1	21 NCAC 32M .1708 is repealed as published in 37:10 NCR 756 as follows:			
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3	21 NCAC 32B	.1708	COVID-19 DRUG PRESERVATION RULE	
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5	History Note:	Autho	ority G.S. 90-5.1(a)(3);	
6		Emerg	gency Adoption Eff. April 6, 2020;	
7		Тетр	orary Adoption Eff. June 26, 2020;	
8		Eff. A	pril 1, 2021;	
9		Repea	aled Eff. June 1, 2023.	
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1 21 NCAC 32M .0107 is amended, with changes, as published in 37:12 NCR 902-203 as follows: 2 3 21 NCAC 32M .0107 **CONTINUING EDUCATION (CE)** 4 (a) In order to maintain nurse practitioner approval to practice, the nurse practitioner shall-maintain certification as a 5 nurse practitioner by a national credentialing body identified in Rule .0101(8) of this Subchapter and earn 50 contact 6 hours of continuing education activity each year, every two years, beginning with the first renewal after initial approval 7 to practice has been granted. A minimum of 20 hours of the required 50 hours must be in the advanced practice nursing 8 population focus of the NP role role. The 20 hours must have for which approval has been granted by the American 9 Nurses Credentialing Center (ANCC) or Accreditation Council on Continuing Medical Education (ACCME), or other 10 by a national credentialing bodies, accredited provider of nursing continuing professional development, or nurse 11 practice-relevant courses in an institution of higher learning. A nurse practitioner who possesses a current national 12 certification by a national credentialing body shall be deemed in compliance with the requirement of Paragraph (a) of 13 this Rule. 14 (b) Prior to prescribing controlled substances as the same are defined in 21 NCAC 32M .0109(b)(2), Every nurse practitioner practitioners who prescribes controlled substances shall have complete completed at least a minimum of 15 one CE hour of the total required continuing education (CE) hours annually consisting of CE designed specifically to 16 17 address within the preceding 12 months on one or more of the following topics: 18 (1) controlled substance Controlled substances prescription practices; 19 (2) prescribing practices and Prescribing controlled substance substances prescribing for chronic pain 20 management. management; 21 (3) <u>CE that includes recognizing Recognizing</u> signs of the controlled substance abuse or misuse of 22 controlled substances, misuse; or 23 (4) non-opioid Non-opioid treatment options shall qualify for the purposes of this Rule. as an alternative to controlled substances. 24 25 (c) A nurse practitioner who possesses a current national certification by a national credentialing body shall be 26 deemed in compliance with the requirement of Paragraph (a) of this Rule. 27 (e)(d) Documentation of all continuing education CE completed within the previous five years shall be maintained by the nurse practitioner for the previous five calendar years and made available upon request to either Board. 28 29 30 History Note: Authority G.S. 90-5.1(a)(3); 90-8.2; 90-18(c)(14); S.L. 2015-241, s. 12F; 31 Eff. January 1, 1996; 32 Amended Eff. August 1, 2004; May 1, 1999; 33 Recodified from Rule .0106 Eff. August 1, 2004; 34 Amended Eff. December 1, 2009; April 1, 2008; 35 Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1, 2016: 36 37 Amended Eff. May 1, 2023; June 1, 2021; March 1, 2017; June 1, 2023.

1	21 NCAC 32M .0119 is repealed as published in 37:10 NCR 756 as follows:			
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3	21 NCAC 32M	.0119	COVID-19 DRUG PRESERVATION RULE	
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5	History Note:	Autho	rity G.S. 90-5.1(a)(3); 90-18.2;	
6		Emerg	gency Adoption Eff. April 21, 2020;	
7		Тетро	orary Adoption Eff. June 26, 2020;	
8		Eff. Ap	pril 1, 2021;	
9		Repea	led Eff. June 1, 2023.	
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