

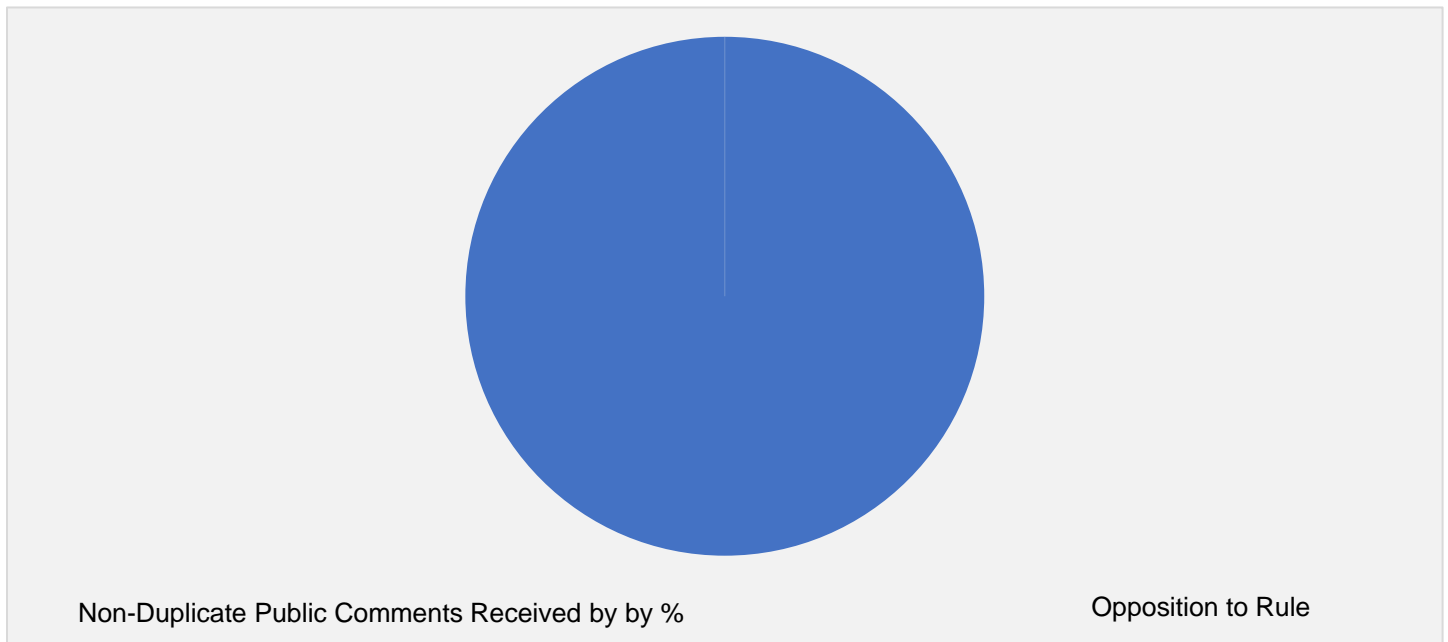
Constituent Support for the FTC's Noncompete Rule



North Dakota | Statewide Impact

On April 23, 2024, the Federal Trade Commission issued a **final rule** to promote competition by **banning noncompetes** nationwide, protecting the fundamental **freedom of workers** to change jobs, **increasing innovation**, and fostering new **business formation**. The FTC estimates that the final rule will result in **8,500 more new businesses** each year, and **\$400-488 billion in increased wages** over the next decade. North Dakota **has banned noncompetes** as a State.

Notice of Proposed Rulemaking: 15 of 15 ND Commenters Support



Support Across Sectors of the North Dakota Economy

*Some comments condensed due to length.

Profession	Comment
	<p>"Perhaps no professional class in the world is as restricted from practicing their craft as physicians. We are legally barred from owning hospitals, Medicare is constantly reducing the allowed value of our work product, and hospital companies grow larger and larger. The Company I work for, Common spirit, operates in 35 states. I have an enormous non-compete clause in my employment contract which leaves unclear whether I wouldn't be barred from practicing in any of those 35 states if I were to leave their employment. It sounds absurd that a noncompete could be written that way, I don't know if it could be legally binding.</p>

"As a physician I recommend noncompete clause be dissolved and no longer standard contract language. **I think it deprives physicians the appropriate**

"Non-compete clauses for **employed physicians** are becoming increasingly common, particularly in the United States. These clauses are agreements that prohibit physicians from working for competitors or starting their own practice within a certain geographic area for a specific period after leaving their current employer. However, non-compete clauses have a negative impact on both patients and competition amongst hospitals. First and foremost, non-compete clauses harm patients. These clauses limit the patients' ability to choose the doctor they prefer and access the care they need. If a patient's physician is bound by a non-compete clause, they may have to travel further or pay higher costs to see another doctor. This can lead to delays in receiving care, which can be particularly harmful in cases where prompt treatment is crucial. Non-compete clauses also limit the continuity of care that patients receive, which can be especially problematic for those with chronic or complex conditions. Secondly, non-compete clauses prevent competition amongst hospitals. Hospitals can use these clauses to limit the number of physicians available to competitors, which can reduce the quality of care and increase costs. Non-compete clauses can also prevent new hospitals from entering the market or expanding their services, which can limit patients' access to care and result in higher costs. This lack of competition can lead to a lack of innovation and progress in the medical field. Furthermore, non-compete clauses can have a negative impact on physicians. These clauses can limit physicians' ability to advance their careers and earn a fair wage. Physicians who are bound by non-compete clauses may be unable to negotiate higher salaries or better working conditions because they have limited options for employment. Additionally, non-compete clauses can discourage physicians from pursuing new research or treatment methods because they fear they will be unable to practice their new skills if they leave their current employer. Fourthly, non-compete clauses can have detrimental effects on physician burnout, suicide, and mental health. These clauses can contribute to a toxic work environment where physicians feel trapped and undervalued. Studies have shown that physician burnout is on the rise, with one of the main contributing factors being a lack of autonomy and control over their work environment. Non-compete clauses can exacerbate this issue by limiting physicians' ability to make career choices and control their own destinies. Furthermore, non-compete clauses can contribute to a sense of isolation and hopelessness among physicians, which can increase the risk of suicide. A study published in the Journal of the American Medical Association found that physicians who reported a lack of career autonomy had a higher risk of suicidal ideation than those who reported greater autonomy. Non-compete clauses can also contribute to anxiety, depression, and other mental health issues among physicians, who may feel trapped in their current employment situation. Therefore, it is crucial to consider the potential impact of non-compete clauses on physician burnout, suicide, and mental health. Employers and policymakers should prioritize the well-being of physicians and work towards creating a supportive and flexible work environment that encourages autonomy and allows physicians to pursue their careers without unnecessary limitations. This would not only benefit the physicians themselves but also lead to better patient care and outcomes. In conclusion, non-compete clauses for employed physicians have significant negative consequences

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	<p>mental health. As such, policymakers and employers should reconsider the use of non-compete clauses in the medical field and work towards developing alternative solutions that prioritize patient care, competition amongst hospitals, and the well-being of physicians. This can include offering fair compensation, providing support and resources for physician burnout and mental health, and promoting a culture of collaboration and innovation."</p>
Shirley	<p>"Non-compete clauses should be illegal - of course! A worker has every right to quit and take another job. An employer should have no say in the life of someone who no longer works for him. I can hardly believe this is legal in the first place, and the sooner it is banned the better."</p>
Wylee	<p>"Yes, please!!!"</p>