

**Note from the Codifier:** The OAH website includes notices and the text of proposed temporary rules as required by G.S. 150B-21.1(a1). Prior to the agency adopting the temporary rule, the agency must hold a public hearing no less than five days after the rule and notice have been published and must accept comments for at least 15 business days. For questions, you may contact the Office of Administrative Hearings at 919.431.3000 or email oah.postmaster@oah.nc.gov.

## TITLE 21 – OCCUPATIONAL LICENSING BOARDS AND COMMISSIONS

### CHAPTER 32 – NORTH CAROLINA MEDICAL BOARD

*Notice is hereby given in accordance with G.S. 150B-21.1 that the Medical Board intends to adopt the rule cited as 21 NCAC 32B .1707.*

**Codifier of Rules** approved this rule as an emergency rule effective March 20, 2020 and received for publication the following notice and proposed temporary rule on March 11, 2020.

**Public Hearing:**

**Date:** April 15, 2020

**Time:** 10:00 a.m.

**Location:** North Carolina Medical Board, 1203 Front Street, Raleigh, NC 27609-1100

**Reason for Proposed Temporary Action:** A serious and unforeseen threat to the public health, safety, or welfare. On March 10, 2020, the Governor of North Carolina, by issuing Executive Order No. 116, declared a state of emergency to coordinate a response and enact protective measures to help prevent the spread of COVID-19. The COVID-19 is a respiratory disease that can result in serious illness or death. The COVID-19, previously unidentified in humans, spreads easily from person to person. Once an outbreak of the COVID-19 begins, it is difficult to contain. The World Health Organization, the Center for Disease Control and Prevention, and the United States Department of Health and Human Services have declared COVID-19 a public health threat and emergency. Section 16 of Executive Order No. 116 temporarily waives licensure requirements for healthcare providers licensed in other states, territories, and the District of Columbia. This waiver of licensure will help alleviate any healthcare provider shortage resulting from a COVID-19 outbreak in North Carolina. The Medical Board seeks to help increase the pool of qualified healthcare providers who can provide assistance with a COVID-19 outbreak by creating an expedited process by which physicians and physician assistants with inactive North Carolina medical licenses may obtain a temporary emergency license.

**Comment Procedures:** Comments from the public shall be directed to: Lynne Taylor, North Carolina Medical Board, 1203 Front Street, Raleigh, NC 27609; phone (919) 326-1100; email lynne.taylor@ncmedboard.org. The comment period begins March 18, 2020 and ends April 15, 2020.

### SUBCHAPTER 32B – LICENSE TO PRACTICE MEDICINE

#### SECTION .1700 – OTHER LICENSES

#### 21 NCAC 32B .1707 LIMITED LICENSE FOR DISASTERS AND EMERGENCIES FOR PHYSICIANS AND PHYSICIAN ASSISTANTS WITH INACTIVE NORTH CAROLINA LICENSES.

(a) The Board shall waive the requirements for licensure in the circumstances set forth in G.S. 90-12.5.

(b) Limited Emergency License: Physicians and physician assistants who do not have an active medical license issued by any jurisdiction, but who at one time had a full and unrestricted North Carolina medical license, may apply for a limited emergency license on the following conditions:

- (1) The applicant must certify and provide information sufficient to prove that he or she has practiced clinical medicine for at least eighty hours within the past two years;
- (2) The applicant must have maintained an active and unrestricted medical license continuously for the ten-year period prior to going inactive;
- (3) The applicant shall not have received any public discipline or inactivated his or her license while under investigation with such inactivation being reported to the National Practitioner Data Bank; and
- (4) During the declared state of emergency, the physician or physician assistant shall limit his or her medical practice to the area of practice that he or she engaged in prior to going inactive or another area in which he or she is competent to provide medical care.

(c) The applicant must complete a limited emergency license application.

(d) The Board may verify that the applicant practiced clinical medicine for at least eighty hours in the immediate two-year period.

(e) In response to a declared disaster or state of emergency and in order to best serve the public interest, the Board may limit the physician's or physician assistant's scope of practice.

(f) The Board shall have jurisdiction over all physicians and physician assistants practicing under this Emergency Rule for all purposes set forth in or related to Article 1 of Chapter 90 of the North Carolina General Statutes, and such jurisdiction shall continue in effect even after such physician and physician assistant has stopped practicing medicine under this Emergency Rule or the Limited Emergency License has expired.

(g) This license shall be in effect for the shorter of:

- (1) ninety days from the date it is issued; or

(2) thirty days after a statement by an appropriate authority is made that the emergency or disaster declaration has been withdrawn or ended and, at such time, the license issued shall become inactive.

(h) The physician assistant must practice under the direct supervision of an on-site physician and the supervising physician must be licensed in this State, approved to practice in this State during a disaster or state of emergency pursuant to G.S. 90-12.5, or approved under this Rule;

(i) Physician assistants and physicians practicing pursuant to this Rule are not required to maintain on-site documentation describing supervisory arrangements and instructions for prescriptive authority as otherwise required by 21 NCAC 32S .0213.

Authority G.S. 90-5.1(a)(3); 90-12.5.