REQUEST FOR TECHNICAL CHANGE

AGENCY: North Carolina Medical Board

RULE CITATION: 21 NCAC 32R .0101

DEADLINE FOR RECEIPT: Thursday, August 11, 2016

<u>NOTE WELL</u>: This request when viewed on computer extends several pages. Please be sure you have reached the end of the document.

The Rules Review Commission staff has completed its review of this rule prior to the Commission's next meeting. The Commission has not yet reviewed this rule and therefore there has not been a determination as to whether the rule will be approved. You may call this office to inquire concerning the staff recommendation.

In reviewing these rules, the staff determined that the following technical changes need to be made:

In (a), line 4, please insert a comma after "training"

On line 5, what are "skills generally recognized and accepted by the profession"? Does your regulated public know?

What is the purpose of the sentence on lines 6 through 8? Why do you need this? (I note you don't have this statement in Rule 21 NCAC 32S .0216.)

On line 7, please insert a comma after "performance"

Also on line 7, please replace "which" with "that"

In (b), line 10, how is the determination of relevance made?

On lines 10 and 13, typically "at least" is not favored in rules, as rules set the minimum. However, I assume you wish to retain it here?

On lines 9 and 12, why are those with residency licenses exempted? Is it because they cannot make prescriptions without a supervising physician?

Also on line 13, are you relying upon the language in SL 2015-241 for "specifically"?

SECTION 12F.16.(c) In establishing the continuing education standards, the boards listed in subsection (b) of this section shall require that at least one hour of the total required continuing education hours consists of a course designed specifically to address prescribing practices. The course shall include, but not be limited to, instruction on controlled substance prescribing practices and controlled substance prescribing for chronic pain management.

Amanda J. Reeder Commission Counsel Date submitted to agency: July 28, 2016 In the History Note, consider adding G.S. 90-5.1(a)(3) and (a)(10), like you have in Rule 21 NCAC 32S .0216.

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

Amanda J. Reeder Commission Counsel Date submitted to agency: July 28, 2016 1 2 21 NCAC 32R .0101 is amended, with changes, as published in 30:22 NCR pages 2404-2405 as follows:

3 21 NCAC 32R .0101 CONTINUING MEDICAL EDUCATION (CME) REQUIRED

4 (a) Continuing Medical Education (CME) is defined as education, training and activities to increase knowledge and 5 skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of 6 clinical medicine, and the provision of healthcare to the public. The purpose of CME is to maintain, develop, or 7 improve the physician's knowledge, skills, professional performance and relationships which physicians use to 8 provide services for their patients, their practice, the public, or the profession.

- 9 (b) Each person licensed to practice medicine in the State of North Carolina Carolina, except those holding a
- 10 residency training license, shall complete at least 60 hours of Category 1 CME relevant to the physician's current or
- 11 intended specialty or area of practice every three years. <u>Beginning on [January 1, 2017,]</u> July 1, 2017, every
- 12 physician who prescribes controlled substances, except those holding a residency training license, shall [take]
- 13 <u>complete</u> at least three hours of CME, from the required 60 hours of Category 1 CME, that is designed specifically
- 14 to address controlled substance prescribing practices. The controlled substance prescribing CME shall include
- 15 instruction on controlled substance prescribing practices, recognizing signs of the abuse or misuse of controlled
- 16 <u>substances, and controlled substance prescribing for chronic pain management.</u>
- (c) The three year period described in Paragraph (b) of this Rule begins on the physician's first birthday followinginitial licensure.
- 19
- 20 History Note: Authority G.S. 90-14(a)(15);
- 21 *Eff. January 1, 2000;*
- 22 Amended Eff. August 1, 2012; January 1, 2001;
- 23 Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1,
- 24 2016.
- 25 Amended Eff. <u>September 1, 2016;</u>

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In reviewing these rules, the staff determined that the following technical changes need to be made:

On lines 4 and 11, typically "at least" is not favored in rules, as rules set the minimum. However, I assume you wish to retain it here?

On line 5, replace "must" with "shall"

On lines 7 through 9, does the 1999 requirement apply to the birthday or the first birthday? I think this can be clearer.

On line 10, please replace "must" with "shall"

On line 11, are you relying upon the language in SL 2015-241 for "specifically"?

SECTION 12F.16.(c) In establishing the continuing education standards, the boards listed in subsection (b) of this section shall require that at least one hour of the total required continuing education hours consists of a course designed specifically to address prescribing practices. The course shall include, but not be limited to, instruction on controlled substance prescribing practices and controlled substance prescribing for chronic pain management.

On line 12, please delete the comma after "CME"

On line 13, do you mean to state "controlled substance prescribing <u>practices</u>" to be consistent with Rule 21 NCAC 32R .0101?

In (c), lines 15, 16, and 17, what is "current"?

On line 16, replace "must" with "shall"

I suggest making the sentence on lines 17 through 20 two sentences. End the first sentence after "Rule." On line 19. Then state "Physician Assistances shall complete..." On lines 19 and 20, what does this mean? I take it your regulated public knows but I'm not sure what this is.

In the History Note, why are you citing to 90-18(c)(13)?

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

Amanda J. Reeder Commission Counsel Date submitted to agency: July 28, 2016

1	21 NCAC 32S .0216 is amended, with changes, as published in 30:22 NCR pages 2404-2405 as follows:	
2 3	21 NCAC 32S	0216 CONTINUING MEDICAL EDUCATION
4	(a) A physician	assistant shall complete at least 100 hours of continuing medical education (CME) every two years,
5	at least 50 hours of continuing medical education (CME) every two years. which The CME must be recognized by	
6	the National Commission on Certification of Physician Assistants (NCCPA) as Category I CME. A physician	
7	assistant shall provide CME documentation for inspection by the board or its agent upon request. The two year	
8	period shall run from the physician assistant's birthday, beginning in the year 1999, or the first birthday following	
9	initial licensure, whichever occurs later.	
10	(b) Beginning on [January 1, 2017,] July 1, 2017, a physician assistant who prescribes controlled substances must	
11	complete at least two hours of CME, from the required 50 hours, designed specifically to address controlled	
12	substance prescribing practices. The controlled substance prescribing CME, shall include instruction on controlled	
13	substance prescribing, recognizing signs of the abuse or misuse of controlled substances, and controlled substance	
14	prescribing for chronic pain management.	
15	(b)(c) A physician assistant who possesses a current certification with the NCCPA shall be deemed in compliance	
16	with the requirement of Paragraph (a) of this Rule. The physician assistant must attest on his or her annual renewal	
17	that he or she is currently certified by the NCCPA. Physician assistants who attest that they possess a current	
18	certificate with the NCCPA shall not be exempt from the controlled substance prescribing CME requirement of	
19	Paragraph (b) of this Rule and must complete the required two hours of controlled substance CME unless such CME	
20	is a component part of their certification activity.	
21		
22		
23	History Note:	Authority G.S. 90-5.1(a)(3); 90-5.1(a)(10); 90-9.3; 90-18(c)(13); 90-18.1;
24		Eff. September 1, 2009;
25		Amended Eff. May 1, 2015; November 1, 2010;
26		Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1,
27		2016.
28		Amended Eff. <u>September 1, 2016;</u>