

Single Pathway to Licensure

Issue

U.S. medical students have voiced concern over the added burden currently placed on osteopathic students in medical schools who feel the need to participate in both the [Comprehensive Osteopathic Medical Licensing Examination of the United States](#) (COMLEX-USA) and the [United States Medical Licensing Examination](#)[®] (USMLE[®]) in order to be accepted by a residency program.

Background

Current examinations:

To achieve licensure, medical students in allopathic schools (MD) must pass the USMLE[®]. Likewise, students in osteopathic schools (DO) must pass the COMLEX-USA. As described in a recent AMA [issue brief](#), “Discrimination Against DO Students in Medical Residency,” some GME programs accept only USMLE scores from applicants. Further, some program/residency directors, the majority having been trained at allopathic schools, give more weight to a USMLE score over a COMLEX-USA score in the selection process. Thus, many osteopathic students opt to take both exam series. Of note, [research](#) published in the Journal of Graduate Medical Education indicated that a strong association exists between the scores on the USMLE and COMLEX-USA exams.

There is concern for the extra burden this places upon DO students, particularly as it relates to time (test preparation and test-taking), cost (fees for preparation and participation in both exams), and stress (psychological and emotional). According to the [National Board of Medical Examiners](#) (NBME) and [Federation of State Medical Boards](#) (FSMB), the 2023 total cost of exam fees for MD students is \$2,235 ([Step 1 \\$660](#), [Step 2 CK \\$660](#), and [Step 3 \\$915](#)). For DO students, the [National Board of Osteopathic Medical Examiners](#) (NBOME) indicates the cost is \$2,340 ([Level 1 \\$715](#), [Level 2-CE \\$715](#), and [Level 3 \\$910](#)). These totals do not account for preparation costs, rescheduling fees, etc. The [USMLE](#) indicates it takes about 4 days or 32 hours for MD students to complete all three exams (Step 1 is 8 hours; Step 2 is 9 hours; Step 3 is 15 hours over 2 days), as compared to 26 hours for DO students for the COMLEX-USA exams (Level 1 is 9 hours; Level 2-CK is 9 hours; Level 3 is 8 hours), according to the [NBOME](#). For a DO student taking both exams, it would cost the applicant \$4,575 and 58 hours of exam time.

Benefits of single exam:

Moving toward a single pathway to licensure aligns with the AMA's efforts to create bold innovations that transform medical education across the continuum. Allowing all medical students to participate in a single licensure examination series could help mitigate the added costs and pressures for DO students. If appropriate, a separate subject exam within this single licensure examination series for DO students focused on osteopathic-specific skills could preserve the osteopathic profession's independent identity and unique competencies. Given that MD and DO students now participate in the same residency application process under a single accreditation system, having a single exam with an osteopathic component could further aid in streamlining the process. Evolution of the licensure exam may be warranted as medical education has expanded to include health systems science. It may also promote parity in access to GME as it relates to acceptance into residency programs.

Equal consideration of COMLEX-USA and USMLE exam scores for GME applicants

Risks:

This concept is a complex and controversial topic in medical licensure. Organizations charged with oversight of osteopathic education, such as the NBOME, [American Osteopathic Association \(AOA\)](#), and [Commission on Osteopathic College Accreditation \(COCA\)](#), assert that the osteopathic elements and approaches permeate the entire COMLEX-USA exam, thus a separate subject exam focused on osteopathic-specific skills within a single licensure examination series would not be sufficient to assess competencies. Further, a move toward a single exam could conflict with existing COCA accreditation standards. There are also financial and professional conflicts which may make this concept challenging to operationalize without consensus across licensure organizations, including the NBOME, NBME, FSMB, and more.

Potential Strategies

- Examine and promote current research in concordance and predictability of COMLEX-USA and USMLE
- Encourage key stakeholders to study perceptions among program directors on USMLE versus COMLEX-USA applicants
- Encourage key stakeholders to discuss the impact of a transition to a single pathway to licensure
- Encourage key stakeholders to understand and make plans to mitigate any inequities experienced by DO students compared with MD students in the application process
- Promote the unique skills and competencies of DO students and their value in medical education
- Encourage program directors and coordinators to review their answers in GME Track concerning accepted exam results from DO students to ensure accuracy in their response(s) and for display on FREIDA

Moving Forward

At the 2022 Annual Meeting of the AMA House of Delegates, AMA adopted policy [D-275.947](#) which states that “Our AMA work with key stakeholders to encourage the development of a single licensing examination series for all medical students attending a medical school accredited by the Liaison Committee on Medical Education (LCME) or the Commission on Osteopathic College Accreditation (COCA), with a separate, additional osteopathic-specific subject test for osteopathic medical students.”

This policy does not specify which licensing exam series should be developed or reassigned to fulfill the primary objective, nor does it specify the content of the osteopathic-specific subject test. It is broadly written to allow for innovation that meets the needs of all stakeholders.

Additional AMA policy supports equity for DO students with regard to fees as well as acceptance into residency programs, including:

- [H-295.876, Equal Fees for Osteopathic and Allopathic Medical Students](#)
- [D-310.977, National Resident Matching Program Reform](#)
- [H-275.934, Alternatives to the Federation of State Medical Boards Recommendations on Licensure](#)
- [H-275.953, The Grading Policy for Medical Licensure Examinations](#)

AMA Resources

- [Council on Medical Education](#)
- [Policy Finder](#)
- [Accelerating Change in Medical Education initiative](#)
- [Reimagining Residency initiative](#)
- [FREIDA™](#)
- [Health Care Advocacy](#)