1 21 NCAC 32B .1370 is amended, <u>with changes</u>, as published in 30:06 NCR pages 639-643 as follows:

3	21 NCAC 32B.	1370 REENTRY TO ACTIVE PRACTICE		
4	(a) A <u>An applic</u>	cant for licensure physician or physician assistant applicant ("applicant" or "licensee") who has not		
5	actively practiced or who has not maintained continued competency competency, as determined by the Board, for the			
6	two-year period	two-year period immediately preceding the filing of an application for a license from the Board shall complete a reentry		
7	agreement as a c	ondition of licensure.		
8	(b) The applican	t shall identify a mentoring physician. The first component of a reentry agreement involves [<mark>formulating</mark>		
9	<mark>a reentry plan tha</mark>	tt assesses] assessing the applicant's current strengths and weaknesses in the intended area(s) of practice.		
10	The process may include testing and evaluation by colleagues, educators or others.			
11	(c) The applican	t shall propose a reentry plan containing the components outlined in Paragraphs (g) and (h) of this Rule		
12	to the Board. Th	e Board shall review the proposed reenter plan and interview the applicant. The second component of		
13	the reentry [plan] agreement is education. Education shall address the applicant's area(s) of needed improvement and		
14	consist of a reen	try period of retraining and education upon terms [as the Board may decide.] based on the factors set		
15	forth in Paragrap	oh (d) of this Rule.		
16	(d) Factors that	may affect the length and scope of the reentry plan include:		
17	(1)	The applicant's amount of time out of practice;		
18	(2)	The applicant's prior intensity of practice;		
19	(3)	The reason for the interruption in practice;		
20	(4)	The applicant's activities during the interruption in practice, including the amount of practice-relevant		
21		continuing medical education;		
22	(5)	The applicant's previous and intended area(s) of practice;		
23	(6)	The skills required of the intended area(s) of practice;		
24	(7)	The amount of change in the intended area(s) of practice over during the time the applicant has been		
25		out of continuous practice;		
26	(8)	The applicant's number of years of graduate medical education;		
27	(9)	The number of years since completion of the applicant completed graduate medical education; and		
28	(10)	As applicable, the date of the most recent ABMS, AOA or equivalent specialty board, or National		
29		Commission on Certification of Physician Assistant certification or recertification.		
30	(e) If the Board	approves an applicant's reentry plan, it plan for reentry, the approved plan shall be incorporated by		
31	reference into a reentry agreement and executed by the applicant, the Board Board, and the mentoring physician. any			
32	applicable Board agents assisting with the reentry [plan.] agreement.			
33	(f) After the reentry agreement has been executed, and the applicant has completed all other requirements for licensure			
34	the applicant shall receive a restricted License. The licensee may not practice outside of the scope of the reentry			
35	agreement and its referenced reentry plan during the reentry period.			
36	(g) The first component of a reentry plan is an assessment of the applicant's current strengths and weaknesses in his or			
37	her intended are	a of practice. The process used to perform the assessment shall be described by the applicant and		

1	confirmed by the mentoring physician. The process may include self reflection, self assessment, and testing and				
2	evaluation by colleagues, educators or others. The applicant and mentoring physician shall evaluate and describe				
3	applicant's strengths and areas of needed improvement in regard to the core competencies. The assessment shall continu				
4	throughout the reentry period as the licensee and the mentoring physician practice together.				
5	(h) The second component of the reentry plan is education. Education shall address the licensee's areas of needed				
6	improvement. Education shall consist of:				
7	(1) a reentry period of retraining and education under the guidance of a mentoring physician, upon terms				
8	as the Board may decide, or				
9	(2) a reentry period of retraining and education under the guidance of a mentoring physician consisting of				
10	the following:				
11	(A) Phase I The observation phase. During the observation phase, the licensee will not				
12	practice, but will observe the mentoring physician in practice.				
13	(B) Phase II – Direct supervision phase. During the direct supervision phase, the licensee shall				
14	practice under the direct supervision of the mentoring physician. Guided by the core				
15	competencies, the mentoring physician shall reassess the licensee's progress in addressing				
16	identified areas of needed improvement.				
17	(C) Phase III Indirect supervision phase. During the indirect supervision phase, the licensee				
18	shall continue to practice with supervision of the mentoring physician. Guided by the core				
19	competencies, and using review of patient charts and regular meetings, the mentoring				
20	physician shall reassess the licensee's progress in addressing the areas of needed				
21	improvement.				
22	(D) No later than 30 days after the end of phase I and II, the mentoring physician shall send a				
23	report to the Board regarding the licensee's level of achievement in each of the core				
24	competencies. At the completion of phase III the mentoring physician shall submit a				
25	summary report to the Board regarding the licensee's level of achievement in each of the core				
26	competencies and affirm the licensee's suitability to resume practice as a physician or to				
27	resume practice as a physician assistant.				
28	(E) If the mentoring physician reassesses the licensee and concludes that the licensee requires an				
29	extended reentry period or if additional areas of needed improvement are identified during				
30	Phases II or III, the Board, the licensee and the mentoring physician shall amend the reentry				
31	agreement.				
32	(i) Under the terms of either reentry periods Subparagraph (h)(1) or (h)(2) of this Rule, the mentoring physician may				
33	terminate his role as the mentoring physician upon written notice to the Board. Such written notice shall state the reasons				
34	for termination. The licensee's approval is not required for the mentoring physician to terminate his role as mentoring				
35	physician. Upon receipt of the notice of termination, the Board shall place the licensee's license on inactive status.				
36	Within six months from the effective date of the mentoring physician's termination, the licensee shall provide a substitute				
37	mentoring physician, who must be approved by the Board in writing, and resume the reentry plan upon such terms as are				

1 acceptable to the Board. In such event, an amended reentry agreement must be executed prior to resumption of the

2 reentry plan. If licensee does not resume the reentry plan as required herein within six months from the effective date of

- 3 the mentoring physician's termination, then the Board shall not return the licensee to active status unless and until
- 4 licensee applies and is approved for reactivation of the license with a new reentry agreement and reentry plan, which
- 5 must be in place before licensee may resume practice as a physician or physician assistant.
- (j) Under the terms of either reentry periods Subparagraph (h)(1) or (h)(2) of this Rule, the licensee may terminate the
- 7 relationship with the mentoring physician upon written notice to the Board. Such written notice shall state the reasons
- 8 for termination. The mentoring physician's approval is not required for the licensee to terminate this relationship. Upon
- 9 receipt of the notice of termination, the Board shall place the licensee's license on inactive status. Within six months
- 10 from the effective date of the mentoring physician's termination, the licensee shall provide a substitute mentoring
- 11 physician, who must be approved by the Board in writing, and resume the reentry plan upon such terms as are acceptable
- 12 to the Board. In such event, an amended reentry agreement must be executed prior to resumption of the reentry plan. If
- 13 licensee does not resume the reentry plan as required herein within six months from the effective date of the mentoring
- 14 physician's termination, then the Board shall not return the licensee to active status unless and until licensee applies and
- 15 is approved for reactivation of the license with a new reentry agreement and reentry plan, which must be in place before
- 16 licensee may resume practice as a physician or physician assistant.
- 17 (k) The licensee shall meet with members of the Board at such dates, times and places as directed by the Board to
- 18 discuss the licensee's transition back into practice and any other practice-related matters.
- 19 (<u>H)(g)</u> Unsatisfactory completion of the reentry plan agreement or practicing outside the scope of the reentry agreement,
- 20 as determined by the Board, agreement shall result in the automatic inactivation of the licensee's license, license unless
- 21 the licensee requests a hearing within 30 days of receiving notice from the Board.
- 22 (m)(h) If the Board determines the licensee has successfully completed Upon successful completion of the reentry plan,
- 23 agreement, the Board shall terminate the reentry agreement. agreement and notify the licensee that the license is no
- 24 longer restricted.
- 25
- 26 *History Note:* Authority G.S. 90-8.1; 90-14(a)(11a);
- 27 *Eff. March 1, 2011.*
- 28 <u>Amended Eff. January 1, 2016.</u>

3

1	21 NCAC 32B .1	1402 is amended, <mark>with changes,</mark> as published in 30:06 NCR pages 639-643 as follows:			
2					
3	21 NCAC 32B .1	1402 APPLICATION FOR RESIDENT'S TRAINING LICENSE			
4	(a) In order to obtain a Resident's Training License, an applicant shall:				
5	(1)	submit a completed application which can be found on the Board's website in the application section a	at		
6		http://www.ncmedboard.org/licensing, attesting under oath or affirmation that the information on the	e		
7		application is true and complete, and authorizing the release to the Board of all information pertaining	g		
8		to the application;			
9	(2)	submit documentation of a legal name change, if applicable;			
10	(3)	submit a photograph, two inches by two inches, affixed to the oath or affirmation which has been	n		
11		attested to by a notary public;			
12	(4)	submit proof on the Board's Medical Education Certification form that the applicant has completed a	ıt		
13		least 130 weeks of medical education. education to P. O. Box 20007, Raleigh, NC 27619 of	<mark>)r</mark>		
14		license@ncmedboard.org.			
15	(5)	furnish an original ECFMG certification status report of a currently valid ECFMG certification of the	e		
16		ECFMG if the applicant is a graduate of a medical school other than those approved by LCME, AOA	۱,		
17		COCA, or CACMS. The ECFMG certification status report requirement shall be waived if:			
18		(A) the applicant has passed the ECFMG examination and successfully completed an approve	d		
19		Fifth Pathway program (original <u>(the applicant shall provide an</u> ECFMG score transcri	ot		
20		from the ECFMG required); ECFMG); or			
21		(B) the applicant has been licensed in another state on the basis of a written examination before	e		
22		the establishment of the ECFMG in 1958;			
23	(6)	submit an appointment letter from the program director of the GME program or his or her appointed	d		
24		agent verifying the applicant's appointment and commencement date;			
25	(7)	submit two completed fingerprint record cards supplied by the Board; Board to P. O. Box 2000	<mark>7 ,</mark>		
26		Raleigh, NC 27619;			
27	(8)	submit a signed consent form allowing a search of local, state, and national files for any crimina	ıl		
28		record; record to P. O. Box 20007, Raleigh, NC 27619.			
29	(9)	pay a non-refundable fee pursuant to G.S. 90-13.1(b), plus the cost of a criminal background check	ς;		
30	(10)	provide proof that the applicant has taken and passed within three attempts:			
31		(A) the COMLEX Level 1, and each component of COMLEX Level 2 (cognitive evaluation and	d		
32		performance evaluation) and and, if taken, COMLEX Level 3; or			
33		(B) the USMLE Step 1 Step 1, and each component of the USMLE Step 2 (Clinical Knowledg	e		
34		and Clinical Skills); and Skills) and, if taken USMLE Step 3; and or			
35		(C) MCCQE Part 1 and, if taken, MCCQE Pat 2;			

1	(11)	In the event any of the above required information should indicate a concern about the applicant's
2		gualifications, upon request, the applicant shall supply any additional information the Board deems
3		necessary to evaluate the applicant's competence and character.
4	(b) In the event	any of the above required information should indicate a concern about the applicant's qualifications, an
5	<mark>An</mark> applicant sha	all be required to appear in person for an interview with the Board or its agent to evaluate the applicant's
6	competence and	character, if the Board needs more information to complete the application.
7	(c) If the application	ant previously held a North Carolina residency training license, the licensure requirements established by
8	rule at the time the applicant first received his or her North Carolina residency training license shall apply. Information	
9	about these Rules is available from the Board.	
10		
11	History Note:	Authority G.S. 90-8.1; 90-12.01; 90-13.1; <mark>90-14(a)</mark>
12		Eff. August 1, 2010;
13		Amended Eff. January 1, 2016; September 1, 2014; November 1, 2013; August 1, 2012; November 1,
14		2011.
15		

1 21 NCAC 32S .0202 is amended, with changes, as published in 30:06 NCR pages 639-643 as follows: 2 3 21 NCAC 32S .0202 **QUALIFICATIONS AND REQUIREMENTS FOR LICENSE** 4 (a) Except as otherwise provided in this Subchapter, an individual shall obtain a license from the Board before 5 practicing as a physician assistant. An applicant for a physician assistant license shall: 6 (1)submit a completed application, available at www.ncmedboard.org, to the Board; 7 (2)meet the requirements set forth in G.S. 90-9.3 and has not committed any of the acts listed in G.S. 8 90-14: 9 (3) supply a certified copy of applicant's birth certificate if the applicant was born in the United States 10 or a certified copy of a valid and unexpired U.S. passport. If the applicant does not possess proof 11 of U.S. citizenship, the applicant shall provide information about the applicant's immigration and 12 work status that the Board shall use to verify applicant's ability to work lawfully in the United 13 States: 14 (4) submit to the Board proof that the applicant completed a Physician Assistant Educational 15 Program. He or she shall also show successful completion of the Physician Assistant National 16 Certifying Examination; 17 (5) pay to the Board a non-refundable fee of two hundred dollars (\$200.00) plus the cost of a criminal 18 background check. There is no fee to apply for a physician assistant limited volunteer license; 19 submit National Practitioner Data Bank (NPDB) and Healthcare Integrity and Protection Data (6) Bank (HIPDB) reports. These reports shall be requested by the applicant and submitted to the 20 21 Board within 60 days of the request; 22 submit a Board Action Data Bank Inquiry report from the Federation of State Medical Boards (7)23 (FSMB). This report shall be requested by the applicant and submitted to the Board within 60 days 24 of the request; 25 (8) submit to the Board Board, at P. O. Box 20007, Raleigh, NC 27619, two complete original 26 fingerprint record cards, on fingerprint record cards supplied by the Board upon request; 27 submit to the Board, Board, at P. O. Box 20007, Raleigh, NC 27619 or license@ncmedboard.org, (9) 28 a signed consent form allowing a search of local, state, and national files to disclose any criminal 29 record: 30 (10)disclose whether he or she has ever been suspended from, placed on academic probation, expelled, 31 or required to resign from any school, including a PA educational program; 32 attest that he or she has no license, certificate, or registration as a physician assistant currently (11)33 under discipline, revocation, suspension, or probation, probation, or any other adverse action 34 resulting from a health care licensing board; 35 (12)certify that he or she is mentally and physically able to safely practice as a physician assistant and 36 is of good moral character;

1	(13)	provide the Board with three two original recommendation forms dated within six months of the
2		application. application, at P. O. Box 20007, Raleigh, NC 27619, These recommendations shall
3		come from persons under whom the applicant has worked or trained who are familiar with the
4		applicant's academic competence, clinical skills, and character. At least one reference form shall
5		be from a physician and two <u>the other</u> reference <mark>forms</mark> <u>form</u> must be from peers <u>a physician</u>
6		assistant peer under whom the applicant has worked or trained. References shall not be from any
7		family member or or, in the case of applicants who have not been licensed anywhere, references
8		shall not be from fellow students of the applicant's Physician Assistant Educational Program;
9	(14)	if two years or more have passed since graduation from a Physician Assistant Educational
10		Program, document that he or she has completed at least 100 hours of continuing medical
11		education (CME) during the preceding two years, at least 50 hours of which must be recognized
12		by the National Commission on Certification of Physician Assistants as Category I CME; and
13		CME. An applicant who is currently certified with the NCCPA will be deemed in compliance
14		with Subchapter (14) of this Rule; and
15	(15)	In the event any of the above required information should indicate a concern about the applicant's
16		qualifications, the applicant shall supply any other information the Board deems necessary to
17		evaluate the applicant's qualifications, including explanation or documentation of the information
18		required in this Rule.
19	(b) In the event	any of the above required information should indicate a concern about the applicant's qualifications,
20	<u>an</u> An applicant	a may be required to appear in person for an interview with the Board, if the Board determines in its
21	discretion that n	nore information is needed to evaluate the application.
22		
23	History Note:	Authority G.S. 90-9.3; 90-11; 90-18(c)(13); 90-18.1; <mark>90-14(a)</mark> ;
24		Eff. September 1, 2009;
25		Amended Eff. <u>January 1, 2016;</u> May 1, 2015; March 1, 2011.
26		