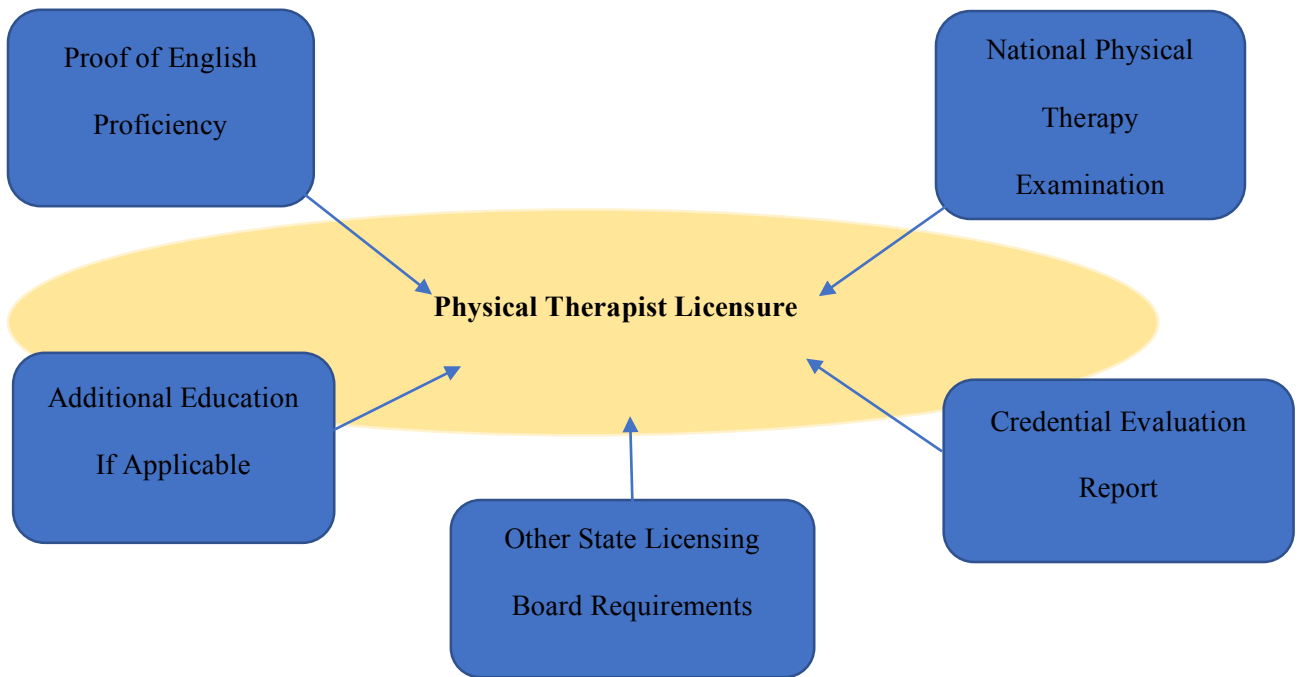
- 8. Take the NCLEX examination within four years of the date of eligibility. The date of eligibility is the date of the foreign educated nurse graduation date or most recent of nursing employment outside of the United States.**

*Source: (Texas Board of Nursing, 2017)*

*[https://www.bon.texas.gov/pdfs/forms\\_pdfs/examination\\_pdfs/RNExam2017.pdf](https://www.bon.texas.gov/pdfs/forms_pdfs/examination_pdfs/RNExam2017.pdf)*

APPENDIX O

U.S. General Licensure Requirements for Foreign-Educated Physical Therapists



*Source: Federation of State Boards of Physical Therapy*

## APPENDIX P

## Texas Board of Physical Therapy Examiners (TBPTE) Credentialing Agencies

(TBPTE) Contact Information for Credentialing Agencies
Foreign Credentialing Commission on Physical Therapy Education (FCCPT) 124 West St, South 3 <sup>rd</sup> Floor Alexandria, VA 22314 <a href="http://www.fccpt.org">www.fccpt.org</a> (703) 684-8406 Educational Credentials Review (\$525) (FCCPT, November 2017) Comprehensive Credentials Review Type 1 (\$810) (FCCPT, November 2017)
International Consultants of Delaware (ICD) PO Box 8629 Philadelphia, PA 19101-8629 <a href="http://www.icdeval.com/evaluations/physical-therapist/">http://www.icdeval.com/evaluations/physical-therapist/</a> (215) 222-8454 \$400-\$500 (ICD, November 2017)
International Credentialing Association (ICA) 10801 Starkey Road, Suite 104 Seminole, FL 33777 <a href="http://www.icaworld.com">www.icaworld.com</a> (725) 549-8555
International Education Research Foundation (IERF) PO Box 3665 Culver City, CA 90231-3665 <a href="http://ierf.org/">http://ierf.org/</a> (310) 258-9451
University of Texas at Austin ATTN: Robert Watkins 405 W 25 <sup>th</sup> St, Austin, TX 78705 (512) 475-7409

Source: <http://www.ptot.texas.gov/page/foreign-trained-credentialing-entities>