

1 **21 NCAC 32M .0107 is proposed to be amended as follows:**

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3 **21 NCAC 32M .0107 CONTINUING EDUCATION (CE)**

4 (a) In order to maintain nurse practitioner approval to practice, the nurse practitioner shall earn 50 contact hours of
5 continuing education activity every two years, beginning with the first renewal after initial approval to practice has
6 been granted. A minimum of 20 hours of the required 50 hours must be in the advanced practice nursing population
7 focus of the NP role. The 20 hours must have approval granted by the American Nurses Credentialing Center
8 (ANCC) or Accreditation Council on Continuing Medical Education (ACCME), or by a national accredited provider
9 of nursing continuing professional development, or nurse practice-relevant courses in an institution of higher
10 learning. A nurse practitioner who possesses a current national certification by a national credentialing body shall be
11 deemed in compliance with the requirement of Paragraph (a) of this Rule.

12 (b) Prior to prescribing controlled substances as the same are defined in 21 NCAC 32M .0109(b)(2), nurse
13 practitioners shall have completed a minimum of one CE hour within the preceding 12 months on 1 or more of the
14 following topics:

- 15 (1) Controlled substances prescription practices;
- 16 (2) Prescribing controlled substances for chronic pain management;
- 17 (3) Recognizing signs of controlled substance abuse or misuse; or
- 18 (4) Non-opioid treatment options as an alternative to controlled substances.

19 (c) Nurse practitioners who complete the federally required training under the Medication Access and Training
20 Expansion Act (MATE) shall be deemed in compliance with the controlled substance prescribing requirements of
21 this Rule for the two-year CE period in which the MATE training was completed.

22 ~~(d)~~ (d) Documentation of all CE completed within the previous five years shall be maintained by the nurse
23 practitioner and made available upon request to either Board.

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25 *History Note: Authority G.S. 90-5.1(a)(3); 90-8.2; 90-18(c)(14); S.L. 2015-241, s. 12F;*

26 *Eff. January 1, 1996;*

27 *Amended Eff. August 1, 2004; May 1, 1999;*

28 *Recodified from Rule .0106 Eff. August 1, 2004;*

29 *Amended Eff. December 1, 2009; April 1, 2008;*

30 *Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1,*
31 *2016;*

32 *Amended Eff. April 1, 2024; June 1, 2023; June 1, 2021; March 1, 2017.*

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1 **21 NCAC 32R .0101 is proposed to be amended as follows:**

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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 a physician uses to provide
8 services for his or her patients and practice, the public, or profession.

9 (b) A physician licensed to practice medicine in the State of North Carolina, except those physicians 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 3 years. Every physician who prescribes controlled substances, except
12 those physicians holding a residency training license, shall complete at least 3 hours of CME from the required 60
13 hours of Category 1 CME designed specifically to address controlled substance prescribing practices. The controlled
14 substance prescribing CME shall include instruction on controlled substance prescribing practices and controlled
15 substance prescribing for chronic pain management. CME that includes recognizing signs of the abuse or misuse of
16 controlled substances, or non-opioid treatment options shall qualify for the purposes of this Rule. Physicians who
17 complete the federally required training under the Medication Access and Training Expansion Act (MATE) shall be
18 deemed in compliance with the controlled substance prescribing requirements of this Rule for the three-year CME
19 period in which the MATE training was completed.

20 (c) The three-year period described in Paragraph (b) of this Rule begins on the physician's birthday following the
21 issuance of his or her license.

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23 *History Note: Authority G.S. 90-5.1(a)(3); 90-5.1(a)(10); 90-14(a)(15); S.L. 2015-241, s. 12F.16(b) and*
24 *12F.16(c);*
25 *Eff. January 1, 2000;*
26 *Amended Eff. August 1, 2012; January 1, 2001;*
27 *Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1,*
28 *2016;*
29 *Amended Eff. April 1, 2024; April 1, 2020; September 1, 2016.*

1 **21 NCAC 32S .0216 is proposed to be amended as follows:**

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3 **21 NCAC 32S .0216 CONTINUING MEDICAL EDUCATION**

4 (a) A physician assistant shall complete at least 50 hours of Continuing Medical Education (CME) every two years.
5 The CME shall be recognized by the National Commission on Certification of Physician Assistants (NCCPA) as
6 Category I CME. The physician assistant shall provide CME documentation for inspection by the Board or its agent
7 upon request. The two-year period shall begin on the physician assistant's birthday following the issuance of his or
8 her license.

9 (b) A physician assistant who prescribes controlled substances shall complete at least two hours of CME, from the
10 required 50 hours, designed specifically to address controlled substance prescribing practices. The controlled
11 substance prescribing CME shall include instruction on controlled substance prescribing practices and controlled
12 substance prescribing for chronic pain management. CME that includes recognizing signs of the abuse or misuse of
13 controlled substances, or non-opioid treatment options shall qualify for purposes of this Rule.

14 (c) A physician assistant who possesses a current certification with the NCCPA shall be deemed in compliance with
15 the requirement of Paragraph (a) of this Rule. The physician assistant shall attest on his or her annual renewal he or
16 she is currently certified by the NCCPA. Physician assistants who attest he or she possesses a current certificate with
17 the NCCPA shall not be exempt from the controlled substance prescribing CME requirement of Paragraph (b) of this
18 Rule. A physician assistant shall complete the required two hours of controlled substance CME unless the CME is a
19 component part of their certification activity. Physician assistants who complete the federally required training
20 under the Medication Access and Training Expansion Act (MATE) shall be deemed in compliance with the
21 controlled substance prescribing requirements of this Rule for the two-year CME period in which the MATE
22 training was completed.

23 (d) Courses pertaining to interprofessional continuing education and courses pertaining to cultural competency or
24 implicit bias training shall qualify for any CME hours required under this Rule so long as such courses are approved
25 by the NCCPA.

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27 *History Note: Authority G.S. 90-5.1(a)(3); 90-5.1(a)(10); 90-18.1; S.L. 2015-241, 12F.16(b) and 12F.16(c);*
28 *Eff. September 1, 2009;*
29 *Amended Eff. May 1, 2015; November 1, 2010;*
30 *Pursuant to G.S. 150B-21.3A rule is necessary without substantive public interest Eff. March 1,*
31 *2016;*
32 *Amended Eff. April 1, 2024; January 1, 2022; April 1, 2020; September 1, 2016.*
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