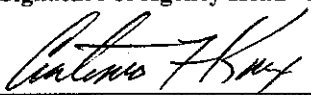
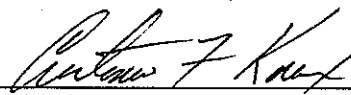


SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina Department of Commerce Credit Union Division	
2. Rule citation & name (name not required for repeal): 04 NCAC 06C .0203 Field of Membership	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 1, 2014 Link to Agency notice: www.nccud.org Hearing on: None Adoption by agency on: December 10, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input checked="" type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input type="checkbox"/> No fiscal note required
<p style="text-align: center;">9. REASON FOR ACTION</p> 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Proposed the amendment to eliminate reference to outdated material, and to clarify that the Division follows the laws of NC G.S. 54-109.1 - 109.7 and 04 NCAC 06C 0200-0204 to charter new credit unions.	
10. Rule-making Coordinator: Antonio F. Knox Address: 205 W Millbrook Rd Raleigh, NC 27609 Phone: 919-571-4888 E-Mail: tknox@nccud.org Agency Contact, if any: Same Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center;">  <hr style="width: 100%;"/> </div> <p><small>*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.</small></p> Typed Name: Antonio F. Knox Title: Deputy Administrator - Rule-making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

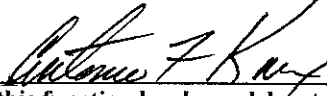
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 2014 DEC 19 PM 12:04
 OFFICE OF
 ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina Department of Commerce Credit Union Division	
2. Rule citation & name (name not required for repeal): 04 NCAC 06C .0205 Loans to Credit Union Officials	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 1, 2014 Link to Agency notice: www.nccud.org Hearing on: None Adoption by agency on: December 10, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input checked="" type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The amendment is being proposed in order to clarify the inclusion of outside attorneys and outside accountants to ensure that there is no conflict of interest.	
10. Rule-making Coordinator: Antonio F. Knox Address: 205 W Millbrook Rd, Raleigh NC 27609 Phone: 919-571-4888 E-Mail: tknox@nccud.org Agency Contact, if any: Same Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator:  <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Antonio F. Knox Title: Deputy Administrator - Rules Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

 FILED
 2014 DEC 19 PM 12:04
 OFFICE OF
 ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina Department of Commerce Credit Union Division	
2. Rule citation & name (name not required for repeal): 04 NCAC 06C .0301 General Provisions	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 1, 2014 Link to Agency notice: www.nccud.org Hearing on: none Adoption by agency on: December 10, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input checked="" type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The amendments are being proposed to eliminate the reference to the Handbook and Accounting Manual for State Chartered Credit Unions. Also there are words being updated to current terms.	
10. Rule-making Coordinator: Antonio F. Knox Address: 205 W Millbrook Rd Raleigh NC 27609 Phone: 919-571-4888 E-Mail: tknox@nccud.org Agency Contact, if any: Same Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator:  <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Antonio F. Knox Title: Deputy Administrator - Rule - Making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

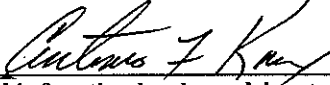
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 OFFICE OF
 ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina Department of Commerce Credit Union Division	
2. Rule citation & name (name not required for repeal): 04 NCAC 06C .0302 Procedures	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 1, 2014 Link to Agency notice: www.nccud.org Hearing on: none Adoption by agency on: December 10, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input checked="" type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Amendments are proposed to update the terms and modernize the names of equipment.	
10. Rule-making Coordinator: Antonio F. Knox Address: 205 W Millbrook Rd Raleigh NC 27609 Phone: 919-571-4888 E-Mail: tknox@nccud.org Agency Contact, if any: Same Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 10px;"> <hr style="border: 0; border-top: 1px solid black; width: 100%;"/> </div> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Antonio F. Knox Title: Deputy Administrator - Rule -making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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 OFFICE OF
 ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina Credit Union Division	
2. Rule citation & name (name not required for repeal): 04 NCAC 06C .0303 Depreciation and Amortization	
3. Action: <input type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input checked="" type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 1, 2014 Link to Agency notice: www.nccud.org Hearing on: none Adoption by agency on: December 10, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input checked="" type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The proposal is to Repeal this rule, it is no longer used by credit unions.	
10. Rule-making Coordinator: Antonio F. Knox Address: 205 W Millbrook Rd Raleigh, NC 27609 Phone: 919-571-4888 E-Mail: tknox@nccud.org Agency Contact, if any: Same Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Antonio F. Knox Title: Deputy Administrator - Rule - making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

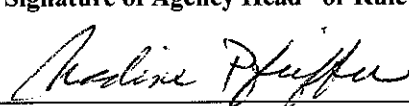
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 OFFICE OF
 ADMIN HEARINGS

Save

Reset

12/15/14

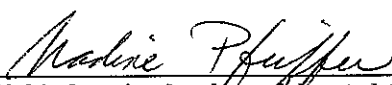
ORIGINAL**SUBMISSION FOR PERMANENT RULE**

1. Rule-Making Agency: DHHS, Secretary	
2. Rule citation & name (name not required for repeal): 10A NCAC 14L .0101 Definitions	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: 10/01/2014 Link to Agency notice: http://www.ncdhhs.gov/dhsr/ruleactions.html Hearing on: 11/18/14 Adoption by agency on: 12/05/14 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION	
9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: S.L. 2013-44, G.S. 131E-78.5 <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div>	
9B. Explain: Under authority of Gen. Stat. § 143B-10, the DHHS has delegated the promulgation of these rules to the DHSR. The rule reflects the definitions used to implement the requirement of S.L. 2013-44, Gen. Stat. 131E-78.5, in creating a process which hospitals licensed by the DHSR can submit documentation of stroke center certification by a national accrediting authority to the Office of Emergency Medical Services (OEMS) to qualify for stroke center designation by the Department. Once designation is granted, the OEMS will reflect the hospital's information on the Department's Web site and update this list of designated hospitals in June of each calendar year. The Department has a list of recognized national accreditation organizations that will be used to qualify the hospital(s) for stroke center designation, although confirmation of additional accrediting organizations may be deemed acceptable if the certification standards are determined by the Department to meet those identified in rule.	
10. Rule-making Coordinator: Nadine Pfeiffer Address: 2701 Mail Service Center Raleigh, NC 27699-2701 Phone: 919-855-3811 E-Mail: Nadine.pfeiffer@dhhs.nc.gov Agency Contact, if any: Regina Godette-Crawford, Chief Phone: 919-855-3950 E-Mail: Regina.godette@dhhs.nc.gov	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Nadine Pfeiffer Title: Rule-making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

ORIGINAL

12/15/14


1. Rule-Making Agency: DHHS, Secretary	
2. Rule citation & name (name not required for repeal): 10A NCAC 14L .0201 STROKE CENTER DESIGNATION REQUIREMENTS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: 10/01/2014 Link to Agency notice: http://www.ncdhhs.gov/dhsr/ruleactions.html Hearing on: 11/18/14 Adoption by agency on: 12/05/14 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: S.L. 2013-44, G.S. 131E-78.5 <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> <p>9B. Explain: Under authority of Gen. Stat. § 143B-10, the DHHS has delegated the promulgation of these rules to DHSR. The rule reflects the requirements to be used for the process in implementing the requirement of S.L. 2013-44, Gen. Stat. 131E-78.5, which hospitals licensed by DHSR can submit documentation of stroke center certification by a national accrediting authority to the Office of Emergency Medical Services (OEMS) to qualify for stroke center designation by the Department. Once designation is granted, the OEMS will reflect the hospital's information on the Department's Web site and update this list of designated hospitals in June of each calendar year. The Department has a list of recognized national accreditation organizations that will be used to qualify the hospital(s) for stroke center designation, although confirmation of additional accrediting organizations may be deemed acceptable if the certification standards are determined by the Department to meet those identified in this rule.</p>	
10. Rule-making Coordinator: Nadine Pfeiffer Address: 2701 Mail Service Center Raleigh, NC 27699-2701 Phone: 919-855-3811 E-Mail: Nadine.pfeiffer@dhhs.nc.gov Agency Contact, if any: Regina Godette-Crawford, Chief Phone: 919-855-3950 E-Mail: Regina.godette@dhhs.nc.gov	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center;">  <hr style="width: 100%;"/> </div> <p><small>*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.</small></p> Typed Name: Nadine Pfeiffer Title: Rule-making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

FILED

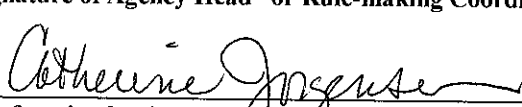
2014 DEC 16 AM 8:31

OFFICE OF
ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: Department of State Treasurer	
2. Rule citation & name (name not required for repeal): 20 NCAC 01G .0101 – 20 NCAC 01G .0109, 20 NCAC .0201 – 20 NCAC .0204, 20 NCAC 01G .0207, 20 NCAC 01G .0301 – 20 NCAC 01G .0307, 20 NCAC 01G .0401 – 20 NCAC 01G .0408, 20 NCAC 01G .0409, 20 NCAC 01G .0501 – 20 NCAC 01G .0507, 20 NCAC 01G .0508, 20 NCAC 01H .0101 – 20 NCAC 01H .0104, 20 NCAC 01H .0201 – 20 NCAC 01H .0205, 20 NCAC 01H .0301 – 20 NCAC 01H .0307, 20 NCAC 01H .0401 – 20 NCAC 01H .0402	
3. Action: <input type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input checked="" type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: October 15, 2014 Link to Agency notice: https://www.nctreasurer.com/inside-the-department/OpenGovernment/proposed-rules/Pages/default.aspx Hearing on: November 6, 2014 Adoption by agency on: December 18, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 48%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The above-cited rules are unnecessary, unduly burdensome, and/or inconsistent with the principles and requirements of N.C. Gen. Stat. §150B-19.1 and do not reflect the current state of investment management employed by the Department of State Treasurer.	
10. Rule-making Coordinator: Sandra Johnson Address: 325N. Salisbury Street, Raleigh, NC 27603 Phone: (919) 807-4954 E-Mail: Sandra.Johnson@nctreasurer.com Agency Contact, if any: Ana-Laura Diaz Phone: (919) 807-3027 E-Mail: Ana-Laura.Diaz@nctreasurer.com	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 20px;">  <hr/> </div> <p><small>*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.</small></p> Typed Name: Sandra Johnson Title: Rule-making Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: North Carolina State Hearing Aid Dealers and Fitters Board	
2. Rule citation & name (name not required for repeal): 21 NCAC 22F .0105 PASSING EXAMINATION	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	4. Exemption. Rule exempt from RRC review according to (cite session law or general statute):
5. Agency obtained G.S. 150B-19.1 certification: <input type="checkbox"/> OSBM certified on: <input type="checkbox"/> RRC certified on: <input checked="" type="checkbox"/> Not Required	
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: AUGUST 15, 2014 Link to Agency notice: http://www.nchalb.org/regulatory/rulechange.php Hearing on: OCTOBER 2, 2014 Adoption by agency on: December 22, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Fee. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected Date submitted to OSBM: <input type="checkbox"/> Substantial economic impact (≥\$500,000) <input type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted in last General Assembly session Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The purpose of the proposed rule changes is to provide clarity to how long results on individual parts of the exam are valid.	
10. Rule-making Coordinator: Catherine Jorgensen Address: P O BOX 97833, Raleigh, NC 27624-7833 Phone: 919-834-3661 E-Mail: info@nchalb.org Agency Contact, if any: Catherine Jorgensen Phone: 919-834-3661 E-Mail: info@nchalb.org	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center;">  _____ *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Catherine Jorgensen Title: Rulemaking Coordinator </div>
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

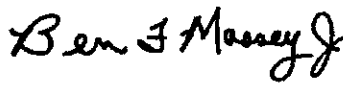
1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48A .0103 MEMBERSHIP OF BOARD	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION	
9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div>	
9B. Explain: The amendments in Paragraph (b) require nominees for the physical therapist and physical therapist assistant positions to attest that they meet the qualifications specified in G.S. 90-270.25. An amendment in Paragraph (c) clarifies that each physical therapist and physical therapist assistant shall be employed in a physical therapy related position for at least 1,000 hours annually.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48B .0104 EXEMPTIONS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: This rule requires physical therapists or physical therapist assistants who would like to practice in NC due to a disaster or emergency in NC or would like to obtain a license in NC secondary to a disaster or emergency in their home state complete an application for exemption that has been approved by the Board.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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ADMIN HEARINGS

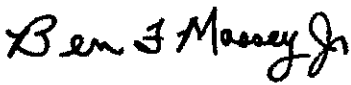
SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48C .0102 RESPONSIBILITIES	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The amendment in Paragraph (k) clarifies that the current rule only applies to patients who are being treated by a physical therapist assistant or physical therapy aide. Paragraph (n) clarifies that a physical therapist must provide copies of a patient's treatment records upon request by the patient or the patient's designee. Other amendments in the rule are technical and grammatical.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 10px;">  </div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	


SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48C .0104 DRY NEEDLING	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The amendments in Paragraph (a) identifies terms that are used interchangeably with dry needling and defines the technique of dry needling; Paragraph (b) states educational requirements for a physical therapist to practice dry needling in NC; Paragraph (c) clarifies that dry needling cannot be performed by a physical therapist assistant or physical therapy aide; Paragraph(d) requires the Board to maintain a list of programs that have been approved to provide dry needling education.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48D .0109 RETAKING EXAMINATION	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION	
9A. What prompted this action? Check all that apply: <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: <input type="checkbox"/> Legislation enacted by the General Assembly <input type="checkbox"/> Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other:	
9B. Explain: Amendments in Paragraph (c) clarifies that there is a limit of the number of times an applicant is allowed to take the exam and that number will be determined by the administrator of the exam (Federation of State Boards of Physical Therapy). Other amendments are technical and provide clarification of the rule.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48E .0110 FOREIGN-TRAINED PHYSICAL THERAPIST APPLICANT BY EXAMINATION	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: <input type="checkbox"/> Legislation enacted by the General Assembly <input type="checkbox"/> Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: 9B. Explain: Amendments in Paragraph (c) clarifies the requirements that a Foreign Trained Physical Therapist (FTPT) applicant by examination must meet the standards of the Federation's current Coursework Tool (CWT). Paragraph (e) clarifies that the FTPT applicant must meet the English language proficiency requirements as demonstrated by a passing score on the Test of English as a Foreign Language (TOEFL) as defined by the Federation. Other amendments are technical for clarification and/or grammatical.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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 ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48E .0111 FOREIGN-TRAINED PHYSICAL THERAPIST APPLICANT BY ENDORSEMENT	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of this rule clarifies the requirements for a FTPT applicant by endorsement of licensure in another state. The requirements are essentially the same requirements that were previously adopted in 1985 for the Foreign Trained Physical Therapist.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

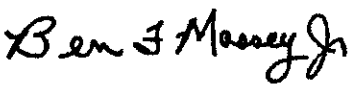
SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48E .0112 FOREIGN-TRAINED PHYSICAL THERAPIST ASSISTANT APPLICANT	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Amendments in Paragraph (a) defines a physical therapist assistant program located outside of the United States. Paragraph (b) will clarify that all documents must be provided in English or accompanied by an English translation. Paragraph (c) clarifies the education requirements of a Foreign Trained Physical Therapist Assistant must be substantially equivalent to the education of a Physical Therapy Assistant graduate from an accredited program in the United States. Paragraph (d) requires the applicant's education to be evaluated by a credentialing agency approved by the Board and Paragraph (e) clarifies the English language requirements.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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ORIGINAL
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SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48E .0113 CRIMINAL HISTORY	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: 9B. Explain: Paragraph (a) clarifies that an applicant shall be required to consent to a criminal history record check and will be responsible for paying for it and Paragraph (b) authorizes an appeals process if an applicant is denied licensure for failing to consent to a criminal history check.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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ADMIN HEARINGS

SUBMISSION FOR PERMANENT RULE

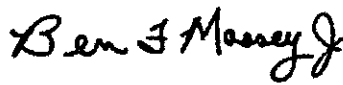
1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0109 CONTINUING COMPETENCE ACTIVITIES	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Amendments to sub-paragraph (a)(2) clarifies that, for a graduate course, one-semester hour earns fifteen (15) points and that a transcript from the academic institution is required as proof; sub-paragraph (a)(5) allows for study groups to meet electronically; (g)(1) defines full-time clinical practice as 1,750 hours, (g)(2) defines part-time clinical practice at least 1,000 hours, but less than 1,750 hours and (g)(3) clarifies that a licensee is awarded 1 point for clinical practice of at least 200 hours, but less than 1,000 hours. Other amendments are technical for clarification and/or grammatical.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin: 10px 0;">  </div> <hr/> <small>*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.</small> Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0110 EVIDENCE OF COMPLIANCE	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Paragraph (f) clarifies that the Board may also notify the licensee by electronic communication and that certified mail is not required. Other amendments are technical for clarification and/or grammatical.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

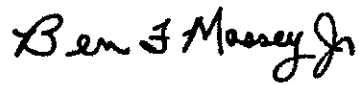
SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0504 COMPLAINTS AND INVESTIGATIONS	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Amendments to Paragraph (e) clarifies that materials obtained by the Board during the course of an investigation are considered confidential; however, copies may be provided to the licensee's attorney with conditions.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 10px;">  </div> <hr style="width: 80%; margin: 10px auto;"/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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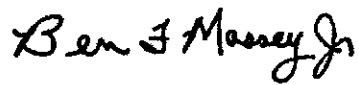
ORIGINAL
12/8/14

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0512 SUPOENAS	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Amendments to Paragraph (a) expands the subpoena power of the Board to include investigations and Board proceedings. Additionally, it gives the Board the discretion to deny the issuance of any subpoena that could be construed as harassment or intimidation of a witness and (b) Proposed rule lists what must be contained within a subpoena. Paragraph (c) clarifies that subpoenas for production of documents must provide a particularized description. Other amendments are technical and provide clarification of the rule.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 10px;">  </div> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

ORIGINAL
12/8/14

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0601 PROHIBITED ACTIONS	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other:	
9B. Explain: Amendments to sub-paragraph (a)(26) clarifies that it also includes the episode of care. Other amendments are technical and provide clarification of the rule.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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SUBMISSION FOR PERMANENT RULE

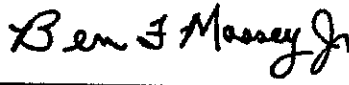
1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0701 DEFINITIONS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of this rule defines the following: Paragraph (a) defines "impairment"; Paragraph (b) defines "participant"; and Paragraph (c) defines "program".	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0702 PROGRAMS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of Paragraph (a) clarifies that a licensee must be referred by the Board before he/she may participate in a Program; Paragraph (b) provides authority for the Board to contract with other health care licensing Boards to provide Programs; and Paragraph (c) clarifies that a licensee who is enrolled in the Program must comply with its requirements and may be subject to disciplinary for failing to do so.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0703 INFORMATION OF IMPAIRMENT	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (\geq \$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
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10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator:  *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
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1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0704 CONFIDENTIALITY	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of this rule sets the standards for confidentiality.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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ORIGINAL
12/8/14

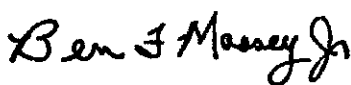
SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0705 REPORTS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact ($\geq \$1,000,000$) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of this rule sets the standards for when reports are to be given to the Board when a licensee is investigated.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; font-family: cursive; font-size: 1.2em;">Ben F Massey Jr</div> <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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ADMIN HEARINGS

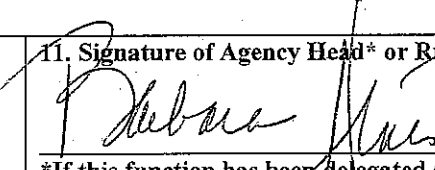
SUBMISSION FOR PERMANENT RULE

01611111
12/8/14

1. Rule-Making Agency: NC BOARD OF PHYSICAL THERAPY EXAMINERS	
2. Rule citation & name (name not required for repeal): 21NCAC 48G .0706 PROGRAM STANDARDS	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: July 15, 2014 Link to Agency notice: http://www.ncptboard.org Hearing on: September 11, 2014 Adoption by agency on: December 4, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input checked="" type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: The adoption of this rule sets the program standards for when referrals of licensees are received from the Board.	
10. Rule-making Coordinator: Ben F. Massey, Jr. Address: 18 West Colony Place, Suite 140 Durham, NC 27705 Phone: 919-490-6393 / 800-800-8982 E-Mail: benmassey@ncptboard.org Agency Contact, if any: Same as above Phone: Same as above E-Mail: Same as above	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center; margin-top: 20px;">  </div> <p style="font-size: small;">*If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.</p> Typed Name: Ben F. Massey, Jr., Executive Director Title: Rulemaking Coordinator
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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SUBMISSION FOR PERMANENT RULE

1. Rule-Making Agency: NC State Board of Refrigeration Examiners	
2. Rule citation & name (name not required for repeal): 21 NCAC 12 .0214 Licensure for Military-Trained Applicant; Licensure for Military Spouse	
3. Action: <input checked="" type="checkbox"/> ADOPTION <input type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	4. Exemption. Rule exempt from RRC review according to (cite session law or general statute):
5. Agency obtained G.S. 150B-19.1 certification: <input type="checkbox"/> OSBM certified on: <input type="checkbox"/> RRC certified on: <input checked="" type="checkbox"/> Not Required	
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: 10/15/14 Link to Agency notice: www.refrigerationboard.org Hearing on: 10/31/14 Adoption by agency on: 12/17/14 <input type="checkbox"/> Notice not required under G.S.: Adoption by agency on:	
7. Fee. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION	
9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input type="checkbox"/> Legislation enacted in last General Assembly session Cite Session Law: <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div>	
9B. Explain: This rule is adopted to comply with G.S. 93B-15.1 in setting out the procedure and requirements for application for licensure by a military trained applicant or military spouse.	
10. Rule-making Coordinator: Barbara Hines Address: 889 US 70 Hwy West, Garner, NC 27529 Phone: 919-779-4711 E-Mail: refrigeration14@gmail.com Agency Contact, if any: Barbara Hines Phone: 919-779-4711 E-Mail: refrigeratoin14@gmail.com	11. Signature of Agency Head* or Rule-making Coordinator:  <hr/> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Barbara Hines Title: Executive Director
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC Extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

SUBMISSION FOR PERMANENT RULE

Original
12/01/14

1. Rule-Making Agency: Office of Administrative Hearings	
2. Rule citation & name (name not required for repeal): 26 NCAC 03 .0118 CONTINUANCES	
3. Action: <input type="checkbox"/> ADOPTION <input checked="" type="checkbox"/> AMENDMENT <input type="checkbox"/> REPEAL	
4. Rule exempt from RRC review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No	5. Rule automatically subject to legislative review? <input type="checkbox"/> Yes. Cite authority: <input checked="" type="checkbox"/> No
6. Notice for Proposed Rule: <input checked="" type="checkbox"/> Notice Required Notice of Text published on: September 15, 2014 Link to Agency notice: http://www.ncoah.com/hearings/ Hearing on: November 13, 2014 Adoption by Agency on: December 1, 2014 <input type="checkbox"/> Notice not required under G.S.: Adoption by Agency on:	
7. Rule establishes or increases a fee? (See G.S. 12-3.1) <input type="checkbox"/> Yes Agency submitted request for consultation on: Consultation not required. Cite authority: <input checked="" type="checkbox"/> No	8. Fiscal impact (check all that apply): <input type="checkbox"/> State funds affected <input type="checkbox"/> Environmental permitting of DOT affected and analysis submitted to Board of Transportation <input type="checkbox"/> Local funds affected <input type="checkbox"/> Substantial economic impact (≥\$1,000,000) <input type="checkbox"/> Approved by OSBM <input checked="" type="checkbox"/> No fiscal note required
9. REASON FOR ACTION 9A. What prompted this action? Check all that apply: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Agency <input type="checkbox"/> Court order / cite: <input type="checkbox"/> Federal statute / cite: <input type="checkbox"/> Federal regulation / cite: </div> <div style="width: 45%;"> <input checked="" type="checkbox"/> Legislation enacted by the General Assembly Cite Session Law: SL 2013-382, s. 6.1 <input type="checkbox"/> Petition for rule-making <input type="checkbox"/> Other: </div> </div> 9B. Explain: Pursuant to SL 2013-382, s.6.1, OAH must hear and issue a decision on personnel cases within 180 days from the commencement of the contested case. The 180 days can only be exceeded if there is "extraordinary cause" to do so. Consequently, this term clearly needs to be defined for the presiding administrative law judge and parties involved.	
10. Rule-making Coordinator: Molly Masich Address: 1711 New Hope Church Road, Raleigh, NC 27609 Phone: 919-431-3071 E-Mail: molly.masich@oah.nc.gov Agency Contact, if any: Phone: E-Mail:	11. Signature of Agency Head* or Rule-making Coordinator: <div style="text-align: center;"> 12/1/2014 </div> *If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form. Typed Name: Julian Mann, III Title: Director/CALJ
RRC AND OAH USE ONLY	
Action taken: <input type="checkbox"/> RRC extended period of review: <input type="checkbox"/> RRC determined substantial changes: <input type="checkbox"/> Withdrawn by agency <input type="checkbox"/> Subject to Legislative Review <input type="checkbox"/> Other:	

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